

Ecological Risk Factors for Symptoms of Depression Among
Adolescents From Separated and Divorced Families

by

Rebecca Broder

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presented to the University of Manitoba
in fulfillment of the
thesis requirement for the degree of
Ph.D.
in
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**ECOLOGICAL RISK FACTORS FOR SYMPTOMS OF DEPRESSION AMONG
ADOLESCENTS FROM SEPARATED AND DIVORCED FAMILIES**

BY

REBECCA BRODER

**A Thesis submitted to the Faculty of Graduate Studies of the University of Manitoba
in partial fulfillment of the requirements of the degree of**

DOCTOR OF PHILOSOPHY

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ABSTRACT

Based on current figures, 30 to 60% of North American children will experience their parents' marital breakdown (e.g., Burch & Madan, 1986). Frequent problems with depression have been observed among children in such families (e.g., Wallerstein & Kelly, 1980a). Nonetheless, little is known about what might place them at risk for depressive symptoms, and research on teenagers' adjustment following parental separation or divorce is scant.

This study assessed an ecological model (cf Bronfenbrenner, 1977a, 1977b; Kurdek, 1981) of the factors predicting self-reported symptoms of depression among adolescents from single-parent separated or divorced families. In addition to the time since the marital breakdown, the model incorporated variables pertaining to: family stressors and economic resources (i.e., the exosystem); teen peer social support, and problems in the parent-child and inter-parental relationships (i.e., the microsystem); and teen characteristics including temperament, divorce-related beliefs, gender, family background of depression, and pre-separation experience of psychological problems (i.e., the ontogenic system).

Separated or divorced single parents with at least one teenager, aged 14 and 19, were identified from Winnipeg Court of Queen's Bench, Family Division Court records. Of 502 families mailed surveys, 224 pairs of custodial parents and adolescent children (44.6%) took part.

Structural equation analysis (cf EQS, Bentler, 1989) indicated that the model provided a good overall fit. More extreme temperamental emotionality, being female, experiencing more stressful events, perceiving less peer social support, and having more problematic family relationships were the strongest direct predictors of more severe teen depressive symptoms. Worse family finances, more distorted divorce-related beliefs, and having a stronger family background of depression were indirectly associated with increased depressive symptoms due to the detrimental influence of these variables on the quality of family relationships. Girls also perceived more peer social support, which predicted fewer depressive symptoms.

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INTRODUCTION

The rate of divorce in Canada steadily increased following passage of the more liberal Divorce Act in 1968 (Statistics Canada, 1984, 1993). The crude divorce rate more than quadrupled from about 55 per 100,000 Canadians in 1968 to 259 per 100,000 in 1984 (Statistics Canada, 1985). While there is some indication that the divorce rate may be leveling off (Dumas & Peron, 1992; Statistics Canada, 1993), rates continue to be high, and in 1990 there were approximately 294 divorces per 100,000 Canadians (Statistics Canada, 1992).

Since passage of the 1968 Divorce Act, marital dissolutions have involved children to an increasing extent. In 1969, for example, 45% of Canadian divorces occurred in families with children (Schlesinger, 1977). By 1973, this figure had increased to 57% (Schlesinger, 1977), and remained roughly the same through to 1984 (Statistics Canada, 1985). Current figures indicate that approximately 62% of Canadian divorces occur in families with children (Statistics Canada, 1992).

Based on recent estimates, 30 to 60% of North American children and adolescents will experience their parents marital separation or divorce (Burch & Madan, 1986; Dornbusch, Carlsmith, Bushwall, Ritter, Leiderman, Hastorf & Gross, 1985; Furstenberg, Nord, Peterson & Zill, 1983; Glick, 1984; Sev'ler, 1992). This massive social change has triggered a great deal of concern about possible detrimental consequences for affected family members, especially children and adolescents (e.g., Barber & Eccles, 1992;

Chess, Thomas, Mittleman, Korn & Cohen, 1983b; Grych & Fincham, 1992; Hetherington, Cox & Cox, 1985; Kunz, 1992; Wallerstein, 1991; Wallerstein & Blakeslee, 1989). Unfortunately, in spite of a growing body of research and opinion on the subject, many questions regarding the short- and long-term effects of family rupture on children and adolescents remain unanswered (Abelsohn & Saayman, 1991; Amato & Keith, 1991; Barber & Eccles, 1992; Grych & Fincham, 1992; Kurdek, 1993; Wallerstein, 1991).

Investigators have most often focussed on preschool, latency-aged, or preadolescent children (Kunz, 1992), or they have lumped together offspring of widely disparate ages and developmental levels. However, evidence in the area of developmental psychopathology indicates that patterns of problem behavior and coping differ across childhood and adolescence (e.g., Achenbach & Edelbrock, 1981; Digdon & Gotlib, 1985; Garber, 1984; Goodyer & Cooper, 1993; Sroufe & Rutter, 1984). The small number of studies incorporating age comparisons provide evidence that adolescents respond to, and experience different types of problems than younger children in the wake of their parents' marital breakdown (e.g., Blum, Boyle & Offord, 1988; Brady, Bray & Zeeb, 1986; Hodges & Bloom, 1984; Kurdek, 1986; Kurdek, Blisk, & Siesky, 1981; Wallerstein, 1980, 1983, 1985a, 1985b, 1987; Wallerstein & Kelly, 1974, 1975, 1976, 1978). Beyond this, longitudinal data following children who were latency-aged or younger when their parents divorced indicates that the influence of the experience continues throughout adolescence and young adulthood (e.g., Chess et al., 1983b; Wallerstein, 1980, 1983, 1985a, 1985b, 1987; Wallerstein & Blakeslee, 1989). The comparative dearth of research on adolescent adjustment to parental separation and divorce thus represents an important gap in our understanding (Kunz, 1992).

There are a wide variety of theoretical perspectives (e.g., Bowlby, 1980; Brown & Harris, 1978; Freud, 1917/1950, Holmes & Rahe, 1967) which suggest that depression might be a common difficulty among children and adolescents experiencing their parents' marital breakdown. Among clinicians there is, in fact, apparent consensus that depression is often a reaction to parental divorce, especially among teenaged offspring (Atkeson, Forehand & Rickard, 1982; Deredyn, 1983; Dizenhuz, 1979; Schwartzberg, 1980; Wallerstein, 1980, 1987; Wallerstein & Kelly, 1975, 1980a, 1980b, 1980c). Nonetheless, symptoms of depression have rarely been used as an outcome variable in the literature on children and divorce, and there is little known about which aspects of parental marital breakdown and its sequelae might place teenagers at risk.

Although adolescence has historically been stereotyped as a period characterized by emotional instability and angst (Costello, Benjamin, Angold & Silver, 1991; Eccles, Midgley, Wigfield, Buchanan, Reuman, Flanagan & MacIver, 1993; McGee, Feehan, Williams, Partridge, Silva & Kelly, 1990; Petersen, Compas, Brooks-Gunn, Stemmler, Ey & Grant, 1993), epidemiological research indicates that depression and depressive symptoms in this age group are far from being indicators of a benign or inevitable developmental stage (e.g., Burke, Burke, Regier & Rae, 1990; McGee et al., 1990; Whitaker, Johnson, Shaffer, Rapaport, Kalikow, Walsh, Davies, Braiman & Dolinsky, 1990). Rather, there is ample evidence that the development and psychosocial competence of teenagers who experience depression or severe depressive symptoms can be substantially compromised (e.g., Fleming, Boyle & Offord, 1993; Harrington, Fudge, Rutter, Pickles & Hill, 1991; Keller, Beardslee, Lavori, Wunder & Samuelson, 1988; Kovacs & Goldston,

1991; Lewinsohn, Hops, Roberts, Seeley & Andrews, 1993a; McCauley, Myers, Mitchell, Calderon, Schloredt & Treder, 1993; Whitaker et al., 1990). More importantly, early onset depression may be an especially serious form of the syndrome, characterized by both sub-clinical symptoms which persist after alleviation of the depressive episode, and increased vulnerability to subsequent depression (e.g., Kovacs, Feinberg, Crouse-Novack, Paulauskas, Pollock & Finkelstein, 1984; Lewinsohn et al., 1993a; Lewinsohn, Roberts, Seeley, Rohde, Gotlib & Hops, 1994b). These findings further highlight the importance of addressing the relative scarcity of research on the risk factors associated with symptoms of depression among teenagers who have experienced their parents' marital breakdown.

The majority of attempts to study the influence of divorce on children and adolescents have focused on correlating maladaptive behavior to membership in a divorced or separated family (Kunz, 1992; Levitin, 1979; Shamsie, 1985). However, as research has accumulated, it has become clear that there is both considerable variability in children's adjustment to parental separation and divorce, and enormous complexity in the individual, family, and social processes involved (Amato & Keith, 1991; Emery, 1988; Emery, Hetherington & DiLalla, 1984; Grych & Fincham, 1992; Hetherington, 1989; Hodges, 1991; Kurdek, 1986; Wallerstein, 1991; Wallerstein & Blakeslee, 1989; Wallerstein, Corbin & Lewis, 1988).

In spite of this growing body of evidence, few studies have been theory-driven (Abelsohn & Saayman, 1991; Amato, 1993a; Kunz, 1992; Kurdek, 1986, 1993; Wallerstein, 1991), and there is a comparative shortage of integrating systems encompassing the multifaceted nature of the effects of marital breakdown on offspring which might guide empirical study of the

subject (Abelsohn & Saayman, 1991; Amato, 1993a; Kunz, 1992; Kurdek, 1981, 1986, 1993; Wallerstein, 1991). Nonetheless, the ecological perspective (cf Bronfenbrenner, 1979), as applied to children's divorce adjustment by Kurdek (1981), lays out the multitude of systems potentially affecting adaptation to this non-normative transition. It therefore provides one possible means of addressing the need for frameworks to guide and organize research on the subject, and comprises the conceptual underpinnings of the current investigation. The ecological perspective (cf Kurdek, 1981) implicates the

cultural beliefs, values and attitudes surrounding modern family life (the macrosystem), both the stability of the post-divorce environment and the social supports available to the restructured single-parent family (the exosystem), the nature of family interaction in the pre- and post-separation periods (the microsystem), and the child's individual psychological competencies for dealing with stress (the ontogenic system) (p. 856)

as affecting post-divorce adjustment (Atkeson et al., 1982).

Implicit in this conceptualization is the influence of time as an attribute of both the child and his or her environment. As such, research on children's adjustment to their parents' separation or divorce exemplifies a chronosystem design, which is one of the methodologies presented by Bronfenbrenner (Bronfenbrenner, 1986a, 1986b; Bronfenbrenner & Crouter, 1983) in his description of research applications of an ecological perspective. Bronfenbrenner (1986a) proposes the term, chronosystem, for describing cross-sectional or longitudinal research "that examines the influence on the person's development of changes...over time in the environments in which a person is living" (p. 724).

In this study, the research identifying risk factors for symptoms of depression among adolescents was integrated with that identifying variables associated with poor adaptation in teenagers from divorced families. The findings common to these two areas were combined to generate a chronosystem model of the factors that might predict depressive symptoms in adolescents who have experienced their parents' separation or divorce. In addition to the time since the decisive marital separation, the model combined variables on exosystem, microsystem, and ontogenic system levels. Exosystem variables included the family's socioeconomic resources, and the stress experienced by the family. On the level of the ontogenic system, the model incorporated teenager characteristics including temperament, divorce-related beliefs, gender, family background of depression, and experience of emotional or behavioral problems prior to the marital separation, while microsystem variables included peer social support perceived by teens, and severity of problems in the parent-child and inter-parental relationships.

Data were collected using a mail-out survey methodology in a community sample of teenagers and their custodial parents identified from Court files stored in the Clerk's Office of the Family Division of the Court of Queen's Bench in Winnipeg, Canada. The model was evaluated with structural equation modeling.

A necessary preliminary to describing the methods and results of the current study is the definition of terms. The constellation of symptoms associated with depression among adolescents, along with the evidence regarding the epidemiology of depression and depressive symptoms in this age group will be summarized. Theoretical perspectives that might be used

to predict adolescent depression as a sequela of parental separation or divorce are presented along with the ecological perspective and its application (cf Kurdek, 1981) to offspring's adaptation to parental divorce. This framework is then used to integrate the research on the variables that mediate post-divorce functioning in adolescents with the parallel evidence regarding risk factors for depressive symptomatology in this age group.

DEPRESSIVE SYMPTOMATOLOGY AMONG ADOLESCENTS

Diagnostic Criteria

Although there is a long history of debate regarding whether adolescents manifest depression and depressive symptoms differently from adults (e.g., Cantwell, 1982; Cantwell & Baker, 1991; Carlson & Cantwell, 1982; Craighead, 1991; Digdon & Gotlib, 1985; Goodyer & Cooper, 1993), current consensus is that the defining characteristics of a major depressive episode remain the same across the lifespan (Diagnostic and Statistical Manual of Mental Disorders (DSM-IV), American Psychiatric Association, 1994). According to the DSM-IV (1994), the cardinal symptom of a major depressive episode is prominent, persistent dysphoric mood, and/or loss of interest or pleasure that endures for at least two weeks. This dysphoric mood or anhedonia must be accompanied by at least four of the following: (1) changes in weight and/or appetite; (2) changes in sleep pattern; (3) changes in psychomotor functioning; (4) fatigue or loss of energy; (5) feelings of worthlessness, inappropriate guilt or self-reproach; (6) diminished ability to concentrate or indecisiveness; or (7) suicidal ideation or attempts.

While the DSM-IV (1994) indicates that the prominence of the characteristic symptoms of depression may change with age, the revised third edition of this manual (Diagnostic and Statistical Manual of Mental Disorders (DSM-III-R), American Psychiatric Association, 1987) provides

more detail on the subject. DSM-III-R (1987) presents a number of developmentally-related associated features specific to depressive episodes among adolescents, including negativistic or delinquent behavior and use of alcohol or illicit drugs. Feelings of wanting to leave home, of not being understood, restlessness, grouchiness, and aggression are also cited as are sulkiness, and withdrawal from social activities. School difficulties are probable, according to both DSM-IV (1994) and DSM-III-R (1987). Other associated features include: inattention to personal appearance, increased emotional lability, and particular sensitivity to rejection (DSM-III-R, 1987).

Limits of the Depressive Phenomena Being Studied

Understanding of the literature on adolescent depression is complicated by the numerous usages of the term "depression" (Angold, 1988a, 1988b; Cantwell, 1982; Cantwell & Baker, 1991; Carlson, 1981; Carlson & Cantwell, 1980; Compas, Ey & Grant, 1993; Gittleman-Klein, 1977; Kovacs & Beck, 1977; Nurcombe, Seifer, Scioli, Tramontana, Grapentine & Beauchesne, 1989; Pearce, 1977; Petersen et al., 1993; Snaith, 1993; Weiner & Hendren, 1983). According to Angold (1988a), "depression" is used to describe a variety of affective phenomena including ordinary unhappiness, a personality style, and a single symptom associated with numerous medical and psychiatric ailments. The term is used to denote a syndrome which has unclear boundaries with normality, and is defined by a constellation of regularly co-occurring symptoms (Angold, 1988a). It is also used to refer to a disorder identified based on an a priori standard of what is normal, and to a disease with distinctive genetic etiology, and prognosis (Angold, 1988a).

A great deal of confusion has resulted from these multiple uses of the term "depression" (Angold, 1988a, Cantwell, 1982; Compas et al., 1993; Kovacs & Beck, 1977; Petersen et al., 1993; Snaith, 1993). This has been exacerbated by the failure of many investigators to specify which of the above definitions they have used as the basis for their research (Angold, 1988a). Moreover, insufficient evidence has accumulated to justify conceptualization of adolescent depression as either a disease or a disorder (Angold, 1988a, 1988b; Angold & Costello, 1993; Kolvin, Barrett, Bhate, Berney, Famuyiwa, Fundudis & Tyrer, 1991). The gradient between self-reported depressive symptoms and diagnosed depression also remains unclear (Angold, 1988a, 1988b; Boyd & Weissman, 1982; Garrison, Schluchter, Schoenbach & Kaplan, 1989; Gjerde, J. Block & J. H. Block, 1988; Klerman, 1976; Nurcombe et al., 1989).

The current study is based on self-report measures of depressive symptoms which, although psychometrically sound, are not accurate enough to serve as the sole means of identifying "cases" of the syndrome (Angold, 1988a; Compas et al., 1993; Devins & Orme, 1985; Garrison, Addy, Jackson, McKeown & Waller, 1991; Kashani, Sherman, Parker & Reid, 1990; Roberts, Lewinsohn & Seeley, 1991). Depressive symptoms were therefore treated as a continuous variable (cf Angold, 1988a; Gjerde et al., 1988). To prevent confusion, terms such as "depressive symptoms" were used in this study to differentiate this phenomenon from clinically diagnosed depression, and to acknowledge that self-reported affective symptomatology may or may not encompass depression as a syndrome, disorder or disease (cf Angold, 1988a, 1988b; Compas et al., 1993).

Prevalence Based on Clinical Diagnosis

Given the long history of debate about the features associated with depression among adolescents, the widely variant rates for the prevalence of depression among adolescents is not surprising (Angold, 1988a, 1988b; Garrison et al., 1989; Lewinsohn et al., 1993a; Reinherz, Giaconia, Lefkowitz, Pakiz & Frost, 1993a). Although consensus has by no means been reached, studies, nonetheless, seem to converge on a rate of 20 to 30% for the point prevalence of major depressive disorder (cf DSM-III-R, 1987, or Research Diagnostic Criteria (RDC), Spitzer, Endicott & Robins, 1978) in consecutive psychiatric in- and outpatient admissions (Apter, Bleich, Plutchik, Mendelsohn & Tyano, 1988; Bukstein, Glancy & Kaminer, 1992; Carey, Faulstich, Gresham, Ruggiero & Enyart, 1987; Carlson & Cantwell, 1979, 1980, 1982; Deykin, Buka & Zeena, 1992; Faulstich, Carey, Ruggiero, Enyart & Gresham, 1986; Feinstein, Blouin, Egan & Conners, 1984; Friedman, Clarkin, Corn, Aronoff, Hurt & Murphy, 1982; Goodyer, Kolvin & Gatzanis, 1987; Haley, Fine, Marriage, Moretti & Freeman, 1985; Haslam, 1978; Hershberg, Carlson, Cantwell, Strober, 1982; Hodges, McKnew, Burbach & Roebuck, 1987; Hudgens, 1974; Kolvin et al., 1991; Kovacs, Goldston & Gatsonis, 1993; Marriage, Fine, Moretti & Haley, 1986; Moretti, Fine, Haley & Marriage, 1985; Nelson, Politano, Finch, Wendel & Nayhal, 1987; Pearce, 1977; Robbins, Alessi, Cook, Poznanski & Yanchyshyn, 1982a; Robbins, Alessi, Yanchyshyn & Colfer, 1982b; Saylor, Finch & McIntosh, 1988; Stavrakaki, Vargo, Roberts & Boodoosingh, 1987; Steer, Kumar & Beck, 1993; Strober, Green & Carlson, 1981a, 1981b, 1981c; Welner, Welner & Fishman, 1979).

Estimates of the point prevalence of depression in adolescent community samples based on diagnostic interviews are generally substantially lower, ranging from between 0.4 to 15% (Bird, Canino, Rubio-Stipec, Gould, Ribera, Sesman, Woodbury, Huertas-Goldman, Pagan, Sanchez-Lacay & Moscoso, 1988; Brent, Perper, Moritz, Allman, Friend, Roth, Schweers, Balach & Baugher, 1993a; Chess, Thomas & Hassibi, 1983a; Deykin, Levy & Wells, 1987; Fergusson, Horwood & Lynskey, 1993; Fleming, Offord & Boyle, 1989; Fleming et al., 1993; Frost, Moffitt & McGee, 1989; Hammen, Adrian & Hiroto, 1988; Joffe, Offord & Boyle, 1988; Kashani, Beck, Hooper, Fallahi, Corcoran, McAllister, Rosenberg & Reid, 1987a; Kashani, Carlson, Beck, Hooper, Corcoran, McAllister, Fallahi, Rosenberg & Reid, 1987b; Kashani, Orvaschel, Rosenberg & Reid, 1989; Kashani & Simonds, 1979; Keller et al., 1988; Levy & Deykin, 1989; Lewinsohn et al., 1993a; Lewinsohn, Rohde, Seeley & Fischer, 1993c; McGee & Williams, 1988; McGee et al., 1990; Puig-Antich, 1982; Reinherz et al., 1993a; Reinherz, Giaconia, Pakiz, Silverman, Frost & Lefkowitz, 1993b; Roberts et al., 1991; Rohde, Lewinsohn & Seeley, 1991; Rutter, Graham, Chadwick & Yule, 1976; Velez, Johnson & Cohen, 1989; Whitaker et al., 1990; Yanchyshyn & Robbins, 1983). However, the majority of estimates converge on prevalences ranging from 4 to 8% (Bird et al., 1988; Brent et al., 1993a; Fleming et al., 1993; Hammen et al., 1988; Kashani et al., 1987a; Levy & Deykin, 1989; McGee et al., 1990; Velez et al., 1989; Whitaker et al., 1990).

Prevalence Based on Self-Report Questionnaires

In spite of the difficulties mentioned previously (e.g., Angold, 1988a; Devins & Orme, 1985; Garrison et al., 1991; Kashani et al., 1990; Roberts

et al., 1991), there is a body of research using self-report symptom checklists to identify "cases" of depression among adolescents. The bulk of these studies have been based on the Beck Depression Inventory (BDI, Beck, Ward, Mendelson, Mock & Erbaugh, 1961), and the Centre for Epidemiological Studies- Depression Scale (CES-D, Radloff, 1977), although other instruments such as the Children's Depression Inventory (CDI, Kovacs, 1982) (Doerfler, Felner, Rowlison, Raley & Evans, 1988; Smucker, Craighead, Craighead & Green, 1986) have been used with similar results.

On the BDI, most researchers report overall point prevalences of between 5 and 20% for moderate to severe depression among high school students (Albert & Beck, 1975; Connelly, Johnston, Brown, Mackay & Blackstock, 1993; Friedrich, Reams & Jacobs, 1982; Gibbs, 1985; Kaplan, Hong & Weinhold, 1984a; Kaplan, Nussbaum, Skomorowsky, Shenker & Ramsey, 1980; Reynolds, 1984; Roberts et al., 1991; Siegel & Griffin, 1984; Whitaker et al., 1990), although estimates as high as 33% (Teri, 1982) have been found. The prevalence of severe depression based on the BDI is much lower, in the 1 to 5% range in these community samples (Kaplan et al., 1980, 1984a; Roberts et al., 1991; Teri, 1982); this is roughly comparable to the estimates based on psychiatric interviews of adolescents in the general population described earlier.

Estimates based on the CES-D have typically been much higher, ranging from 29 to 53% (Doerfler et al., 1988; Radloff, 1991; Roberts et al., 1991; Schoenbach, Kaplan, Grimson & Wagner, 1982; Vulcano & Barnes, 1987). However, given that the cut-off score of 16 used in these studies designates mild depressive symptoms, this higher prevalence is not surprising. Other studies using more stringent thresholds with the CES-D

have yielded prevalences more consistent with those reported for the BDI above, ranging from 8 to 12% (Garrison et al., 1991; Roberts et al., 1991; Vulcano & Barnes, 1987). Identifying a "DSM-III-R-like" constellation of items on the CES-D has also generated comparable prevalence estimates (4%, Garrison et al., 1989; 7 to 28%, Radloff, 1991).

Prevalence in Divorced Samples

In spite of clinical concern about depression among offspring from divorced families, there is little research addressing this question aside from the work of Wallerstein and her associates. These authors consistently report that across the first 10 years of their study, the most widespread psychological difficulty was depression in their non-clinical sample of children and adolescents from divorced families. At 18 months post-separation, 25% of the sample were diagnosed with moderate to severe "childhood depression" (Wallerstein & Kelly, 1980b). At the five year mark, 37% of the children and adolescents were diagnosed as moderately to severely depressed (Wallerstein & Kelly, 1980b). Ten years post-separation, a comparable proportion (39%) of children aged 5 to 9 on initial interview and currently, adolescents were judged to be doing poorly "with respect to psychological intactness and their functioning in their environment" (p.203) (Wallerstein, 1987), a central feature of which was moderate to severe depressive symptoms (Wallerstein, 1987).

Unfortunately, the absence of a precise description of diagnostic criteria in this body of research makes it difficult to determine whether these authors' conceptualization of depression parallels those used by other investigators. Nevertheless, these rates seem to be on par with the

prevalence of depression diagnosed in adolescent psychiatric populations, and are substantially higher than the rates described above for clinical diagnosis in community samples.

A small number of investigators have studied membership in separated or divorced families as a risk factor for depression among adolescents. In spite of two studies showing no differences in the rate of depression as a function of parental marital status in child and adolescent medical (Hudgens, 1974) and psychiatric inpatients (Garber, Kriss, Koch & Lindholm, 1988), respectively, most investigators have found greater risk of diagnosed depression among offspring from single parent families in psychiatric samples (Caplan & Douglas, 1969; McConville & Boag, 1976; McConville, Boag & Purohit, 1973; Schoettle & Cantwell, 1980), children of depressed parents (Lavori, Keller, Beardslee & Dorer, 1988), and adolescents in the community (Fendrich, Warner & Weissman, 1990; Lewinsohn, Rohde, Seeley & Hops, 1991). Investigations of self-reported depressive symptoms in school populations are equally split between studies finding no significant differences (Gibbs, 1985; Reinherz, Stewart-Berghauer, Pakiz, Frost, Moeykens & Holmes, 1989; Schoenbach et al., 1982; Velez et al., 1989; Vulcano & Barnes, 1987) and those finding increased risk for depressive symptoms associated with living in a divorced family (Garrison et al., 1989; Handford, Mattison, Humphrey & McLaughlin, 1986; Peterson & Zill, 1986; Rubenstein, Heeren, Housman, Rubin & Stechler, 1989; Siegel & Griffin, 1984; Workman & Beer, 1992).

The results of this small body of research are thus equivocal as to whether parental divorce, per se, is a risk factor for either depressive symptoms or diagnosed depression among adolescents. This ambiguity

highlights the hazards of viewing parental divorce as a unitary event. Conversely, it emphasizes that while the processes of separation and divorce may not inherently increase risk for depression, they may, instead, be associated with greater likelihood of experiences which may be detrimental to offspring.

ADJUSTMENT TO PARENTAL SEPARATION AND DIVORCE

Separation and divorce are most accurately viewed as complex, ongoing transitions involving immensely complex cultural, social, legal, economic and psychological processes affecting all family members (Emery, 1988; Emery et al., 1984; Hodges, 1991; Kurdek, 1981, 1986, 1993; Wallerstein, 1984, 1991; Wallerstein & Blakeslee, 1989; Wallerstein et al., 1988). Marital breakdowns typically begin with a period of parental antagonism or estrangement, sometimes enduring for years (J. H. Block, J. Block & Gjerde, 1986; Dizenhuz, 1979), and involving multiple separations and reconciliations before the decisive move into separate residences (Atkeson et al., 1982; Dizenhuz, 1979; Hetherington, 1979a; Shamsie, 1985). This public statement of the failure of the marriage typically marks the beginning of a period of acute family crisis, overshadowed and fueled by the often-adversarial legal process of separation and/or divorce (J. H. Block et al., 1986; Dizenhuz, 1979; Emery, 1988; Emery et al., 1984; Hetherington, 1979a, 1980).

Many facets of this contact with the legal system may escalate the anxiety and stress experienced by children of the marriage. They are likely to be exposed to increased conflict between their parents. They may be left feeling uncertain about the stability of their life circumstances, including their relationships with their parents. Children may also experience skyrocketing loyalty conflicts, especially if they are drawn into the legal proceedings (Emery et al., 1984; Wallerstein & Kelly, 1980b).

Even when separation or divorce represents the best solution to a destructive family situation, most children of the marriage experience this transition process as painful, distressing and preoccupying (Hetherington, 1979a, 1980; Wallerstein, 1980). Close family relationships are disrupted, and the stress protection the nuclear family can provide is weakened (Wallerstein, 1983; Wallerstein & Blakeslee, 1989). Children's lives are irrevocably altered in pervasive and unpredictable ways, imposing powerful ongoing demands for psychological, familial, economic and social accommodation (Emery, 1988; Kurdek, 1988, 1986; Wallerstein, 1983; Wallerstein & Blakeslee, 1989).

Wallerstein (Wallerstein, 1983; Wallerstein & Blakeslee, 1989) defined six main psychological tasks which confront offspring as they grieve and adjust to the changes imposed by their parents' marital breakdown. They must first master their initial catastrophic reactions (e.g., Hetherington, 1979a; Shamsie, 1985; Wallerstein, 1980, 1983) to the extent that they can differentiate their fears and fantasies about what might happen from the actual changes which will occur. Other tasks include: disengaging themselves from the conflict between their parents and resuming their customary activities; mourning and coming to terms with the losses precipitated by the separation or divorce; resolving anger and blame toward their parents and any feelings of personal responsibility; accepting the permanence of the divorce; and achieving realistic hopes about romantic relationships.

Children and adolescents typically struggle with these tasks for years, for example, as they nurse hopes for parental reconciliation, or a loving relationship with a disinterested non-custodial parent (Wallerstein, 1983;

Wallerstein & Blakeslee, 1989; Wallerstein et al., 1988). Moreover, resolution of these psychological issues is also likely to be an ongoing process in which events, reactions or assumptions are continually re-evaluated in light of new experiences, changing capabilities, and developmentally-related needs (Emery, 1988; Kofkin & Rappucci, 1991; Wallerstein & Blakeslee, 1989).

THEORETICAL PERSPECTIVES RELATING PARENTAL DIVORCE AND SYMPTOMS OF DEPRESSION IN OFFSPRING

Parents' decision to divorce is thus inextricably embedded in an ongoing and multifaceted process of transition. For offspring, a major hurdle is presented by the multiple losses their parents' decision entails. This suggests that some of the theories which implicate loss or change in the emergence of depressive symptoms may also be used to explain the relationship between parental divorce and symptoms of depression in teenagers, although it is beyond the scope of this paper to present a comprehensive review of the subject.

Depression as Unresolved Grief

Many writers have sought to differentiate grief from depression (Worden, 1983). According to this perspective, uncompleted "grief work" is likely to result in clinical depression (Parkes & Weiss, 1983; Rando, 1984; Schneider, 1984; Worden, 1983). Unfortunately, there are a number of differences between the process of mourning a death, and working through parental divorce which may, in fact, increase the difficulty of the grief work required of teenagers in this latter situation (Wallerstein, 1983). Such differences include the potential for ongoing contact with the "lost" parent, the theoretical possibility of marital reconciliation, the greater likelihood of ambivalence toward one or both parents, and the loyalty conflicts which many offspring experience (Wallerstein, 1983).

Psychodynamic Perspectives

According to both Freud (1917/1950) and Abraham (1924) melancholia represents a pathological reaction to loss of a love object. Freud, for example, hypothesized that highly dependent individuals cannot obtain healthy separation between themselves and "introjected" images of a lost person. In the case of parental divorce, the adolescent's anger and hatred toward the "lost" non-custodial parent and/or the emotionally preoccupied custodial parent, may be directed inward and expressed in the guilt, low self-worth and self-blame of depression.

Bowlby (1973, 1980) similarly stressed that how personality develops depends on the adequacy of attachments formed to caregivers early in life. Childhood separation from parents, or exposure to negative or inconsistent caretaking, as is possible when the parents are having marital difficulties, may predispose offspring to depression due to the detrimental effect these experiences may have on the self-concept and patterns of interpersonal, emotional and cognitive functioning.

Behavioral Models

Behavioral models of depression generally define it as a behavioral deficit resulting from decrease or loss of reinforcement (e.g., Burgess, 1969; Costello, 1972; Ferster, 1973; Lazarus, 1968; Lewinsohn, 1974). Lewinsohn (1974), for example, postulated that depression ensues when environmental changes create a deficient rate of response-contingent positive reinforcement (Lewinsohn, 1974; Lewinsohn, Weinstein & Shaw, 1968). According to this perspective, decreased access to the

non-custodial parent, or his or her kin subsequent to parental separation or divorce would result in the loss of sources of reinforcement from the child's immediate environment, which, in turn, may precipitate decreases in activity level.

Cognitive Models

A number of models connect the development of depression following some negative experience such as parental divorce with the tendency to attribute causality in inaccurate and self-defeating ways (e.g., Abramson, Seligman & Teasdale, 1978; Beck, 1976; Sacco & Beck, 1985). Abramson and his colleagues (Abramson, Metalsky & Alloy, 1989; Alloy, Abramson, Metalsky & Hartlage, 1988), for example, posit that "hopelessness depression," occurs when negative events are attributed to stable, global, internal causes, and these events match an individual's depressogenic explanatory style. These factors determine the degree of hopelessness experienced, which, in turn, will precipitate depressive symptoms. Beck and his associates (Beck, 1983; Beck, Epstein & Harrison, 1983) similarly emphasize the necessity of congruence between stressors and personality style for the activation of depression-precipitating dysfunctional beliefs.

Family-Based Models

From a family systems perspective, depression reflects family dysfunction (e.g., Haley, 1976, 1980; Henggeler, 1982). Minuchin (1974), and other proponents of structural family theory (e.g., Weltner, 1982), for example, suggest that in pathological families the structure is either too rigid or too flexible to allow members to adjust optimally to change. If

family generational boundaries are unclear, a child may become triangulated in the divorcing parents' conflict, which, in turn, may result in possible negative psychological consequences such as depression in the child (e.g., Aponte & Van Duesen, 1981; Buchanan, Maccoby & Dornbusch, 1991; Minuchin, 1974). In addition, through mechanisms such as "detouring" or "scapegoating" (e.g., Minuchin, Rosman & Baker, 1978), a child's problematic behavior may serve to distract the family from the marital conflict. However, the resulting destructive parental attention may escalate the original child behavioral or psychological problems (Faubert, Forehand, Thomas & Wierson, 1990).

Life Stress Models

Stress-related models of depression postulate that exposure to stressful life events increases the likelihood of developing depression (Coddington, 1972a, 1972b; Holmes & Rahe, 1967; Johnson, 1982; Lloyd, 1980; Paykel, 1982), although there is disagreement as to what, exactly, makes an experience stressful. According to one view, parental divorce would cause stress because it necessitates social readjustment (e.g., Coddington, 1972a, 1972b; Holmes & Rahe, 1967). A second view posits that parental divorce would be stressful only if it were perceived as negative (e.g., Johnson & McCutcheon, 1981). Brown and his associates (Brown, & Harris, 1978; Brown, Harris & Bifulco, 1986; Brown, Harris & Copeland, 1977), alternately hypothesize that loss of sources of affectionate care increases vulnerability to depression because such loss decreases self-esteem, sense of control and ability to hold positive thoughts.

THE ECOLOGICAL PERSPECTIVE

Despite variations in the aforementioned theoretical perspectives, one of two relationships between parental loss and depression is generally hypothesized: that loss of a parental relationship directly precipitates depression, or that such loss is a risk factor which increases vulnerability to depression in response to subsequent adversity (Costello, 1982; Lloyd, 1980). In addition to interpersonal loss, each perspective implicates either an individual weakness (e.g., Freud, 1917/1950), a characteristic of the environment (e.g., Coddington, 1972a, 1972b), or the relationship between the individual and some facet of the immediate environment (e.g., Lewinsohn, 1974; Minuchin, 1974) in the etiology of depressive symptomatology. While these perspectives are far from mutually exclusive (Wallerstein, 1991), they share a failure to encompass the complexity of the factors thought to affect offspring's adjustment to divorce (e.g., Kurdek, 1981; Wallerstein & Blakeslee, 1989).

Parents' decision to separate or divorce is inextricably embedded in an ongoing and multifaceted process of transition for offspring (Emery, 1988; Wallerstein, 1983, 1991; Wallerstein & Blakeslee, 1989). An ecological perspective (cf Bronfenbrenner, 1977a, 1977b, 1979, 1986a, 1986b) provides one way of integrating these divergent etiological factors, which involve reciprocal processes and vulnerabilities that may be at work within the individual, the immediate environment, and the broader societal context (Belsky, 1980; Emery, 1988; Henggeler, 1982; Kurdek, 1981, 1986).

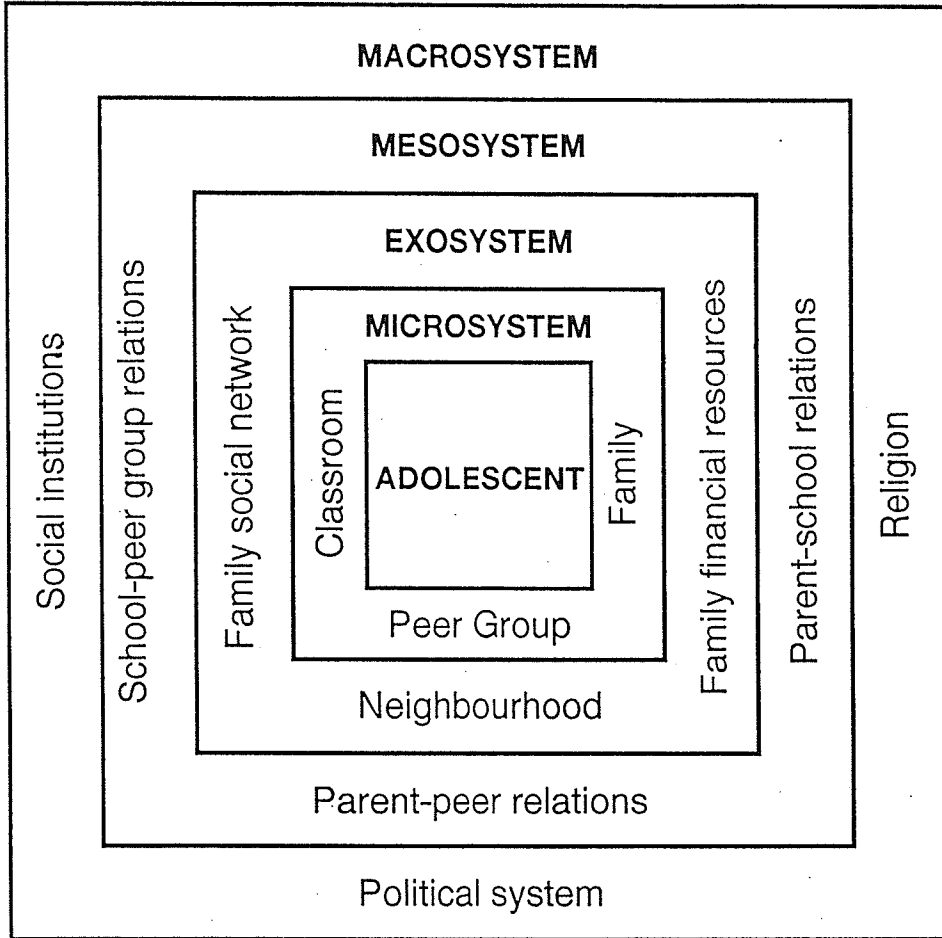


Figure 1. Bronfenbrenner's ecological model

According to an ecological approach, the adolescent is inextricably rooted at the centre of a series of nested, interconnected systems (Bronfenbrenner, 1977a, 1977b, 1979, 1986a, 1986b). Depressive symptomatology would therefore be multi-determined, emerging as a result of

progressive, mutual accommodation, throughout the life span, between a growing human organism and the changing immediate environments in which it lives, as this process is affected by relations obtaining within and between these immediate settings, as well as the larger social contexts, both formal and informal, in which the settings are embedded (Bronfenbrenner, 1977b, p. 514).

Bronfenbrenner (1977a, 1977b, 1979) divides these nested series of settings into four levels (see Figure 1). The teenager, with his or her genetic and acquired competencies and vulnerabilities exists within many immediate contexts, such as a family, a peer group, and a classroom. The web of relationships between the adolescent and these settings comprises the microsystem. The microsystem is, in turn, embedded within the exosystem which includes the other formal and informal social organizations that delimit what goes on in the adolescent's immediate environment. This includes family social networks and financial resources, neighborhood, and other social institutions as they determine with whom and in what ways teens spend time. The exosystem is nested within the mesosystem, which is the interrelations among the ever changing microsystems in the teenager's life such as the family, school and peer group.

The micro-, meso-, and exosystems are concrete manifestations of the overarching institutional and cultural patterns such as the prevailing economic, social, educational, political and religious institutions which together form the macrosystem. These institutions affect how the adolescent and his or her family are treated and interact with one another

by endowing meaning and motivation to particular agencies, social networks, and roles and the relationships between them.

Application to Offspring's Adjustment to Parental Divorce

Kurdek (1981) applied Bronfenbrenner's (1977a, 1977b, 1979) ecological framework to the interdependent psychological, familial, social, legal and cultural processes affecting child and adolescent adjustment to their parents' divorce. According to this perspective, offspring adjustment is a dynamic phenomenon, evolving as a result of the reciprocal influence of the individual and his or her environment, including the macro-, exo-, and microsystems.

The Macrosystem

The macrosystem as applied to marital dissolution pertains to the cultural milieu which affects how offspring perceive and are affected by their parents' divorce (Kurdek, 1981; Peterson, Leigh & Day, 1984). Norms regarding family structure (Dawson, 1991; Emery, 1988; Wallerstein, 1991), the social function of the family and marriage, gender roles, the prevailing approaches to child rearing, ambiguity regarding role models for the divorcing family (Zastowny & Lewis, 1989), the changing status of women (Sev'er, 1992), and the current view of children's rights are aspects of the macrosystem which may be particularly salient.

The current zeitgeist generally provides a more supportive ideological context for separated and divorced families than there has been in the past (Barber & Eccles, 1992; Emery, 1988; Kurdek, 1981; Sev'er, 1992).

Nonetheless, religious and cultural institutions that reject separation or divorce as solutions to an unhappy marriage, and stigmatize members of single-parent families continue to exist (Abelsohn & Saayman, 1991; Amato, 1991; Brandwein, Brown & Fox, 1974; Emery, 1988; Hodges, 1991; Santrock & Tracy, 1978). In addition, assessment of the influence of separation and divorce is complicated by the pervasive effect the high frequency of divorce has had on patterns of courtship, marriage and family functioning (Barber & Eccles, 1992; Wallerstein, 1984, 1991; Wallerstein & Blakeslee, 1989; Wallerstein et al., 1988).

The Exosystem

The exosystem represents the broad social factors which indirectly affect offspring by delimiting the opportunities in their immediate environment (Kurdek, 1981). This encompasses factors such as the degree of environmental change precipitated by the divorce, the formal and informal social supports available to the single-parent family, access to supportive legal services and other resources such as academic counselling for the single parent returning to school, custody procedures ensuring fair representation of children's interests, economically realistic child support, adequate daycare, and post-divorce counselling (e.g., Emery, 1988; Emery et al., 1984). A high level of environmental or economic change may, for example, foster feelings of depression in offspring by cutting them off from previous supports or opportunities (Kurdek, 1981), while parental access to social support may enhance sagging self-confidence which may, in turn, facilitate use of more positive parenting strategies (Kurdek, 1981; Peterson et al., 1984).

The Microsystem

The microsystem represents the interactive processes operative in offspring's immediate environment (Kurdek, 1981). The main focus here is on processes at work in the family, although other systems such as the peer group are also important. Features of the family including the psychological adjustment of the parents, the quality of the child's relationship with each parent, and the level of parental cooperation versus antagonism may directly affect offspring post divorce adjustment, as may characteristics of extra-familial systems such as the peer group, teachers, and extended family (e.g., Emery, 1988; Emery et al., 1984; Kurdek, 1981).

The Ontogenic System

This level represents the various personal strengths and vulnerabilities which may affect offspring adjustment to the marital breakdown (Kurdek, 1981). Levels of interpersonal reasoning and cognitive development may impede or facilitate understanding of the divorce (Kurdek, 1981). In addition, locus of control, temperament, and social skills may affect offspring's ability to allay some of the divorce's negative impact as may personal demographic characteristics such as current age, gender and age at the time of the decisive separation.

RISK FACTORS FOR POOR POST-DIVORCE ADAPTATION

Ecological approaches to separation and divorce have rarely been translated into research, although there is a growing body of evidence regarding factors and processes influencing children and adolescents' ability to adjust to parental marital breakdown. These studies, which will be reviewed along with the adolescent depression literature addressing comparable variables, generally fall into four main categories:

1. Research evaluating the influence of the time since the marital breakdown;
2. Studies assessing exosystem factors related to the environmental disruptiveness of the marital breakdown, and social and financial resources available to the family;
3. Investigations of microsystem variables related to decreased family functioning;
4. Studies evaluating the effects of ontogenic characteristics.

1. Time Since the Decisive Marital Breakdown

Historically, a central question in the divorce literature (e.g., the work of Wallerstein and her colleagues) has been whether post-separation behavioral and psychological difficulties experienced by offspring represent crisis reactions or more enduring changes. Assessment of this question has been extremely difficult, given, among other things, the general lack of clarity regarding the degree to which development is

continuous or discontinuous, individual differences in immediate and long-term responses to seemingly similar events, and the possibility of enduring effects of traumatic experiences that may be extremely subtle, or initially "silent" (Wallerstein, 1991; Wallerstein & Blakeslee, 1989; Wallerstein et al., 1988). An additional contributor to the difficulty of evaluating this question is the inherent confounding of the effects of current age, cohort, and the time since the marital breakdown (Emery, 1988).

There is evidence that effects may persist, and continue to evolve for years after the decisive parental split (e.g., Forehand, Wierson, Thomas, Fauber, Armistead, Kempton & Long, 1991b; Wallerstein, 1980, 1984, 1985a, 1985b, 1987; Wallerstein & Blakeslee, 1989; Wallerstein & Corbin, 1989; Wallerstein & Kelly, 1974, 1975, 1976, 1980a, 1980b, 1980c; Wallerstein et al., 1988). However, there is also support for the opposite position: that children in single-parent families manifest fewer behavioral and psychological problems as time passes (Frost & Pakiz, 1990; Grossman, Shea & Adams, 1980; Hainline & Feig, 1978; Hetherington et al., 1985; Isaacs, Leon & Donohue, 1987; Kulka & Weingarten, 1979; Kurdek et al., 1981; Parish & Wigle, 1985; Pearson & Thoennes, 1990; Smith, 1990).

Perhaps the best way to integrate this seemingly contradictory evidence is to conclude that although most children and adolescents function better as time passes, they may also continue to differ from their peers who have not had such experiences (Amato, 1993b; Isaacs et al., 1987). In support of this possibility, when time since the divorce was controlled in a number of studies, the severity of child behavior problems in clinical samples fell mid-way between levels indicating psychopathology and normalcy (Abelsohn & Saayman, 1991; Isaacs et al., 1987).

2. Exosystem Factors

Custody Arrangement

Besides being a time of crisis, separation and divorce, and subsequent single parenting provide a new context in which offspring develop (Barber & Eccles, 1992; Emery et al., 1984; Wallerstein, 1991). Approximately 85% of North American children from separated or divorced families end up in the physical custody of their mother (e.g., Statistics Canada, 1985). Our knowledge reflects this state of affairs in that relatively little is known about either the children being raised by their separated or divorced fathers (Demo, 1993; Emery, 1988; Marks & McLanahan, 1993; Meyer & Garasky, 1993), or the influence of joint versus single-parent custody (Emery, 1988; Pearson & Thoennes, 1990).

There has been much debate on the subject of custody, with proponents of joint, dual-residence arrangements arguing, for example, that they preserve continuity of care (e.g., Stack, 1976), and critics countering that they escalate inter-parental conflict and expose children to more parental animosity (e.g., Fineman & Opie, 1987; Johnston, Kline & Tschann, 1989). The amount of research on the subject is small, and, unfortunately, equivocal. Some researchers report no differences in parental conflict as a function of dual-residence custody (Maccoby, Depner & Mnookin, 1990). Others find more co-operation among such parents (Pearson & Thoennes, 1990), and lower symptom scores among children and teenagers who live half-time with each parent, compared to offspring in families with other custody arrangements (Wadsby & Svedin, 1993). There is, in addition, some evidence that fathers with joint custody, are more likely to fulfil their support obligations, regardless of whether physical care and control of the children is also divided (Stephen, Freedman & Hess, 1993).

While this research presents a rather positive picture of joint custody, there is also evidence that parents who opt for this arrangement are atypical in that they tend to be better educated, more economically advantaged, and older than parents choosing sole custody (Luepnitz, 1982). More importantly, findings from a longitudinal study of families entrenched in custody battles (Johnston et al., 1989) indicate that joint custody is far from universally successful or beneficial. Approximately five years post-separation, children and adolescents in court-ordered joint custody, or having extensive court-ordered visitation against the preferences of one or both parents were significantly more depressed and withdrawn than their peers in sole custody arrangements (Johnston et al., 1989). Dual-residence arrangements have similarly been associated with depression, anxiety and general deviance among adolescents when the parents' relationship is hostile (Buchanan et al., 1991). Conversely, there is evidence that adolescents benefit from this type of custody if the parents are able to co-operate (Buchanan et al., 1991).

Changes in Lifestyle

To begin to understand the effects of divorce on offspring's mental health it is also necessary to examine the often massive environmental changes that may accompany the marital rupture, beyond aspects related to child custody (Atkeson et al., 1982; Emery, 1988; Emery et al., 1984; Wallerstein, 1991). There is ample evidence that ongoing and potentially cascading environmental changes characterize children's experience of their parents' separation or divorce (e.g., Bane, 1976; Brandwein et al., 1974; Peterson et al., 1984). However, given that the bulk of custodial parents

are women, most is known about the experiences of children in single-mother families (Demo, 1993; Marks & McLanahan, 1993; Meyer & Garasky, 1993).

Perhaps most notable, is a lowered standard of living, especially for separated and divorced women with children. While this may be attributable to the fact that marital breakdown is more common among low income families (Espenshade, 1979), or to the inherently greater cost of maintaining two households (Emery, 1988), the economic consequences of divorce are disproportionately harsh for custodial mothers and their children.

This is, in part, explained by the inordinately low support payments awarded in most separation and divorce settlements, and by the inadequacy of many maintenance support programs (Emery et al., 1984; Stewart & Steel, 1990). For example, although approximately two-thirds to three-quarters of custodial mothers are entitled to child support, only half to two-thirds receive the full amount, and one quarter receive nothing (Teachman, 1991).

Also important is the fact that women are less likely to have the education, and job experience to obtain well paying jobs (Garfinkel & McLanahan, 1986; Hetherington, 1979b). In addition, when they do work, women tend to earn about one-third less than men in comparable employment (McLanahan & Booth, 1989).

As a result, roughly one in two single mothers lives below the poverty line, compared to one in ten non-custodial fathers, and one in ten married couples with children (Garfinkel & McLanahan, 1986). Approximately one third of these single mothers become poor following the breakdown of their marriage (Bane, 1976; Bloom, Asher & White, 1978; Duncan & Hoffman, 1985; Espenshade, 1979).

The stress that is attendant to such a lowered standard of living can be severe (Emery et al., 1984). Mothers who were previously at home are likely to have to seek employment (Atkeson et al., 1982; Emery, 1988; Emery et al., 1984). However, as detailed above, even when custodial mothers are employed, their salaries are likely to be low. Families may therefore have to move to less costly neighborhoods (Hetherington, 1980; Schlesinger, 1982; Wallerstein & Kelly, 1980b), resulting in loss of familiar home, friends, neighbors and school, and potential increased exposure to crime and delinquency (Hetherington, 1979b; McLanahan & Booth, 1989; Tessman, 1978).

According to Rutter (1979b, 1982, 1987), psychological risk increases with exposure to chronic stress or several concurrent stresses, such as those likely to occur for offspring in separating or divorcing families (e.g., Garvin, Kalter & Hansell, 1993; McLanahan & Booth, 1989). In the rupturing family, moreover, negative effects of stress are apt to be exaggerated by decreased access to potential buffers such as social support (Colletta, 1979; McLanahan & Booth, 1989; Rutter, 1979b; Tessman, 1978). Among single mothers, for example, lower income is associated with both increased exposure to negative life events, and decreased access to potential resources such as social support (Simons, Beaman, Conger & Chao, 1993a), while better income is associated with higher maternally rated family adaptability (Abelsohn & Saayman, 1991).

Only a small number of studies have addressed the effects of separation- or divorce-related life changes on either adolescent psychological functioning or depressive symptomatology (Atkeson et al., 1982; Grych & Fincham, 1992). Nevertheless, the chaotic life style common in divorcing

households (Bloom et al., 1978), and the frequency of reported negative life events (Abelsohn & Saayman, 1991; Forehand, Wierson, Thomas, Armistead, Kempton & Neighbors, 1991a; Hetherington et al., 1985; Kurdek & Blisk, 1983; Pearson & Thoennes, 1990; Stolberg & Anker, 1983; Tschann, Johnston, Kline & Wallerstein, 1990) covary with the magnitude of behavioral problems including symptoms of depression in offspring of all ages. More importantly, indicators of socioeconomic hardship such as welfare status and poverty also account for a significant proportion of the higher rates of psychopathology (Amato & Keith, 1991; Blum et al., 1988; Kurdek & Sinclair, 1988; Pearson & Thoennes, 1990; Smith, 1990) noted among children and teenagers in single-parent as compared to two-parent families.

Evidence regarding the influence of financial disadvantage on depression and symptoms of depression among teenagers is equivocal. A number of researchers have found that adolescents in lower socioeconomic status families were at greater risk for both depression and depressive symptoms than more advantaged teens (Friedrich et al., 1982; Garrison et al., 1989; Gibbs, 1985; Kaplan et al., 1984a; Lewinsohn, Clarke, Seeley & Rohde, 1994a; Reinherz et al., 1993b; Schoenbach et al., 1982; Siegel & Griffin, 1984; Velez et al., 1989), but other researchers have not found evidence of this relationship (Ambrosini, Metz, Bianchi, Rabinovich & Undie, 1991; Carey, Lubin & Brewer, 1992; Fauber, Forehand, Long, Burke & Faust, 1987; Lewinsohn et al., 1994b; McCauley et al., 1993; Reinherz et al., 1989, 1993b; Roberts & Sobhan, 1992; Stone, 1993).

There is, however, substantial convergent cross-sectional evidence of an inverse relationship between adolescent depression and depressive symptomatology and other negative circumstances which may be sequelae of

parental divorce such as geographic mobility (Gibbs, 1981, 1985), and more stressful life events (M. Adams & J. Adams, 1991; Armsden & Greenberg, 1987; Barrera, 1981; Berney, Bhate, Kolvin, Famuyiwa, Barrett, Fundudis & Tyrer, 1991; Brent, Perper, Moritz, Allman, Liotus, Schweers, Roth, Balach & Canobbio, 1993b; Chess et al., 1983b; Cohen-Sandler, Berman & King, 1982; Friedrich et al., 1982; Garrison, Jackson, Marsteller, McKeown & Addy, 1990; Glyshaw, Cohen & Towbes, 1989; Goodyer & Altham, 1991a, 1991b; Goodyer, Wright & Altham, 1990a, 1990b; Hammen et al., 1988; Holohan & Moos, 1987; Hops, Lewinsohn, Andrews & Roberts, 1990; Kandel, Raveis & Davies, 1991; Lewinsohn et al., 1994b; Newcomb, Huba & Bentler, 1986; Rowlison & Felner, 1988; Rubenstein et al., 1989; Siegel & Brown, 1988; Stewart, McKenry, Rudd & Gavazzi, 1994; Thomson & Vaux, 1986). There are, however, a small number of studies in which teen symptoms of depression and life stress (Chess et al., 1983a; Siegel & Griffin, 1984) did not vary with parental marital status.

Longitudinal findings regarding the relationship between negative life events and onset of depression or symptoms of depression are equally split between studies supporting (Allgood-Merten, Lewinsohn & Hops, 1990; Glyshaw et al., 1989; Lewinsohn et al., 1994b; Siegel & Brown, 1988), and failing to find evidence of the connection (Cohen, Burt & Bjorck, 1987; Goodyer, Germany, Gowrusankur & Altham, 1991; Swearingen & Cohen, 1985). These latter studies, however, indicate that the frequency of negative events is partly determined by initial levels of distress, suggesting the importance of ongoing stressful processes that might engender both maladjustment and stressful experiences (Cohen et al., 1987; Lewinsohn et al., 1994b; Swearingen & Cohen, 1985). In addition, one of the above studies found

that elevated levels of stressful events characterized teens before, during and after they were depressed (Lewinsohn et al., 1994b). Depression-prone adolescents thus may live in more stressful circumstances all of the time (Lewinsohn et al., 1994b).

Consistent with the mixed findings with regard to stress and economic hardship, children and adolescents from divorced families rate interpersonal events such as being blamed for the divorce, hearing their parents say bad things about one another, and arguments and physical fights between the parents rather than other sequelae such as moving, and lack of money as the worst and most upsetting divorce-related events (Wolchik, Sandler, Braver & Fogas, 1985b). Similarly, although adolescents' views of many divorce-related experiences become more positive with time, their evaluation of being caught in custody battles, having to take part in court proceedings, and deciding how to divide their time between their parents remains consistently negative (Kofkin & Rappucci, 1991).

There is also some evidence that family economic hardship indirectly influences children's psychological distress through its detrimental effects on the psychological and interpersonal functioning of the parents (Colletta, 1983; Conger, Conger, Elder, Lorenz, Simons & Whitbeck, 1993; Conger, Elder, Lorenz, Simons & Whitbeck, 1992; Conger, Ge, Elder, Lorenz & Simons, 1994; Elder, Van Nguyen & Caspi, 1985; Garvin et al., 1993; Kline, Johnston & Tschann, 1991; Lempers, Clark-Lempers & Simons, 1989; Simons, Lorenz, Wu & Conger, 1993b). In specific, parents who are already irritable due to financial pressure, are more likely to be angry at each other, and are more likely to respond with hostility to their children (e.g., Conger et al., 1992, 1994). Exosystem level sequelae such as

decreased socioeconomic status and moving may thus be less salient to offspring than microsystem level stressors, per se.

Changes in Family Social Support

Substantial change in family social networks is typical following marital breakdown (Hughes, Good & Candell, 1993; Marks & McLanahan, 1993; McLanahan, Wedemeyer & Adelberg, 1991; Stinson, 1991). Rands (1988), for example, found that adults lost approximately 40% of their social ties after marital separation. Reduced relationships with in-laws are especially common (Anspach, 1976; Spicer & Hampe, 1975; Stinson, 1991). Children are therefore apt to lose, or at least have less contact with kin of the non-custodial parent.

A great deal of research has evaluated the direct role of low social support in the etiology of depression among adults, as well as the importance of perceived social support in buffering the detrimental impact of stress (e.g., Cohen & Wills, 1985). Consistent with this focus, there is evidence of an association between lack of social support and poor adaptation, including symptoms of depression, among adults coping with divorce (Anspach, 1976; Brandwein et al., 1974; Colletta, 1979; Daniels-Mohring & Berger, 1984; Garvin et al., 1993; Hetherington, 1979b; Hetherington, Cox & Cox, 1982; Hughes et al., 1993; Kitson, Moir & Mason, 1982; Longfellow, 1979; Pett, 1982; Picard & Lee, 1991; Simons et al., 1993a; Spanier & Casto, 1979; Spanier & Thompson, 1984; Wallerstein & Kelly, 1980b).

There is some evidence of an eventual gain in parent network size compared to the pre-separation period (Hughes et al., 1993; Rands, 1988; Stinson, 1991; Wilcox, 1986). Children in divorced or separated families are also more integrated into the custodial parent's social life than children in married households (Stinson, 1991). Nevertheless, there is debate as to what characteristics of social networks are most helpful to either parent or child adaptation (Emery et al., 1984).

Single parents tend to report that their kin, especially parents and siblings, are important sources of instrumental and emotional support (Eggebeen & Hogan, 1990; Hogan, Hao & Parish, 1990; Marks & McLanahan, 1993; Rossi & Rossi, 1990). Sibling support has been associated with positive adjustment of divorced adults (Hughes et al., 1993). However, most evidence indicates negative effects of reliance on parents (Hughes et al., 1993; Kitson et al., 1982; Picard & Lee, 1991; Spanier & Thompson, 1984), perhaps because their support may be accompanied by interference in the custodial parents' disciplinary efforts (e.g., Milardo, 1987). There is also some evidence that the amount of conflict in the single parent's social network (Hughes et al., 1993), and economic disadvantage may mediate the relationship between social support and parent mental health (Simons et al., 1993a).

There has unfortunately been little attention to either the direct or indirect influence of such family social network change on children (McLanahan & Booth, 1989). In one suggestive study, an inverse relationship was found between mothers' perceived lack of social support available to the family and psychological distress among their children both cross-sectionally and one year later (Holahan & Moos, 1987).

Similarly, loneliness of the custodial parent is associated with increased risk for depression among offspring (Wallerstein, 1980).

A small number of other researchers have provided somewhat more direct evidence on the subject. Colletta (1979), for example, found that single mothers' reports of more social support, and more satisfaction with their support networks were associated with use of less authoritarian and less punitive parenting approaches. In another study, single-parent mothers who had the support of kin were more likely to espouse parenting practices characterized by warmth, acceptance and active behavioral monitoring (Taylor, Casten & Flickinger, 1993). This authoritative parenting style was, in turn, positively linked to adolescent self-reported adjustment (Taylor et al., 1993).

3. Microsystem Factors

Parental Conflict

The quality of the former spouse relationship likely has both direct and indirect implications for offspring's adjustment (e.g., Emery, 1988; Emery, Fincham & Cummings, 1992). Children may witness frequent parental conflict prior to, during, and long after the separation or divorce (Emery, 1982a, 1988; Hess & Camara, 1979; Hetherington, Cox & Cox, 1978; Johnston & Campbell, 1988; Johnston et al., 1989; Maccoby et al., 1990; Wallerstein & Kelly, 1980a, 1980b, 1980c). There is some evidence that parents who divorce with a lot of conflict only rarely shield their children from the marital hostility (Johnston & Campbell, 1988; Wallerstein & Blakeslee, 1989). Beyond this, the amount of acrimony during the initial separation period also predicts the parents' ability to co-parent, at least during

their first two years apart (Maccoby et al., 1990). In this regard, and in general, post-divorce co-parenting relationships tend to perpetuate pre-divorce patterns (Pearson & Thoennes, 1990).

The exact processes through which interparental conflict works its destructive influence on adolescent adjustment remain unclear (Buehler & Trotter, 1990; Emery, 1982a, 1988; Emery et al., 1992; Forehand, McCombs, Long, Brody & Fauber, 1988; Grych & Fincham, 1990, 1992; Long, Slater, Forehand & Fauber, 1988). Witnessing parental hostility may, in its own right, be a considerable and traumatic stressor (Emery, 1982a, 1988; Grych & Fincham, 1992; Hetherington et al., 1978; Jacobson, 1978b; Wolchik et al., 1985b). Offspring may feel extreme loyalty conflicts (Hetherington, 1979a; Tessman, 1978; Tschann, Johnston, Kline & Wallerstein, 1989), and may view as threatened what little remains of their sense of family stability (Forehand & McCombs, 1989; Hetherington et al., 1978; Wallerstein & Kelly, 1980b; Weiss, 1979). Conversely, if parents resolve their disagreements, children may see the family situation more positively, and thus, among other things, feel more secure about their relationship with the non-custodial parent (Peterson et al., 1984).

On a more indirect level, ongoing marital acrimony may expose offspring to both inappropriate parenting and maladaptive models of interpersonal conduct (J. H. Block et al., 1986; Emery, 1982a, 1988; Forehand & McCombs, 1989; Kline et al., 1991; Long, Forehand, Fauber & Brody, 1987; Long et al., 1988; McCombs, Forehand & Brody, 1987; Tschann et al., 1989, 1990). When parents are embroiled in conflict, the resulting home environment may be one of neglect (Emery, 1982a, 1988; Forehand & McCombs, 1989; Forehand et al., 1988; Long et al., 1988; McCombs et al., 1987; Tschann et al.,

1990). More importantly, these parents may be more prone to inconsistency, irritability, or rejection of their children (Emery 1982a, 1988; Fauber et al., 1990; Forehand & McCombs, 1989; Tschann et al., 1989, 1990). Parents may also actively compete with each other for their childrens' loyalty, or sabotage each others' efforts at child discipline (Emery, 1988; Emery et al., 1984).

Research consistently shows better offspring adjustment when parents divorce with less conflict, and higher risk of psychological and behavioral problems with increasing duration of disharmony (Black & Pedro-Carroll, 1993; Chess et al., 1983b; Emery & O'Leary, 1982; Fauber et al., 1990; Hess & Camara, 1979; Hetherington et al., 1978; Johnston & Campbell, 1988; Johnston et al., 1989; Kline et al., 1991; Kurdek & Sinclair, 1988; Kurdek et al., 1981; Long et al., 1988; Pearson & Thoennes, 1990; Porter & O'Leary, 1980; Reid & Crisafulli, 1990; Rosen, 1979; Rutter, 1971, 1979a, 1979b, 1987; Shaw, Emery & Tuer, 1993; Slater & Haber, 1984; Thomas & Forehand, 1993; Tschann et al, 1989, 1990; Wallerstein, 1980; Wallerstein & Kelly, 1980a, 1980b, 1980c). Enduring depressive symptomatology in adolescent offspring as long as five years post-divorce has also been associated with ongoing parental acrimony (J. H. Block, J. Block & Morrison, 1991; Johnston et al., 1989; Johnston, Gonzales & Campbell, 1987; Schwartzberg, 1980; Wallerstein, 1980; Wallerstein & Kelly, 1980b). Similarly, internalizing behavior problems were more frequent among adolescents in families where parental conflict continued post-divorce, compared to those from both intact families, and families where conflict decreased following the divorce (Brody & Forehand, 1990; Buehler & Trotter, 1990; Long et al., 1988).

Studies have also identified parental discord as a risk factor for adolescent symptoms of depression (Burt, Cohen & Bjorck, 1988; Friedrich et al., 1982; Gibbs, 1981; Handford et al., 1986; Poznanski & Zrull, 1970; Sandler, Reynolds, Kliwer & Ramirez, 1992), and diagnosed depression (Fendrich et al., 1990), regardless of family composition. There is, in addition, evidence that children and adolescents from high-conflict two-parent families demonstrate more severe emotional problems than their peers in either low-conflict divorced or ever-married families, both concurrently (Amato & Keith, 1991), and longitudinally (Reinherz et al., 1993b). In one dissenting longitudinal study, however, parental disharmony failed to predict depressive symptoms 10 years later in an adolescent community sample (Lefkowitz & Tesiny, 1984).

Although some figures indicate that at least one in eight to 10 Canadian women are battered by their partners (Guberman & Wolfe, 1985; MacLeod, 1987), and that physical or mental cruelty are cited as the reason for the marital breakdown in anywhere from 15 (Statistics Canada, 1992) to 41% (Statistics Canada, 1992) of divorce cases, the parental conflict research is surprisingly silent on the subject. Not unexpectedly, the few studies which have assessed this variable consistently report worse adolescent emotional and behavioral functioning when there is, or has been a history of violence between the separated or divorced parents (Pearson & Thoennes, 1990; Wallerstein & Blakeslee, 1989; Wallerstein & Corbin, 1989).

A relatively small body of research focusses on identifying the mechanisms by which exposure to parental conflict has its destructive effects on offsprings' mental health. There is a substantial accumulation of evidence from studies of teens in divorced families indicating the

detrimental effect of being or feeling triangulated in the marital acrimony (Buchanan et al., 1991; Buehler & Trotter, 1990; Kofkin & Rappucci, 1991; Tschann et al., 1989, 1990; Wallerstein, 1984, 1985a, 1985b, 1987; Wallerstein & Corbin, 1989), especially for teenagers living in dual residence custody arrangements (Buchanan et al., 1991).

Evidence also converges on the deleterious consequences of marital discord on parents' ability to parent. When there is more conflict, single parents are more likely to be emotionally remote, and unempathic, and make fewer demands for appropriate maturity from their children (Black & Pedro-Carroll, 1993; Fauber et al., 1990; Kline et al., 1991; Tschann et al., 1989, 1990; Wierson, Forehand, Fauber & McCombs, 1989). Conversely, regardless of parental marital status, the detrimental influence of marital acrimony on the psychological functioning of offspring seems to be mitigated if there is a positive relationship with one parent (Brody & Forehand, 1990; Buchanan et al., 1991; Forehand, Wierson, Thomas, Armistead, Kempton & Fauber, 1990b; Hess & Camara, 1979; Neighbors, Forehand & McVicar, 1993; Rutter, 1971, 1979a, 1979b, 1987).

Quality of the Relationship with the Non-Custodial Parent

Unfortunately, the most typical outcome of separation and divorce is gradual erosion of non-custodial parents' connection to and contact with their children (Amato, 1987; Emery, 1988; Emery et al., 1984; Furstenberg et al., 1983; Furstenberg & Nord, 1985; Hetherington, Cox & Cox, 1976, 1979a; Hetherington et al., 1978; Jacobson, 1978a, 1978b; Lamb, 1977; Schiesinger, 1982; Steltzer, 1991; Stephen et al., 1993; Stinson, 1991; Wallerstein, 1987; Wallerstein & Blakeslee, 1989; Weiss, 1979), although

visitation tends to be more stable when the non-custodial parent is the mother (Hodges, 1991), and when it is formalized in a separation or divorce settlement (Stephen et al., 1993; Stinson, 1991). Studies of non-custodial fathers indicate that approximately 25 (Steltzer, 1991; Stinson, 1991) to 50% (Koch & Lowery, 1984) have at least weekly contact with their children, while 30 (Steltzer, 1991) to 50% (Furstenberg & Nord, 1985) have not had any contact in the past year, including visits, letters, or phone calls. Fathers who visit regularly are also more likely to pay child support (Furstenberg et al., 1983; Steltzer, 1991; Stephen et al., 1993; Teachman, 1991), and to be more involved in co-parenting (Steltzer, 1991). Conversely, lack of visitation and financial abandonment of the children tend to coincide (Kurdek, 1986; Steltzer, 1991; Stephen et al., 1993).

The degree to which offspring view parental divorce as a crisis is linked to the extent of the non-custodial parent's involvement versus disengagement (Jacobson, 1978a; Peterson et al., 1984; Wallerstein & Blakeslee, 1989; Wallerstein & Kelly, 1980b). Even when absent, the non-custodial parent remains a significant presence in their offsprings' emotional lives (Wallerstein, 1984; Wallerstein & Blakeslee, 1989; Wallerstein et al., 1988).

In spite of the diversity of strongly held opinions regarding the desirability of visitation (Emery, 1988), evidence regarding the influence of actual access on offspring adjustment has been surprisingly sparse, and the findings inconsistent (Amato, 1993a; Amato & Keith, 1991; Kline et al., 1991; McLanahan & Booth, 1989). A number of researchers have found that ongoing communication (Jacobson, 1978c), and more frequent (Kurdek, 1986; Pearson & Thoennes, 1990; Tschann et al., 1989, 1990), and dependable

visits are generally associated with positive adjustment among offspring (Kurdek et al., 1981; Rosen, 1979; Wallerstein, 1980). However, other data indicate that frequency or quality of visits does not predict offspring functioning (Furstenberg, Morgan & Allison, 1987; Kline et al., 1991; Wallerstein & Corbin, 1989).

Evidence regarding other characteristics of visitation is also inconsistent. The quality of the relationship with the non-custodial father (Thomas & Forehand, 1993; Tschann et al., 1989; Wierson et al., 1989), and aspects of visits such as involvement in the non-custodial parent's day-to-day life (Hess & Camara, 1979) may be more important to positive child functioning than the frequency of contact per se. However, other studies indicate no effects of the quality of the relationship with the non-custodial parent (Furstenberg et al., 1987; Kline et al., 1991).

There is also some evidence that the non-custodial parent's maturity and mental health (Hetherington et al., 1976), and characteristics of the pre-separation parent-child relationship may be important mediators of the benefits of visitation. Children and adolescents who had a close relationship with the non-custodial parent prior to the divorce seem to be especially adversely affected by post-divorce distancing (Lamb, 1977). Conversely, lack of contact with a previously remote or abusive parent is associated with less separation trauma (Wallerstein & Kelly, 1980b). More frequent visitation may also be detrimental to children and adolescents when there is severe conflict between the ex-spouses (Johnston et al., 1989), although some studies report no such differences (Kline, Tschann, Johnston & Wallerstein, 1989; Pearson & Thoennes, 1990; Wolchik, Braver & Sandler, 1985a).

Not surprisingly, how children and adolescents perceive visitation seems to be important to post-separation adjustment. Wallerstein and her colleagues (Wallerstein, 1987; Wallerstein & Corbin, 1989), for example, found that at ten years post-separation only 25 to 30% of children viewed their relationship with the non-custodial father as adequate or good, and over 50% reported chronic feelings of rejection. Children and adolescents also negatively evaluate their relationship with the non-custodial parent more often than that with the custodial parent (Peterson & Zill, 1986), although this pattern seems to be less severe for non-custodial mothers (Furstenberg et al., 1983).

Children and adolescents who feel visiting arrangements are unsatisfactory, or feel their non-custodial parent is disinterested are more likely to experience low self-esteem and symptoms of depression (Wallerstein, 1980, 1987). Feeling rejected by the non-custodial parent is, in fact, one of the best predictors of symptoms of depression in adolescents up to ten years post-divorce (Peterson & Zill, 1986; Wallerstein & Kelly, 1980a, 1980b, 1980c; Wallerstein & Corbin, 1989), especially among teenaged girls (Black & Pedro-Carroll, 1993; Wallerstein & Blakeslee, 1989). On the other hand, non-custodial parents are more likely to visit when the relationship is supported by the custodial parent, and when the child expresses pleasure rather than anger (Wallerstein & Kelly, 1980a). The success of the child's relationship with the non-custodial parent thus may reflect numerous, inter-connected, reciprocal processes (Grych & Fincham, 1992). At minimum, spousal antagonism and mutual undermining may affect and be affected by negative child behavior. Both child behavior problems and spousal conflict may, in turn, contribute to

and be fueled by withdrawal, or use of destructive child rearing strategies by the non-custodial parent (Grych & Fincham, 1992).

It is also likely that the importance of, and needs met by the non-custodial parent vary with the age, and developmental level of the child (Amato, 1993a; Amato & Keith, 1991; Hodges, 1991). For example, children in their mother's care, especially girls, demonstrate an increased need for a relationship with their absent father during adolescence (Wallerstein, 1984; Wallerstein & Blakeslee, 1989; Wallerstein & Corbin, 1986; Wallerstein et al., 1988; Wallerstein & Kelly, 1980a). Teenagers, in particular, also experience substantial emotional turmoil around allocating time for visits due to tension between their preference for spending time with friends and their worry about hurting the non-custodial parent's feelings (Springer & Wallerstein, 1983).

Although inconsistent and difficult to quantify, there is some evidence that aspects of the post-separation relationship with the non-custodial parent and other factors relating to visitation may affect offspring adjustment. However, the small amount of prospective research on the subject indicates that dynamics of the parent-child relationship existing well before the marital breakdown are crucial to consider. For example, as long as eleven years prior to the marital dissolution, non-custodial fathers-to-be were more critical, inconsistent, disinterested, and argumentative with their sons than fathers who remained married (J. Block, J. H. Block & Gjerde, 1988; Shaw et al., 1993). These fathers' relationships with their daughters were somewhat more positive, but were still lacking compared to those in families that remained together (J. Block et al., 1988; Shaw et al., 1993). While closeness of the

pre-separation father-child relationship is one of the factors that predicts the frequency of subsequent visitation (Arditti & Keith, 1993), the process of disengagement, especially for fathers with sons, appears to begin well before the marital dissolution.

Little research in the area of depression has specifically addressed the father-child relationship. When it is assessed, however, paternal psychological difficulties (King, Segal, Naylor & Evans, 1993b), and a distant, or destructive father-child relationship (Barrera & Garrison-Jones, 1992; King et al., 1993b; Puig-Antich, Kaufman, Ryan, Williamson, Dahl, Lukens, Todak, Ambrosini, Rabinovich & Nelson, 1993) are consistently associated with adolescent depression and depressive symptoms.

Parental Adjustment

It is likely that some adults have traits and vulnerabilities that make them prone to marital difficulties, divorce, and problems adjusting to divorce (Amato, 1993a; Kitson & Morgan, 1990; Simons et al., 1993a). There is, for example, evidence that separation and divorce are more common among women with affective disorders than among those with no psychiatric diagnosis (Fendrich et al., 1990; Hammen et al., 1988). Marital breakdown is also likely to precipitate deterioration in parents' personal adjustment, particularly initially (Atkeson et al., 1982; Bruce & Kim, 1992; Grych & Fincham, 1992; Kitson & Morgan, 1990; Peterson et al., 1984; Wallerstein & Blakeslee, 1989).

Divorced adults are over-represented in both in- and out-patient psychiatric facilities (Bloom et al., 1978). In general population

samples, they, similarly, tend to exhibit worse functioning on a variety of psychological measures during the initial post-divorce period, compared to their married peers (Bruce & Kim, 1992; Forehand, Thomas, Wierson, Brody & Fauber, 1990a; Garvin et al., 1993; Hetherington et al., 1976, 1978; Thomas & Forehand, 1993). There is evidence that the psychological well being of divorced adults improves over the years following the marital rupture (Booth & Amato, 1991; Hetherington et al., 1978; Kitson & Morgan 1990; Wallerstein & Kelly, 1980a, 1980b, 1980c), but a significant minority, especially women who were over 40 at the time of the marital breakdown (Wallerstein & Blakeslee, 1989; Wallerstein et al., 1988), continue to report high rates of depression, unhappiness, and anger ten to 15 years after the marital breakdown (Wallerstein & Blakeslee, 1989).

Regardless of whether this decreased functioning was pre-existing, or precipitated by the marital breakdown (Bloom et al., 1978; Kelly & Wallerstein, 1977; Wallerstein & Kelly, 1974, 1975), it cannot help but affect offspring's ability to adjust (Grych & Fincham, 1992; Hetherington et al., 1978; Kline et al., 1991; Wallerstein & Blakeslee, 1989; Wallerstein & Corbin, 1989; Wallerstein & Kelly, 1975). Hetherington et al. (1979a), for example, found that positive coping of the custodial parent could buffer the effects of a poor relationship with the non-custodial parent. Symptoms of depression among teenaged offspring five and ten years post-divorce were predicted by the depression and loneliness of the custodial parent in another study (Wallerstein, 1980; Wallerstein & Blakeslee, 1989). Similarly, compared to married mothers, not only did divorced mothers report more depressive symptoms, and poorer parenting skills, their adolescent children demonstrated worse functioning on a

variety of dimensions, including internalizing and externalizing behavior problems, and prosocial skills (Forehand et al., 1990a). Moreover, maternal symptoms of depression had a direct negative effect on teen functioning as well as indirect effects due to its detrimental influence on parenting (Forehand et al., 1990a).

There is ample evidence that children of parents who are experiencing emotional difficulties, including depression, are at increased risk for depression and symptoms of depression, themselves (e.g., Anderson & Hammen, 1993; Beardslee, Keller, Lavori, Klerman, Dorer & Samuelson, 1988; Beardslee, Keller, Lavori, Staley & Sacks, 1993; Billings & Moos, 1983, 1985; Fendrich et al., 1990; Hammen, Gordon, Burge, Adrian, Jaenicke & Hiroto, 1987; King et al., 1993b; Lavori et al., 1988; Orvaschel, Walsh-Allis & Ye, 1988; Rae-Grant, Thomas, Offord & Boyle, 1989; Todd, Reich & Reich, 1994; Velez et al., 1989; Warner, Weissman, Fendrich, Wickramaratne & Moreau, 1992; Welner, Weiner, McCrary & Leonard, 1977). There is also some support for the existence of some degree of specificity in this relationship, in that children of depressed parents are at more risk for affective disorder than for other psychological difficulties (e.g., Beardslee et al., 1988; Downey & Coyne, 1990; Weintraub, 1987), although it remains unclear if this familial pattern applies to depressive symptoms, as well (Rende, Plomin, Reiss & Hetherington, 1993).

Although a genetic hypothesis is implicit in this research, direct tests have been hampered by the failure to pinpoint any genetic marker (Downey & Coyne, 1990; Faraone, Kremen & Tsuang, 1990). Family, twin and adoption studies do, nevertheless, provide evidence of family pedigrees for affective disorder (e.g., Cadoret, O'Gorman, Heywood & Troughton, 1985;

Todd et al., 1994). However, they also indicate that offspring risk for psychological problems cannot be attributed solely to genetic factors (Cummings & Davies, 1994; Downey & Coyne, 1990; Faraone et al., 1990; Rende et al., 1993; Rutter & Quinton, 1984).

In addition to genetic vulnerability, it is likely that children are at risk for psychological difficulties as a result of experiences stemming either directly, or indirectly from living with a parent who is depressed (Dodge, 1990; Downey & Coyne, 1990). Research in the area of depression converges on the existence of a relationship between parental distress, depressed mood or depression, and use of destructive child rearing approaches (e.g., Colletta, 1979; Fendrich et al., 1990; Forehand, Lautenschlager, Faust & Graziano, 1986; Jaenicke, Hammen, Zupan, Hiroto, Gordon, Adrian & Burge, 1987; Magnussen, 1991; Orvaschel, Weissman & Kidd, 1980; Susman, Trickett, Iannotti, Hollenbeck & Zahn-Waxler, 1985; Tarullo, De Mulder, Martinez & Radke-Yarrow, 1994; Todd et al., 1994; Weissman, Paykel & Klerman, 1972; Welner et al., 1977). This, in turn, is associated with offspring depressive symptoms (e.g., Conger et al., 1992, 1993; Forehand, McCombs & Brody, 1987; Symonds, 1968, 1970; Welner et al., 1977; Whitbeck, Hoyt, Simons, Conger, Elder, Lorenz & Huck, 1992). There is also one longitudinal study indicating that maternal stress and depression concurrently predicted a negative mother-child interactional style, which, in turn, predicted offspring depression six months later (Burge & Hammen, 1991).

Although such research is promising, it is not possible to conclude that such differences in the parenting styles of depressed adults cause depression among their children (Cummings & Davies, 1994; Downey & Coyne,

1990). There is evidence to support the equally plausible possibility that child depression and dysfunctional parenting are both caused by pre-existing conditions such as family stress (e.g., Conger et al., 1992, 1993; Hammen, Burge & Adrian, 1991; Hammen et al., 1987), marital turmoil (Emery, Weintraub & Neale, 1982; Weissman & Paykel, 1974), or shared genetic vulnerability, or that there is a reciprocal process of escalation between child and parent psychological problems (e.g., Burge & Hammen, 1991; Hamilton, Hammen, Minasian & Jones, 1993; Hammen, Burge & Stansbury, 1990).

Parenting and Custodial Family Environment

Beyond the distress parents experience as they undergo marital dissolution is the influence of such emotional turmoil on the parent-child relationship (Emery, 1988; Emery et al., 1984; Hetherington, 1979b; Kelly & Wallerstein, 1977; Peterson et al., 1984; Wallerstein, 1980; Wallerstein & Kelly, 1974, 1975). As described in the previous sections, parents who are preoccupied, angry, depressed, and possibly resentful of the burden of sole responsibility for child care (Maccoby et al., 1990) are less likely to be appropriately responsive to their children's needs (Forehand et al., 1988; Hetherington et al., 1976; Long et al., 1988; Peterson et al., 1984). Moreover, as the custodial parent takes on the roles previously fulfilled by the non-custodial parent (Emery, 1988; Peterson et al., 1984), he or she is likely to be less available (Barber & Eccles, 1992; Emery, 1988). When offspring interpret this as parental disinterest or rejection, they are more likely to experience psychological distress (Wallerstein, 1980, 1987). Similarly, reduced parental supervision may increase the risk that children

will be exposed to destructive experiences (Barber & Eccles, 1992; Dornbusch et al., 1985; Steinberg, 1987).

Offspring in single-parent families report lower levels of family cohesiveness (Amato, 1987), and are more likely to negatively evaluate their relationships with their parents than children and teens in two-parent families (Fine, Moreland & Schwebel, 1983; Peterson & Zill, 1986). These negative parent and family evaluations are, in turn, associated with poor adjustment among offspring, including internalizing behavior problems (Abelsohn & Saayman, 1991; Kurdek et al., 1981; Wallerstein & Corbin, 1989). Moreover, family dysfunction seems to be more strongly predictive of risk for child and adolescent psychiatric disorder than indicators of socioeconomic hardship, individual demographic characteristics such as age and sex, or the family's single-parent status (Blum et al., 1988). Conversely, better psychological health is found among offspring who experience positive relationships with both parents (Buchanan et al., 1991; Forehand et al., 1991b; Kurdek & Siesky, 1980a; Wallerstein, 1980, 1984; Wierson et al., 1989), where there is orderliness and stability in the post-divorce household (Wallerstein & Corbin, 1989), and where there is, generally, better family functioning (Kurdek & Sinclair, 1988; Wallerstein, 1980).

Most parent-child relationships seem to undergo a process of disequilibrium during the initial post-separation period (Barber & Eccles, 1992; Hetherington, 1979b). Numerous studies have addressed the initial changes which occur in the relationship between custodial parents and preschoolers (e.g., Hetherington et al., 1976, 1978; Kelly & Wallerstein, 1976; Santrock & Warshak, 1979; Wallerstein & Kelly, 1974, 1975, 1976).

Nonetheless, in spite of a number of studies suggesting that the quality of the parent-child relationship is equally important to the post-divorce adjustment of older children and adolescents (Dornbusch et al., 1985; Kelly & Wallerstein, 1976; Wallerstein, 1980, 1987; Wallerstein & Kelly, 1974, 1976, 1980a, 1980b, 1980c), less is known about interactions between divorced parents and their older offspring (Atkeson et al., 1982).

Wallerstein and Kelly (1980b), for example, describe parents as being less consistent, less emotionally available, and less affectionate during the post-divorce period. This, in turn, has consequences for offspring in that having a more rejecting, conflicted relationship with the custodial parent is associated with poor adolescent adjustment (Wallerstein & Corbin, 1989). Conversely, having a warmer, more empathic relationship with the custodial parent is associated with better post-divorce emotional adjustment among teenaged children of the marriage (Forehand et al., 1990a, 1991b; Kline et al., 1991; Tschann et al., 1990; Wallerstein & Corbin, 1989).

There tends to be more negotiation between custodial parents and children concerning decisions and responsibilities after the separation or divorce (Stinson, 1991). Dornbusch et al. (1985), however, found that adolescents in single-mother families are more likely than those in two-parent families to report making their own decisions. Such unilateral decision making is, in turn, associated with higher levels of deviant and delinquent behavior, although this pattern appears to be mitigated somewhat when a member of the extended family also lives in the household (Dornbusch et al., 1985).

In addition to this increased role in decision making, adolescents in divorced families are more likely to be subjected to role reversals in their relationship with the custodial parent than are younger offspring (Wallerstein, 1980; Weiss, 1979). Divorcing parents of adolescents may come to rely on their offspring for emotional support, and for help with the practical problems of daily life (Stinson, 1991; Wallerstein, 1980; Weiss, 1979). Teens in divorced families are thus likely to have more responsibilities than their peers in two-parent families (Stinson, 1991; Weiss, 1979).

This may create pressure for greater maturity than is developmentally appropriate, precipitating feelings of being overwhelmed and incompetent, and resentment toward the custodial parent (Wallerstein, 1980). Adolescents carrying such burdens are more likely to experience depression than those reporting more traditional parent-child relationships (Wallerstein, 1980). Greater psychological well-being and better adjustment to increased responsibility is associated with being older, and with having a reciprocally supportive, nurturing relationship with the custodial parent (Stinson, 1991; Weiss, 1979).

An important caveat to the research pertaining to post-separation parenting and parent-child relationships comes from the small amount of prospective research on the subject. In one study, mothers who later divorced and became custodial parents saw themselves as being more harsh, demanding, irritable, and tense with their children than never-to-divorce mothers, as long as eleven years before the marital dissolution (J. H. Block et al., 1986). Another group of researchers similarly found that compared to mothers who stayed with their spouse, to-be-divorced mothers

were more rejecting, inconsistent and disinterested when their children were as young as three years of age (Shaw et al., 1993). This negative parental behavior was, in addition, predictive of post-divorce adjustment problems among children of the marriage many years later during both adolescence and young adulthood (Shaw et al., 1993).

While it is most likely that these findings reflect a reciprocal relationship between parenting and child behavior (Emery, 1988; Emery et al., 1984, 1992; Grych & Fincham, 1992; Kurdek, 1993), they provide compelling support for the possibility that the negative patterns observed in already-divorced families may have existed long before the marital dissolution. Consistent with this possibility, longitudinal evidence from the study by Wallerstein and her associates (Wallerstein & Corbin, 1989) indicated that in spite of some improvement after the initial post-separation period, poor parent-child relationships tended to remain poor.

Evidence from studies addressing the relationship between quality of family relationships and adolescent depressive symptoms also converges on the importance of this variable. Variables reflecting dysfunctional parent-child relations such as parent-teen conflict (Brent, Perper, Goldstein, Kolko, Allan, Allman & Zelenak, 1988; Fendrich et al., 1990; Kleinman, Handal, Enos, Searight & Ross, 1989; Lewinsohn et al., 1994b; Puig-Antich et al., 1993; Robertson & Simons, 1989), teenager perceptions of a negative parent-child relationship and less family cohesiveness (Barrera & Garrison-Jones, 1992; Blatt, Wein, Chevron & Quinlan, 1979; Burt et al., 1988; Chess et al., 1983a, 1993b; Farrell & Barnes, 1993; Fendrich et al., 1990; Friedrich et al., 1982; Garrison et al., 1990; Grossman,

Beinashowitz, Anderson, Sakurai, Finnin & Flaherty, 1992; Hops et al., 1990; Kandel & Davies, 1982; Kashani et al., 1987a; King et al., 1993b; Kleinman et al., 1989; Larson, Raffaelli, Richards, Ham & Jewell, 1990; Prange, Greenbaum, Silver, Friedman, Kutash & Duchnowski, 1992; Puig-Antich et al., 1993; Reinherz et al., 1989; Robertson & Simons, 1989; Rowlison & Felner, 1988; Rubenstein et al., 1989; Stewart et al., 1994; Vulcano & Barnes, 1987; Windle, 1992; Windle & Miller-Tutzauer, 1992), and less secure attachment to parents (Armsden & Greenberg, 1987; Armsden, McCauley, Greenberg, Burke & Mitchell, 1990; Burbach, Kashani & Rosenberg, 1989; Raja, McGee & Stanton, 1992) have also been associated with both symptoms of depression and diagnosed depression in adolescent community and patient samples. There is, in addition, ample evidence that being emotionally, physically, or sexually abused by parents is associated with increased risk of depression among teenagers in both clinical and community samples (de Wilde, Kienhorst, Diekstra & Wolters, 1992; Deykin et al., 1992; Rae-Grant et al., 1989; Reinherz et al., 1993b; Stone, 1993).

There is also consistent evidence indicating that authoritative parenting, characterized by warmth, acceptance, firm behavioral control, and appropriate demands for maturity (Taylor, Casten & Flickinger, 1993) is associated with better teen functioning across marital, ethnic and socioeconomic groups (e.g., Kandel & Davies, 1982; Lamborn, Mounts, Steinberg & Dornbusch, 1991; Steinberg, Elmen & Mounts, 1989; Taylor et al., 1993). Conversely, both parent and adolescent reports of authoritarian and neglectful parenting styles are more strongly associated with more self-reported symptoms of depression among high school students (Kandel & Davies, 1982; Lamborn et al., 1991).

Although the majority of this research is cross-sectional, there is also longitudinal evidence that a dysfunctional family environment predicts both longer duration of depressive episodes, and poorer overall psychosocial functioning among adolescent in- and out- patients (McCauley et al., 1993). Negative or conflictual parent-child relations (Chess et al., 1983a, 1983b; Lewinsohn et al., 1994b; Reinherz et al., 1993b), and perceived parental rejection, deprivation, and lack of affectionate care (Brown et al., 1986; Lefkowitz & Tesiny, 1984; Poznanski, Krahenbuhl & Zrull, 1976; Robertson & Simons, 1989) predicted adolescent depression and depressive symptoms in several longitudinal studies over periods ranging from one to ten years (Lefkowitz & Tesiny, 1984; Poznanski et al., 1976; Robertson & Simons, 1989). On the other hand, more positive evaluations of parent-child relationships were associated with greater well-being and fewer self-reported behavioral problems, including depressive symptoms among general population adolescents, regardless of family composition (Armsden & Greenberg, 1987; Hops et al., 1990; Kandel et al., 1991; Lewinsohn et al., 1994b; Peterson & Zill, 1986; Raja et al., 1992).

More importantly, when the influence of perceived family and peer relationships on self-reported symptoms of depression are compared, evidence points toward the greater importance of problematic parent-child relations (Raja et al., 1992; Rubenstein et al., 1989; Windle, 1992). There is also cross-sectional (Armsden & Greenberg, 1987; Raja et al., 1992; Rubenstein et al., 1989) and longitudinal (Petersen, Sarigiani & Kennedy, 1991) evidence that perceived family support and cohesion buffer the effects of stress on depressive symptoms among high school students.

Extra-Familial Social Support to Offspring

Especially in adolescence, self-worth, competence and sense of personal control may be validated through relationships with peers, and positive school and neighborhood environments. There is, conversely, ample evidence highlighting an association between variables reflecting inadequacy of teenagers' peer relations such as perceived lack of social support, or less secure peer attachments and adolescent depression and depressive symptoms both cross-sectionally (e.g., Armsden & Greenberg, 1987; Armsden et al., 1990; Cutrona, 1989; Goodyer & Altham, 1991b; Goodyer et al., 1990b, 1991; Hops et al., 1990; Larson et al., 1990; Lewinsohn et al., 1994b; Rae-Grant et al., 1989; Reinherz et al., 1989; Rowlison & Felner, 1988; Vernberg, 1990), and longitudinally (e.g., Cutrona, 1989; Hops et al., 1990; Reinherz et al., 1989, 1993b; Slavin & Ranier, 1990; Vernberg, 1990).

The attrition in the social networks of offspring in separating families may be substantial and devastating (Longfellow, 1979; Stinson, 1991; Wallerstein & Blakeslee, 1989). Beyond the inherent changes in the relationship with the non-custodial parent, offspring are likely to lose relationships with the non-custodial parent's extended family (Anspach, 1976; Longfellow, 1979; Schlesinger, 1982; Stinson, 1991; Wallerstein, 1980). They may also lose relationships with neighbors, teachers and peers if the family moves (Atkeson et al., 1982; Stinson, 1991; Wallerstein & Blakeslee, 1989).

In spite of the likely importance of the social support available to adolescents outside the family as a mediator of post-divorce adjustment (cf Cohen & Wills, 1985), research on the subject is scant (Atkeson et al.,

1982; Stinson, 1991). A small number of studies provide support for an association between positive psychological adjustment of offspring from divorced families and availability of social support outside the family (Kurdek, 1988; Wallerstein, 1980, 1983; Wallerstein & Kelly, 1980b), and ability to share divorce-related concerns with friends (Kurdek & Siesky, 1980a, 1980b; Kurdek & Sinclair, 1988). Poor psychological adjustment is, on the other hand, related to problematic relationships with peers (Frost & Pakiz, 1990; Kurdek & Siesky, 1980a).

However, teens in divorced families, especially girls, report less satisfaction with their social support networks than offspring from two-parent families (Frost & Pakiz, 1990), even though there is some evidence that the social networks of teens in single parent families tend to be larger (Stinson, 1991). This dissatisfaction may, perhaps, be explained by the finding that teens in divorced families are both less inclined to confide in their best friends, and less likely to try to talk to a friend to resolve crises in the relationship than teens who have not experienced their parents' marital breakdown (Guttmann, 1993). Thus, while teens in single parent families may have as many or more friends than their counterparts in ever-married families, their friendships may be more fragile and less satisfying (Guttmann, 1993).

The ability to sustain friendships also seems to be greater for children and adolescents from divorced families who report positive relationships at home compared to those describing unhappy home environments (Stinson, 1991; Wallerstein, 1980). Specifically, poor social competence is found among teens in divorced families whose families are either extremely enmeshed or disengaged (Abelsohn & Saayman, 1991). A troublesome implication of such

findings is that just when offspring are most in need of extra-familial support, their behavior may alienate others.

Conversely, more than half of child and adolescent offspring of divorced families reported they would be upset if their friends asked them about their parents (Kurdek & Berg, 1987). Fears of possible negative reactions from friends, or negative reactions to expressions of concern by peers may also prevent a significant proportion of children and adolescents from using the social support peers might provide (Kurdek, 1986).

There is a comparable body of evidence in the area of depression. Both depression and depressive symptoms among adolescents are concurrently associated with indicators of negative peer relations such as social anxiety, poor social skills and perceived or actual social isolation (Berney et al., 1991; Brent et al., 1993a; Connolly, Geller, Marton & Kutcher, 1992; Fauber et al., 1987; Goodyer et al., 1990a; Larson et al., 1990; Lewinsohn et al., 1994b; Marton, Connolly, Kutcher & Korenblum, 1993; Puig-Antich et al., 1993; Reinherz et al., 1993b). As with research on single parent families, there is evidence indicating that depressed adolescents with poor parent-child relationships are more likely than teens with better relationships with their parents to experience problems in their peer relationships (Puig-Antich et al., 1993).

There is longitudinal evidence of these same patterns in that children rated by their classmates as having rejected or controversial peer status, and as being more aggressive reported more depressive symptoms five years later during adolescence than did children who were popular, average, or neglected according to their classmates (Ollendick, Weist, Borden & Greene,

1992). Depressed adolescents in clinical samples have also been found to demonstrate worse peer relations than teens with other diagnoses over a three year follow up period (McCauley et al., 1993).

Longitudinal evidence thus supports the idea of a reciprocal relationship between social support and depression and depressive symptoms. Poor social support predicts subsequent depression, but depressed adolescents are also more likely to have negative relationships with peers (Vernberg, 1990). However, such self-defeating social behavior among depressed teenagers appears to be a function of poor self-concept and a pattern of creating self-fulfilling prophecies more than inability to understand social expectations or difficulty with social problem solving, per se (Joffe, Dobson, Fine, Marriage & Haley, 1990).

4. Ontogenic System Factors

Gender

Overall, the greatest sparsity in the literature exists regarding individual characteristics which affect offspring post-divorce functioning. The bulk of such attention has been devoted to the hypothesis that male offspring are more vulnerable following parental divorce (J. H. Block et al., 1986; Zaslow, 1989). In spite of substantial conjecture on the subject, empirical evidence to date is equivocal (Zaslow, 1988, 1989).

The majority of explanations have focused on boys' differential exposure or biologically determined sensitivity to family discord (e.g., J. H. Block et al., 1986; Felner, Stolberg & Cowen, 1975; Rutter, 1970, 1987; Rutter & Quinton, 1984; Wallerstein & Kelly, 1980b; Wolkind & Rutter, 1973). There

is some supportive evidence that male offspring are exposed to more parental conflict (Hetherington et al., 1982; Porter & O'Leary, 1980; Rutter, 1987; Wallerstein & Kelly, 1980b), and are more likely to react to such experiences with disruptive behavior than girls (J. H. Block et al., 1986; Emery & O'Leary, 1982; Felner et al., 1975; Hetherington, 1979b; Hetherington et al., 1985; Kline et al., 1991; Peterson & Zill, 1983; Reid & Crisafulli, 1990; Rutter, 1982). However, other researchers have failed to find gender effects for exposure to parental conflict (e.g., Borrine, Handal, Brown & Searight, 1991; Chess et al., 1983b; Forehand et al., 1988, 1991b; Long et al., 1987; Slater & Haber, 1984).

Sex differences have also been attributed to the greater likelihood for boys to be in the custody of their mothers than for girls to be in the custody of their fathers. According to this argument, children in the custody of an opposite-sexed parent are at greater risk for problems in adjustment for various reasons, including the absence of a gender appropriate role model in the home, and increased probability of exposure to denigrating parental comments about members of the child's gender (Demo & Acock, 1988; Downey & Powell, 1993).

There is some evidence of lower self-concept (Santrock & Warshak, 1979; Santrock, Warshak & Elliott, 1982), and more depressive symptomatology (Peterson & Zill, 1986) among children in the custody of an opposite-sexed parent, although other researchers failed to find such differences (Downey & Powell, 1993; Kurdek et al., 1981; Rosen, 1979; Smith, 1990). Prospective data (J. H. Block et al., 1986; Shaw et al., 1993) indicate that as long as 11 years prior to the marital breakdown, boys in later-to-divorce families showed more behavioral problems than those from

families that remained intact. In addition, these behavioral problems were associated with systematic differences in treatment from both parents, in that boys were more likely than girls to have poor relationships with their parents (J. Block et al., 1988; Kline et al., 1991; Shaw et al., 1993). These findings provide strong evidence against the salience of the custodial parent's gender, per se. It is, nonetheless, possible that the importance of custodial parent gender changes with childrens' age and developmental needs (Barber & Eccles, 1992; Downey & Powell, 1993; Wallerstein, 1985a).

It has also been suggested that while boys generally experience strong emotional bonds with both parents, girls tend to have stronger bonds with their mothers (Lamb, 1977). Sons are thus more likely to be torn by conflicting loyalties, and to be more strongly affected by father absence (J. H. Block et al., 1986; Lamb, 1981). However, there is some contradictory evidence indicating that, in fact, girls are more likely to feel caught between their parents (Buchanan et al., 1991), perhaps due to their greater tendency to feel responsible for maintaining relationships, or for finding solutions to conflict that satisfy all parties (Black & Pedro-Carroll, 1993; Buchanan et al., 1991).

Several other investigators have raised the possibility that while boys from single-parent families exhibit more problems when they are younger, girls' dysfunctional reactions tend to be delayed and show themselves during adolescence (e.g., Frost & Pakiz, 1990; Hetherington, 1972; Kalter, 1977; Kalter, Reimer, Brickman & Chen, 1985; Simmons, Burgeson, Carlton-Ford & Blyth, 1987; Wallerstein, 1985a; Wallerstein & Blakeslee, 1989; Wallerstein & Corbin, 1989). Unfortunately, there is little evidence

which addresses this possibility (Zaslow, 1989), although the work of Wallerstein (e.g., Wallerstein & Blakeslee, 1989) supports the existence of this "sleeper" effect. However, there is, also some prospective research indicating that daughters in families that later divorced tended to exhibit psychological problems which continued post-separation, while sons were more likely to have problems which emerged following the marital breakdown (Doherty & Needle, 1991).

In spite of the debate regarding male vulnerability to psychological disturbance following parental divorce, empirical evidence in support of this sex difference is inconsistent (Amato & Keith, 1991; Zaslow, 1988, 1989). There is relatively consistent evidence that boys in divorced families show higher levels of parent-reported externalizing behavior problems (J. H. Block et al., 1986; Brady et al., 1986; Doherty & Needle, 1991; Forehand et al., 1990a; Furstenberg & Allison, 1985; Hammond, 1979a, 1979b; Hess & Camara, 1979; Hetherington, Cox & Cox, 1979b; Hetherington et al., 1978, 1979a, 1982; Hodges & Bloom, 1984; Kalter, 1977; Pearson & Thoennes, 1990; Peterson & Zill, 1986; Whitehead, 1979), although there are a small number of studies which report no sex differences (Frost & Pakiz, 1990; Irion, Coon & Blanchard-Fields, 1988; Kinard & Reinherz, 1984; Santrock & Warshak, 1979; Santrock et al., 1982).

In contrast, research pertaining to internalizing measures of psychological adjustment, particularly depressive symptoms, shows less than uniform evidence of greater dysfunction among boys from divorced families (Zaslow, 1989). A number of investigators found no sex differences (Forehand et al., 1990a; Hammond, 1979a, 1979b; Santrock et al., 1982; Wallerstein & Corbin, 1989), or more internalizing behavior problems among

boys (Hess & Camara, 1979; Hetherington et al., 1985; Kinard & Reinherz, 1984; Kline et al., 1991; Pearson & Thoennes, 1990; Tschann et al., 1989, 1990). However, the majority of studies have, in fact, found that girls demonstrate more difficulties in this regard (Allison & Furstenberg, 1989; J. H. Block et al., 1986; Buehler & Trotter, 1990; Doherty & Needle, 1991; Furstenberg & Allison, 1985; Hetherington et al., 1979a; Kalter, 1977; Santrock & Warshak, 1979; Whitehead, 1979). In addition, where sex differences in depressive symptomatology have been assessed in divorced groups, girls seem to show higher levels than boys (Frost & Pakiz, 1990; Peterson & Zill, 1986; Wallerstein, 1987). It may thus be that girls are as likely to be troubled by parental marital turmoil and divorce as boys, but may manifest their feelings in ways more consistent with sex role expectations, namely by becoming anxious, withdrawn or depressed (J. H. Block et al., 1986; Doherty & Needle, 1991; Emery, 1982a, 1988; Emery et al., 1984).

Studies in broader adolescent samples find fairly consistent evidence of more depressive symptoms (Baron & Campbell, 1993; Baron & Perron, 1986; Barrera & Garrison-Jones, 1992; Connolly et al., 1993; Doerfler et al., 1988; Finch, Saylor, & Edwards, 1985; Finchman, Koestner & Zuroff, 1994; Garrison et al., 1989; Hops et al., 1990; Kandel & Davies, 1982; Lewinsohn et al., 1993a; Links, Boyle & Offord, 1989; Ollendick et al., 1992; Prange et al., 1992; Raja et al., 1992; Roberts & Sobhan, 1992; Rotheram-Borus, 1993; Teri, 1982; Wilson & Cairns, 1988), and diagnosed depression among girls in the general population (Burbach et al., 1989; Fergusson et al., 1993; Fleming et al., 1993; Kashani et al., 1989; Lewinsohn et al., 1991, 1993a, 1993c, 1994a, 1994b; Reinherz et al., 1993a, 1993b), although there

are a comparatively small number of community studies reporting no gender differences (Carey et al., 1987, 1992; De Moss, Milich & De Mers, 1993; Fleming et al., 1989; Friedrich et al., 1982; Gjerde et al., 1988; Kaplan et al., 1984a; Pinto & Francis, 1993; Siegel & Griffin, 1984; Smith, 1990; Smucker et al., 1986; Vulcano & Barnes, 1987; Windle, Hooker, Lerner, East, Lerner & Lerner, 1986; Workman & Beer, 1992). In clinical samples, more studies also support the existence of higher rates of both diagnosed depression (Bukstein et al., 1992; Carlson & Cantwell, 1979; Christ, Adler, Isacoff & Gershansky, 1981; Deykin et al., 1992; Friedman et al., 1982; Kim & Chun, 1993; Kolvin et al., 1991; Strober et al., 1981a; Weiner, 1975) and depressive symptoms among girls (Ambrosini et al., 1991; Costello et al., 1991; Kashani et al., 1990; McCauley, Mitchell, Burke & Moss, 1988; Mezzich & Mezzich, 1979a, 1979b) than not (Handford et al., 1986; Hudgens, 1974; McGlashan, 1989; Ryan, Puig-Antich, Ambrosini, Rabinovich, Robinson, Nelson, Iyengar & Twomley, 1987; Weiss & Weisz, 1988; Weisz, Weiss, Wasserman & Rintoul, 1987). There is also some evidence that girls tend to have their first episode of depression at an earlier age than do boys (Lewinsohn et al., 1994a).

Overall, the vast majority of studies thus indicate a preponderance of depression and depressive symptoms among female adolescents parallel to that found during adulthood (e.g., Amenson & Lewinsohn, 1981; Boyd & Weissman, 1981; Weissman & Klerman, 1972). Nonetheless, evidence addressing why this is the case is equivocal (Angold & Worthman, 1991; Nolen-Hoeksema & Girgus, 1994; Petersen et al., 1991).

There is, for example, some inconclusive evidence of an interaction between gender, and age or pubertal status (Angold, 1988a; Angold &

Worthman, 1991; Kolvin et al., 1991). In support of this possibility, no overall sex differences are typical when children and adolescents are lumped together (e.g., Handford et al., 1986; Kolvin et al., 1991; Ryan et al., 1987; Weiss & Weisz, 1988; Weisz et al., 1987). In contrast, when pre- and post-adolescents are compared, the expected higher levels of depression and depressive symptoms for girls were found for adolescents but not younger children (e.g., Cohen, Cohen, Kasen, Velez, Hartmark, Johnson, Rojas, Brook & Struening, 1993; Kolvin et al., 1991; Nelson et al., 1987; Petersen et al., 1991; Weiss & Weisz, 1988).

There is some longitudinal evidence that increased depressive symptoms among older adolescent girls occurs when pubertal changes precede or coincide with the move from junior to senior high school (Petersen et al., 1991), but similar effects were also found for the small number of boys for whom puberty and school change occurred together. Hormonal states related to puberty also longitudinally predict depressive symptoms in adolescent girls, but this evidence is inconsistent across related hormones (Paikoff, Brooks-Gunn & Warren, 1991).

Beyond the possible interaction between gender and age or pubertal status, there is some evidence that depressive symptoms are also associated with different behavioral and personality characteristics in males and females in this age group (J. Block & Gjerde, 1990; Gjerde & J. Block, 1991; Gjerde et al., 1988; Smucker et al., 1986), perhaps as a consequence of more general differences in the socialization of the sexes (J. Block & Gjerde, 1990; J. H. Block, 1976, 1983; Gjerde & J. Block, 1991; Gjerde et al., 1988; Harris, Surtees & Bancroft, 1991). Teenaged boys are, for example, more likely to demonstrate externalizing characteristics while

girls more often manifest internalizing characteristics both cross-sectionally and as much as seven years prior to the evaluation of depressive symptoms (Gjerde et al., 1988). On the other hand, socially desirable masculine personality traits are associated with less depressive symptoms among both teenaged boys and girls (Craighead & Green, 1989). This pattern may be explained by the possibility that the externalizing response style more common among boys may serve to distract, and thereby alleviate depressed mood, while an internalizing response style may result in its amplification (Nolen-Hoeksema, 1987).

In their recent review, Nolen-Hoeksema and Girgus (1994) concluded that the best explanation for the adolescent onset of the greater prevalence of depression and depressive symptoms among females is a model in which gender differences in risk factors for depression that develop during childhood become pathogenic when combined with the particular biological and social challenges of adolescence. In addition to research pertaining to the appearance of gender differences in ruminative coping, and other ontogenic characteristics prior to adolescence, these authors (Nolen-Hoeksema & Girgus, 1994) cite evidence that teenaged girls are more likely to experience certain stressors than their male peers. These include disliking the changes associated with puberty, being raped and/or sexually abused, and being subjected to negative messages regarding their competence and autonomy (Nolen-Hoeksema & Girgus, 1994).

Current Developmental Level and Age at Parents' Separation

In light of the considerable theorizing regarding the differential ability of children of different ages to adjust to their parents' separation or divorce, the sparsity of research on the subject is surprising (Emery, 1988). A number of studies have failed to find differences in post-divorce adjustment as a function of children's current age (Kurdek & Berg, 1987), or age at the decisive marital breakdown (Amato & Ochiltree, 1987; Chess et al., 1983b). Nonetheless, the majority of researchers making age-related comparisons report qualitatively different reactions and adjustment as a function of children's age when the divorce or separation occurred (e.g., Blum et al., 1988; Brady et al., 1986; Buehler & Trotter, 1990; Hetherington, 1979b; Hodges & Bloom, 1984; Kalter, 1977; Kurdek et al., 1981; Kurdek & Siesky, 1980a, 1980b; Lamb, 1977; McDermott, 1969, 1970; Rohrlich, Ranier, Berg-Cross & Berg-Cross, 1977; Sorosky, 1977; Wallerstein, 1980, 1984, 1987; Wallerstein & Blakeslee, 1989; Wallerstein & Corbin, 1989; Wallerstein & Kelly 1974, 1975, 1976, 1980a, 1980b, 1980c). Unfortunately, the relative dearth of research actually making comparisons between age groups, makes it difficult to draw firm conclusions about how different age groups are affected by parental divorce, especially in the long term (Amato & Ochiltree, 1987; Drill, 1987; Emery, 1988; Emery et al., 1984; Grych & Fincham, 1992; Kurdek, 1986; Isaacs et al., 1987).

The majority of theoretical arguments converge on the particular vulnerability of children who are of preschool or early primary school age (Emery, 1988). However, while data on short-term adjustment provide some support for the particular vulnerability of these age groups, long-term

follow-up data paint a different picture. According to Wallerstein and her associates (e.g., Wallerstein, 1984; Wallerstein & Blakeslee, 1989; Wallerstein & Corbin, 1989; Wallerstein et al., 1988), for example, preschoolers and toddlers demonstrated extreme behavioral disturbances immediately following the marital separation, but fared best of all the children in their sample in terms of long-term adjustment. In fact, the older the children were when their parents divorced, the worse their functioning at the ten and 15 year follow-up interviews (Wallerstein, 1984; Wallerstein & Blakeslee, 1989; Wallerstein & Corbin, 1989; Wallerstein et al., 1988). Longitudinal work by other researchers similarly indicates that although younger children may demonstrate more behavioral and emotional disruption initially, their long-term prognosis may be better compared to older children (Kline et al., 1991; Tschann et al., 1990).

Regardless of the child's age when the marital breakdown occurred, the transition may alter the course of adjustment to normative developmental tasks (Barber & Eccles, 1992; Kurdek, 1986; Wallerstein, 1991; Wallerstein & Blakeslee, 1989). Adolescence has been described as a period when it is difficult to be living in a single-parent household (Springer & Wallerstein, 1983; Wallerstein, 1987, 1991; Wallerstein & Blakeslee, 1989; Wallerstein & Corbin, 1989). Dealing successfully with the passages from childhood to adolescence, and from adolescence to adulthood may be especially difficult for offspring in such families because the emotional and physical supports for growing up, based largely in the family, may be less plentiful and less consistent (Springer & Wallerstein, 1983; Wallerstein, 1991; Wallerstein & Blakeslee, 1989; Wallerstein & Corbin, 1989).

In particular, accomplishing tasks relating to independence, and identity formation and consolidation may be hampered when the necessary sense of family stability which would otherwise provide a secure base for such exploration has been undermined by parental marital breakdown (Barber & Eccles, 1992; Hodges, 1991; Springer & Wallerstein, 1983; Wallerstein, 1991; Wallerstein & Blakeslee, 1989). In addition, adolescent social and psychological developmental tasks tap into, and may be complicated by earlier divorce-related experiences (Wallerstein, 1991; Wallerstein & Blakeslee, 1989). Developing a sense that loving relationships are possible and learning to take a chance on a relationship that may fail may, for example, be particularly difficult for adolescents who are still working through previous divorce-related tasks and feel little sense of safety, optimism, or self-worth (Wallerstein, 1983, 1991; Wallerstein & Blakeslee, 1989; Wallerstein et al., 1988).

Some developmentally-related characteristics of adolescents may also hamper their ability to adjust to parental divorce (e.g., Hodges, 1991). The self-involvement typical to teenagers can make it difficult to see the world from someone else's point of view (Hodges, 1991). Especially during early adolescence, this egocentric perspective may lead teens to feel extreme, enduring anger and condemnation toward their parents due to their decision to separate. Such anger may be further fueled by teenagers' tendency to see issues in black and white (Hodges, 1991; Wallerstein, 1980, 1983). Moreover, adolescents' budding sexuality can foster additional confusion and turbulence in relationships with both parents (Wallerstein & Blakeslee, 1989).

Nonetheless, while adolescence brings with it substantial developmental challenges, the cognitive, psychological and social changes which occur during this period may also facilitate the ability to cope with parental separation or divorce (Kurdek, 1986; Wallerstein, 1987). In line with this possibility, a number of studies report fewer dysfunctional divorce-related beliefs with age (Friesen, Slater & Thomas, 1991; Kurdek & Berg, 1983; Kurdek et al., 1981; Kurdek & Siesky, 1980b). Similarly, developmentally related variables such as more sophisticated interpersonal reasoning have been associated with more positive adjustment to parental divorce (Kurdek et al., 1981; Kurdek & Siesky, 1980b). Conversely, external locus of control (e.g., Cole & Kumchy, 1981; McCauley et al., 1988; Siegel & Griffin, 1984; Vulcano & Barnes, 1987, Weisz et al., 1987), use of more negative problem-solving strategies (J. Adams & M. Adams, 1993; M. Adams & J. Adams, 1991; Ebata & Moos, 1991; Glyshaw et al., 1989), and earlier developmental levels of object relations and cognition (Goldberg, 1989) have been associated with more severe depressive symptoms among adolescents, in general. There is also some prospective research indicating that the effectiveness of adolescent problem solving may mediate the relationship between negative life events and depression (J. Adams & M. Adams, 1993).

Teenagers are, in addition, in a better position to use distancing and withdrawal to cope with the household upheaval associated with marital breakdown than are younger children (Emery, 1988; Wallerstein & Kelly, 1975), although they are also more likely to feel burdened with responsibility (Wallerstein & Blakeslee, 1989), and caught in the middle of their parents' conflict (Buchanan et al., 1991). When adolescents maintain

physical and emotional distance from their parents' crisis through increased social activities outside the home they are better adjusted one year post-separation than teens who are unable to do so (Kelly & Wallerstein, 1977; Wallerstein & Kelly, 1974). Conversely, adolescents with the greatest inter-dependence with one or both parents after the separation demonstrated the worst adjustment.

Psychological Resources

Comparatively little is known about additional psychological resources that might help or hinder adolescents' adjustment to their parents' marital breakdown (Grych & Fincham, 1992). Some research indicates that children with a history of maladjustment prior to the divorce are, for example, more likely to respond to the upheaval with enduring emotional disturbance (Doherty & Needle, 1991; Hetherington, 1979b; Tschann et al., 1990; Wadsby & Svedin, 1993; Wallerstein & Corbin, 1989; Wallerstein & Kelly, 1974, 1980a, 1980b, 1980c), but relatively few studies have assessed this variable. Moreover, the dearth of prospective research makes it impossible to extricate the consequences of the often long-term familial difficulties preceding parental separation on offspring personality development (J. H. Block et al., 1986), from the influence any child behavior problems may have on the parents' marriage, from the effects of genetic or psychosocial vulnerability shared by family members (Grych & Fincham, 1992).

Individual differences in temperament during childhood have been theoretically and empirically linked to variables such as psychological health (e.g., Chess & Thomas, 1984), resilience to stress (e.g., Werner & Smith, 1982), adaptive coping styles (Garmezy, 1986), and quality of the

parent-child relationship (Crockenberg, 1981, 1986). Temperamentally vulnerable children, for example, tend to adapt less well to change, and seem as a result to be more vulnerable to adversity than temperamentally robust children (Chess, Thomas & Birch, 1968; Graham, Rutter & George, 1973; Rutter, 1979b). Temperamentally vulnerable children also seem more prone to having negative interactions with their parents than their more temperamentally robust peers (Rutter, 1979a, 1979b, 1982, 1987; Rutter, Quinton & Yule, 1977). However, there is also prospective research indicating that the parent-child relationship influences temperament, and that these socializing influences vary for boys and girls (Bezirgianian & Cohen, 1992). Some hints of possible reciprocal causality among these variables thus exist.

There has unfortunately been a relative paucity of empirical attention to the relationship between adolescent temperament and either symptoms of depression (Windle et al., 1986), or adjustment to parental separation. One group of researchers, paradoxically, found that children from divorced families with more vulnerable infant temperaments had more positive relationships with their non-custodial fathers than did children with more robust temperaments (Tschann et al., 1989), although other investigators have reported more theoretically consistent results.

Severity of depressive symptoms among adolescents has been associated with a number of temperamental characteristics including withdrawal from novelty, cognitive rigidity, and affective arousability (Windle, 1992; Windle et al., 1986). Similarly, emotionality was associated with receiving a diagnosis of depression in an adolescent community sample, especially among girls (Goodyer, Ashby, Altham, Vize & Cooper, 1993).

Longitudinal evidence indicates that although extreme childhood temperament predicts internalizing and externalizing behavior problems during adolescence, this relationship is strongly affected by family functioning (Maziade, Caron, Cote, Merette, Bernier, Laplante, Boutin & Thivierge, 1990). In addition, vulnerable temperament has a detrimental impact on family and peer relationships (Windle, 1992).

In spite of substantial emphasis on the effects of coping style on mental health in other populations, little attention has been paid to its role in adolescent adjustment to parental divorce. One group of researchers did find that reliance on avoidance coping strategies was associated with increased behavioral and emotional problems, especially among teenaged girls from divorced families (Armistead, McCombs, Forehand, Wierson, Long & Fauber, 1990).

Whether offspring construct functional or dysfunctional beliefs about parental divorce also seems to mediate post-divorce adjustment (Kurdek & Berg, 1987; Kurdek et al., 1981; Kurdek & Siesky, 1980b; Kurdek & Sinclair, 1988). Kurdek & Berg (1987), for example, found higher frequencies of maladaptive beliefs about the causes and consequences of parental divorce were associated with more anxiety, lower self-concept and less perceived social support.

Cognitive mediators in adolescent depressive processes have, in general, received notable attention (e.g., Gjerde et al., 1988; Seligman, Peterson, Kaslow, Tanenbaum, Alloy & Abramson, 1984). Variables related to how adolescents explain events in their world such as low perceived self-efficacy (Bennett, Spoth & Borgen, 1991; Ehrenberg, Cox & Koopman,

1991; Fine, Haley, Gilbert & Forth, 1993; Hops et al., 1990; Lewinsohn et al., 1994b; Weisz, Stevens, Curry, Cohen, Craighead, Burlingame, Smith, Weiss & Parmelee, 1989; Weisz et al., 1987; Wilson & Cairns, 1988), external locus of control (Cole & Kumchy, 1981; Grossman et al., 1992; Kliever & Sandler, 1992; McCauley et al., 1988; Pinto & Francis, 1993; Siegel & Griffin, 1984; Vulcano & Barnes, 1987; Weisz et al., 1987), hopelessness (Carey et al., 1992; Johnson & McCutcheon, 1981; Kaplan, Landa, Weinhold & Shenker, 1984b; Kazdin, French, Unis & Esveldt-Dawson, 1983; Lewinsohn et al., 1994b; McCauley et al., 1988; Pinto & Francis, 1993; Thurber, Crow & Woffington, 1990), tendency to attribute failures to internal, stable, global causes (De Moss et al., 1993; Garber, Weiss & Shanley, 1993; Gotlib, Lewinsohn, Seeley, Rohde & Redner, 1993; Haley et al., 1985; Hops et al., 1990; Kaslow, Rehm & Siegel, 1984; Leon, Kendall & Garber, 1980; Lewinsohn et al., 1994b; McCauley et al., 1988; Moyal, 1977; Pinto & Francis, 1993; Seligman et al., 1984; Siegel & Griffin, 1984), and other cognitive distortions such as catastrophizing, personalizing and overgeneralizing (Garber et al., 1993; Kempton, Van Hassett, Bukstein & Null, 1994) have been associated with increased levels of depression in adolescent samples.

Elements of personality organization have also been associated with the underlying diathesis and maintenance of depression and depressive symptoms in this age group. Numerous studies have identified the salience of personality characteristics including low self-esteem and self-criticism (Allgood-Merten et al., 1990; Battle, 1980; Carey et al., 1992; Cole & Kumchy, 1981; Craighead & Green, 1989; Finchman et al., 1994; Fine et al., 1993; Fleming et al., 1993; Gjerde et al., 1988; Haley et al., 1985; Hops

et al., 1990; Kandel & Davies, 1982; Kaslow et al., 1984; Kauth & Zettle, 1990; King, Naylor, Segal, Evans & Shain, 1993a; Kliwer & Sandler, 1992; Lakey, Moineau & Drew, 1992; Lewinsohn et al., 1994b; Luthar & Blatt, 1993; Marton et al., 1993; Maxwell, 1992; McCauley et al., 1988; Prange et al., 1992; Reinherz et al., 1989, 1993a, 1993b; Smart & Walsh, 1993), low ego strength (Gjerde et al., 1988; Vulcano & Barnes, 1987), and perfectionism (Leon et al., 1980).

Together these findings relating to cognitive and personality characteristics converge on the possibility that depression in adolescents may be related to dysfunctional self- and world-views such as perceived helplessness (cf Abramson et al., 1978) and low self-efficacy (cf Bandura, 1977, 1986). Nonetheless, research addressing the relative importance of these cognitive variables in the etiology of depression or depressive symptoms is equivocal. Although two studies, for example, found that such cognitive distortion is a better predictor of adolescent depressive symptoms and depression than life stress (Deal & Williams, 1988; Lewinsohn et al., 1994b), other investigators, studying a sample of children of depressed mothers found that initial life stress and depression were more important predictors of depression six months later than was the attributional style these children initially endorsed (Hammen et al., 1988).

RECURRENT METHODOLOGICAL PROBLEMS

There are unfortunately numerous methodological problems in this body of research which limit its interpretability and its generalizability. Reliance on small samples, for example, is common in both adolescent depression and parental divorce literatures (e.g., Battle, 1980; Marriage et al., 1986; Wallerstein & Kelly, 1974, 1975, 1976, 1978; Yanchyshyn & Robbins, 1983). Interpretability of research on divorce is almost universally hampered by the use of unstandardized, conceptually weak measures with unknown reliability and validity (Amato & Keith, 1991; Atkeson et al., 1982; Emery, 1988; Emery et al., 1984; Kurdek, 1986; Zaslów, 1988). In their meta-analysis of the literature on child and adolescent adjustment to parental divorce, Amato & Keith (1991), in fact, found that studies using measures with good psychometric properties yield smaller effect estimates than those based on less sound measures.

In addition, research on divorce adjustment of children has typically been atheoretical (Grych & Fincham, 1992; Kurdek, 1993). Few attempts have been made to look at whether particular child or adolescent adjustment problems are related to specific theoretically important mediating factors (Grych & Fincham, 1992; Kurdek, 1993), and outcome measures are only rarely chosen because they are expected to relate to parental marital breakdown in some predictable way for theoretical reasons (Amato & Keith, 1991).

A further problem, most common in earlier research on offspring adjustment to parental loss is the failure to differentiate the reason for

single-parent status (e.g., death, divorce, separation, never married) (e.g., Amato & Ochiltree, 1987). The studies that make comparisons between these groups generally show differences in well being, with children and adolescents who have experienced parental death doing better than children living with one parent for other reasons (Amato & Keith, 1991). There is, in addition, some evidence that offspring of parents who separate but do not eventually divorce have more emotional and behavioral problems than children whose parents ultimately divorce (Allison & Furstenberg, 1989).

The parallel problem of diagnostic heterogeneity of samples is frequent in the depression literature (e.g., Carlson & Cantwell, 1979; Feinstein et al., 1984; Joffe et al., 1988; Kashani et al., 1987a, 1987b; Nelson et al., 1987; Stavrakaki et al., 1987). This difficulty is exacerbated by the wide variety of diagnostic systems (e.g., DSM-III-R, 1987; Herzog & Rathbun, 1982; RDC, Spitzer et al., 1978; Weinberg, Rutman, Sullivan, Penick & Deitz, 1973), and assessment devices (e.g., structured interviews, self-report instruments) currently in use which makes it extremely difficult to generalize across studies (Roberts et al., 1991). The unknown gradient between depression and depressive symptoms as well as between major affective disorder and other affective and non-affective syndromes also adds to the ambiguity of the situation (Angold, 1988a, 1988b). Moreover, many studies fail to specify the exact criteria used to identify depression or other psychopathology (e.g., Caplan & Douglas, 1969; Goodyer, Wright & Altham, 1988; Goodyer et al., 1987; Poznanski et al., 1976; Wallerstein, 1980).

The failure to include control groups, and the inclusion of more than one child per family (e.g., the work of Wallerstein & Kelly) further

restricts the interpretability of both bodies of research. In addition, studies on divorce adjustment sometimes use control groups of offspring from intact families which also include stepfamilies (e.g., Drill, 1987). Since there is evidence of poorer functioning in step-children (e.g., Amato & Keith, 1991; Marks & McLanahan, 1993), it is impossible to rule out the possibility that similarities between children from divorced and two parent families are artifacts of the history of divorce in stepfamilies included in "intact" comparison groups (Amato & Ochiltree, 1987; Atkeson et al., 1982; Blechman, 1982; Kanoy & Cunningham, 1984). Beyond this, because parents "self-select" to separate or divorce, they and their children may differ from members of ever-married families on characteristics other than the experience of marital dissolution (e.g., family interaction patterns, genetic background, personality) (Emery, 1988).

Such problems relating to sampling and research design are further compounded by the failure of many researchers to control for differences in demographic variables such as socioeconomic status between intact and divorced families (e.g., Brady et al., 1986; Grossman et al., 1980; Isaacs et al., 1987; Kurdek & Berg, 1987), and depressed and non-depressed individuals (Billings & Moos, 1983). When socioeconomic status or income are controlled, there is some evidence that the effects of divorce on child and adolescent behavior become smaller, consistent with the assumption that some of the associations found in studies which do not control for these variables may be spurious (Amato & Keith, 1991; Velez et al., 1989).

However, given the drastic changes in income which can occur when parents separate, controlling for socioeconomic effects in divorce studies is particularly complicated (Blechman, 1982; Zaslow, 1988). Absence of

information about pre-divorce income, and social background can make it impossible to determine the degree to which observed effects are attributable to adversity stemming from divorce-related income loss rather than pre-existing social class (Barber & Eccles, 1992).

A related difficulty most notable in the divorce literature is the tendency to use samples of white, middle class families (e.g., Chess et al., 1983b; Grossman et al., 1980; Hess & Camara, 1979; Hetherington et al., 1978; Kurdek & Berg, 1987; Kurdek et al., 1981; McDermott, 1969; Santrock & Warshak, 1979). There are a number of samples more diverse with respect to both race and socioeconomic status (e.g., Blum et al., 1988; Brady et al., 1986; Dornbusch et al., 1985; Furstenberg et al., 1983; Peterson & Zill, 1986), and more recent studies often include controls for socioeconomic status (e.g., Amato & Ochiltree, 1987; Blum et al., 1988; Dornbusch et al., 1985; Fauber et al., 1990; Kline et al., 1991; Kurdek & Sinclair, 1988; Peterson & Zill, 1986; Stolberg & Anker, 1983; Tschann et al., 1990), and other personal demographic characteristics such as age and sex (e.g., Blum et al., 1988; Brady et al., 1986; Dornbusch et al., 1985; Isaacs et al., 1987; Peterson & Zill, 1986; Stolberg & Anker, 1983). The majority of authors do not, however, present information regarding the exact differences which occurred as a function of these demographic variables. Little is therefore known about the extent to which most demographic characteristics might influence divorce adjustment (Emery, 1988; Kurdek, 1986; Taylor et al., 1993; Zaslow, 1988), or about the degree to which the existing research, mostly on white, middle-class families, is relevant to the experience of the overall population of children and adolescents whose parents have separated or divorced (Emery, 1988).

Although less marked, there is an equivalent dearth of information regarding such demographic mediators in the literature on adolescent depression and depressive symptoms (Angold, 1988a). There is, for example, a growing body of research that identifies membership in a visible minority as a risk factor for depression and depressive symptoms in adolescent community samples (e.g., Garrison et al., 1989, 1990; Kim & Chun, 1993; Lewinsohn et al., 1991; Roberts & Sobhan, 1992; Schoenbach et al., 1982; Weisz, Suwanlert, Chaiyasit, Weiss, Achenbach & Eastman, 1993). However, in spite of numerous epidemiological studies identifying demographic variables such as age, sex, socioeconomic status, ethnicity, urban versus rural residence, sexual orientation and marital status as risk factors for depression in adults, few studies on teenaged samples specify, let alone control for, such potential mediating variables (Petersen et al., 1993).

A related problem in both areas is the tendency, in spite of their biased and non-representative nature, to rely on clinical populations (e.g., Brady et al., 1986; Hodges & Bloom, 1984; Isaacs et al., 1987; Kalter, 1977), and samples of convenience such as university students and members of single parent groups (e.g., Kurdek et al., 1981; Kurdek & Siesky, 1980a, 1980b; Schlesinger, 1982). In addition to the likely limited generalizability of risk factors identified in such samples (Amato & Ochiltree, 1987; Blechman, 1982; Emery, 1988; Isaacs et al., 1987; Kanoy & Cunningham, 1984), the reliance on samples of convenience in the divorce literature is especially troubling given evidence that effect sizes tend to be larger in convenience samples than in clinical or random samples of offspring from divorced families (Amato & Keith, 1991).

Although participants drawn from other samples of convenience may differ from the typical single-parent family, this is not an insurmountable difficulty if researchers specify as much as possible how such samples differ from the the population at large. Unfortunately, this often seems to be neglected (e.g., Blum et al., 1988; Dornbusch et al., 1985; Furstenberg et al., 1983; Kulka & Weingarten, 1979; Peterson & Zill, 1986). Research using clinical samples is often further flawed in its reliance on data drawn from case records (e.g., Friedman et al., 1982; Garber et al., 1988; Kalter, 1977). While expedient, checks on the reliability or validity of such information are usually impossible, and variability in assessment procedures across files is likely.

Additional difficulties are presented by the tendency, in both literatures, to rely on retrospective data, often based on parental reports of child behavior. Regardless of informant, research in the area of depression indicates both poor recall of symptoms over time (e.g., Verhulst, Eussen, Berden, Sanders-Woudstra & Van Der Ende, 1993), and mood-congruent selective recall and distortion of events (e.g., Campbell, 1983; Hops et al., 1990; Jensen, Traylor, Xenakis & Davis, 1988a; Jensen, Xenakis, Davis & Degroot, 1988b; McGee et al., 1990; Porter & O'Leary, 1980; Richters & Pellegrini, 1989; Rutter, 1971; Shepherd, Oppenheim & Mitchell, 1971; Whitehead, 1979). In the divorce literature, some researchers report that stronger relationships between family process variables and child problems are obtained in information provided by the parent, compared to data from other adult sources (e.g., teachers) (e.g., O'Leary & Emery, 1984; Reid & Crisafulli, 1990; Thomas & Forehand, 1993). However, a meta-analysis by Amato & Keith (1991) indicated smaller effects

of divorce on child behavior when based on parent or teacher reports versus child self-report. There is similar variability in the depression literature. For example, depressed mothers are apt to over-rate their children's symptomatology compared to the children's self-report (Renouf & Kovacs, 1994), while mothers, in general, tend to observe fewer depressive or internalizing symptoms in their children than their children report in themselves (e.g., Barrett, Berney, Bhate, Famuyiwa, Fundudis, Kolvin & Tyrer, 1991; Fendrich, Weissman & Warner, 1991; Fergusson et al., 1993; Fleming et al., 1989; Offord, Boyle & Racine, 1989). As a result of this pattern of observing fewer internalizing symptoms, mothers are often less able to provide clinicians attempting to diagnose offspring depression with information relevant to cognitive or affective symptoms than are the targeted children (Barrett et al., 1991; Fendrich et al., 1991).

A number of not necessarily mutually exclusive possibilities may explain this inconsistency between child self-reports and adult characterizations of a child. Adults may, for example, underestimate some child problems or the impact of experiences on children (Amato & Keith, 1991; Fleming et al., 1989). It is also possible that youngsters over-report symptoms (Cook & Goldstein, 1993; Fleming et al., 1989), and/or that children's interpretations of their experiences may simply differ from those of their parents or other adult observers (Kurdek, 1986). Explanations aside, the above research highlights both the complexity of the relationship between data and informant characteristics, and the importance of the phenomenological frame of reference of the child or adolescent in its own right (Kurdek, 1986; Kurdek et al., 1981).

Additional difficulties in the research on adolescent adjustment to divorce stem from the general failure to control for the time since the marital separation or divorce, and pre-divorce levels of individual and family functioning (e.g., Blum et al., 1988; Brady et al., 1986; Colletta, 1979; Drill, 1987; Rosen, 1979). These problems make it impossible to determine if psychopathology exhibited by children in divorced families is a continuation of that manifested prior to the divorce, a temporary crisis reaction, or a stable, permanent change resulting from the different experiences or processes in single-parent families (Amato & Ochiltree, 1987; Atkeson et al., 1982; J. Block et al., 1988; J. H. Block et al., 1986; Emery, 1982a; Emery et al., 1984; Grych & Fincham, 1992; Kanoy & Cunningham, 1984; Shaw et al., 1993; Wallerstein, 1991). Beyond this, there is no consensus on how to discriminate independent effects of a child's current age, time since the marital breakdown, and age when the separation or divorce occurred (Emery, 1988).

Finally, as described previously, the bulk of the literature has focused on enumeration of the problems experienced by offspring of divorced families. Little attention has been devoted to determining what mediating factors predict adjustment, particularly for adolescents (Amato & Ochiltree, 1987; Atkeson et al., 1982; Blechman, 1982; Emery, 1988; Emery et al., 1984; Grych & Fincham, 1992; Kanoy & Cunningham, 1984). Moreover, models in both the depression and divorce literatures often give short shrift to the multidetermined and interactive nature of the processes involved (Amato, 1993a; Amato & Keith, 1991; Demo, 1993; Emery, 1982a, 1988; Emery et al., 1984, 1992; Grych & Fincham, 1992; Kurdek, 1993). A corresponding problem, particularly common in the depression literature,

has been the use of inadequate statistical analyses. The most common method for reporting results seems to be simply listing group frequencies or percentages. Failure to evaluate the statistical significance of between-group differences is common, in spite of large enough samples to do so.

The research described in this literature review is largely correlational. Aside from the issue that cross-sectional designs hamper the assessment of individual changes over time (Kurdek, 1986), the assumed direction of causality is typically from parental divorce and sequelae to offspring behavioral or emotional problems.

Nonetheless, the limited prospective research available indicates the importance of processes at work well before the ultimate marital dissolution (e.g., J. Block et al., 1988; Shaw et al., 1993). There is also evidence of cohort effects in both divorce (Amato & Keith, 1991; Wallerstein, 1991) and depression literatures (e.g., Klerman, 1976, 1988; Lewinsohn, Rohde & Seeley, 1993b). There are some data suggesting that depression may be more prevalent in each successive generation (e.g., Burke, Burke, Rae & Regier, 1991; Klerman, 1978, 1988; Klerman & Weissman, 1992; Lewinsohn et al., 1993b). In the meta-analysis conducted by Amato and Keith (1991), less negative effects were found in more recent studies on the impact of parental divorce on offspring. These authors and others (e.g., Emery, 1988) suggest that the consequences of parental divorce may have become less pronounced as divorce has become more common and more accepted, although many would disagree with this hypothesis (e.g., Wallerstein, 1991; Wallerstein & Blakeslee, 1989).

It is, in addition, plausible that offspring behavior affects marital quality and the characteristics of the parent-child relationship, or that depressive symptomatology is emergent in offspring of divorced parents as a function of genetic similarities which predispose to marital problems, poor parent-child relationships, and depressive phenomena, or some combination of these processes (Amato, 1993b; Barber & Eccles, 1992; Emery, 1982a, 1988; Emery et al., 1992; Grych & Fincham, 1992; Kline et al., 1991; Kurdek, 1986; McLanahan & Booth, 1989; Zaslou, 1988). However, it is difficult to evaluate the relative validity of these possibilities because few studies examine all of these variables together (Amato & Keith, 1991; Grych & Fincham, 1992; Kurdek, 1993), especially factors relating to biologically-related vulnerability (Shaw et al., 1993), and even fewer provide longitudinal or prospective evidence (e.g., J. Block et al., 1988; Burt et al., 1988; Chess et al., 1983a, 1983b; Holohan & Moos, 1987; Lefkowitz & Tesiny, 1984; Poznanski et al., 1976; Shaw et al., 1993; Siegel & Brown, 1988) to allow comparison of these various causal sequences.

STRUCTURAL MODEL AND HYPOTHESES

A central element of the ecological perspective (cf Bronfenbrenner, 1977a, 1977, 1979; Kurdek, 1981) is the assumption of reciprocal causal influences between variables, both within and across ecosystem levels. However, it is usually impossible to simultaneously explore all possible variables on all levels of a model because of the uninterpretable complexity this would create (Belsky, 1980; Bronfenbrenner, 1986a, 1986b; Kurdek, 1981). In the current study (cf Kurdek, 1981), the research reviewed in the previous chapters provided the basis for the choice of variables, and for the hypothesized inter-relationships among them.

Parental divorce represents a fundamental shift in offsprings' microsystem which is likely to have profound consequences for both exosystem and ontogenic functioning. This conceptualization suggested the appropriateness of a chronosystem approach to a person-process-context model (cf Bronfenbrenner, 1986a, 1986b). Chronosystem models define the passage of time as an attribute of both the developing person and the environment (Bronfenbrenner, 19986a, 1986b). According to Bronfenbrenner (1986a, 1986b), such research may be either cross-sectional or longitudinal, and tends to focus on the effects of normative (e.g., school entry) and non-normative transitions (e.g., divorce). "Chronosystem" thus refers to research incorporating some degree of focus on change over time, rather than being a specific ecosystem level.

A person-process-context model conceptualizes a given outcome as emerging as a result of processes occurring by virtue of features of the individual and his or her environment (Bronfenbrenner, 1986a, 1986b). As applied to the current subject, this type of model pointed toward characteristics of offspring and their immediate environment working together to determine the processes which might, in turn, influence the effects of divorce and its sequelae. Existing research, in fact, converges on the importance of variables working on these ecosystem levels.

Where depressive symptoms in specific are assessed, teenaged girls, both, in general, and from divorced families, typically report more severe difficulties than males. There is also evidence that offspring from families with a background of depression are at increased risk for depression and symptoms of depression, themselves. Research also implicates other ontogenic system characteristics, especially prior adjustment, temperament, and divorce-related beliefs as mediating adolescents' ability to adjust positively following their parents' marital dissolution. In parallel with these latter findings, cognitive distortion, and vulnerable temperament, especially emotionality, are associated with depressive symptoms among adolescents. Evidence indicates that these ontogenic characteristics also affect depressive symptoms indirectly through their influence on intra- and extra-familial social relationships.

In terms of microsystem level variables, studies consistently report higher risk for offspring psychological problems, including depressive symptoms as the duration of conflict between the parents increases. Evidence also converges on a direct relationship between the perception of a positive parent-child relationship and adolescent psychological

adjustment. Utilization of extra-familial social support has similarly been associated with positive adjustment and with fewer symptoms of depression among adolescents from divorced families, and among adolescents, in general. However, there is some indication that family environment may mediate this relationship in that adolescents experiencing negative home environments may isolate themselves and thereby not benefit from the stress-buffering properties of supportive relationships with friends.

Finally, there is substantial convergent evidence supporting the importance of exosystem level variables. The experience of stressful changes which may follow in the wake of parental divorce such as socioeconomic hardship and being uprooted is associated with the occurrence of adolescent psychological difficulties including symptoms of depression. This pattern is especially evident when such upheaval is combined with decreased access to potentially buffering environmental resources, or when it has a detrimental influence on the parents' functioning.

Based on these general trends in the literature, the proposed chronosystem model of the etiology of depressive symptoms incorporated relationships among variables on ontogenic, micro-, and exosystem levels (see Figure 2). Within the ontogenic system, the model encompassed the effects of temperament, gender, pre-separation behavioral and psychological functioning, family pedigree for depression, and divorce-related perceptions. Problems in family relationships and the extra-familial social support available to the adolescent were the microsystem level variables included, while the exosystem variables were the family's socioeconomic resources, and the degree of family stress. In that the passage of time since the marital dissolution has been relatively

consistently associated with both changes in offsprings' exosystem and microsystem, and improvements in offspring functioning, this variable was also included in the model as a direct operationalization of the chronosystem nature of the current investigation (see Figure 2).

Both direct and indirect relationships were hypothesized. Ontogenic system, exosystem, and microsystem variables, and the time since the marital breakdown were all expected to directly affect the magnitude of adolescent depressive symptoms. In specific, being female, having pre-separation behavioral or psychological problems, a stronger family pedigree for depression, a more fearful, distressful temperament, endorsing more dysfunctional divorce related beliefs, experiencing more problems in family relationships, perceiving less social support, less time since the decisive marital split, experiencing more family stress, and having less family socioeconomic resources were predicted to be associated with more severe adolescent depressive symptoms. In addition, it was assumed that the "upstream", or causally prior variables (i.e., those on ontogenic and exosystem levels, and the chronosystem) were inter-correlated, both because the model was exploratory, and because it is far from exhaustive.

The ontogenic and exosystem level variables and the time since the decisive marital separation were also hypothesized to indirectly affect the severity of depressive symptoms experienced by adolescents via their detrimental influence on the microsystem. Having a more fearful, distressful temperament, being male, experiencing pre-separation behavioral or emotional problems, having a stronger family history of depression, and holding more dysfunctional divorce-related beliefs were expected to affect symptoms of depression indirectly due to their deleterious effect on the

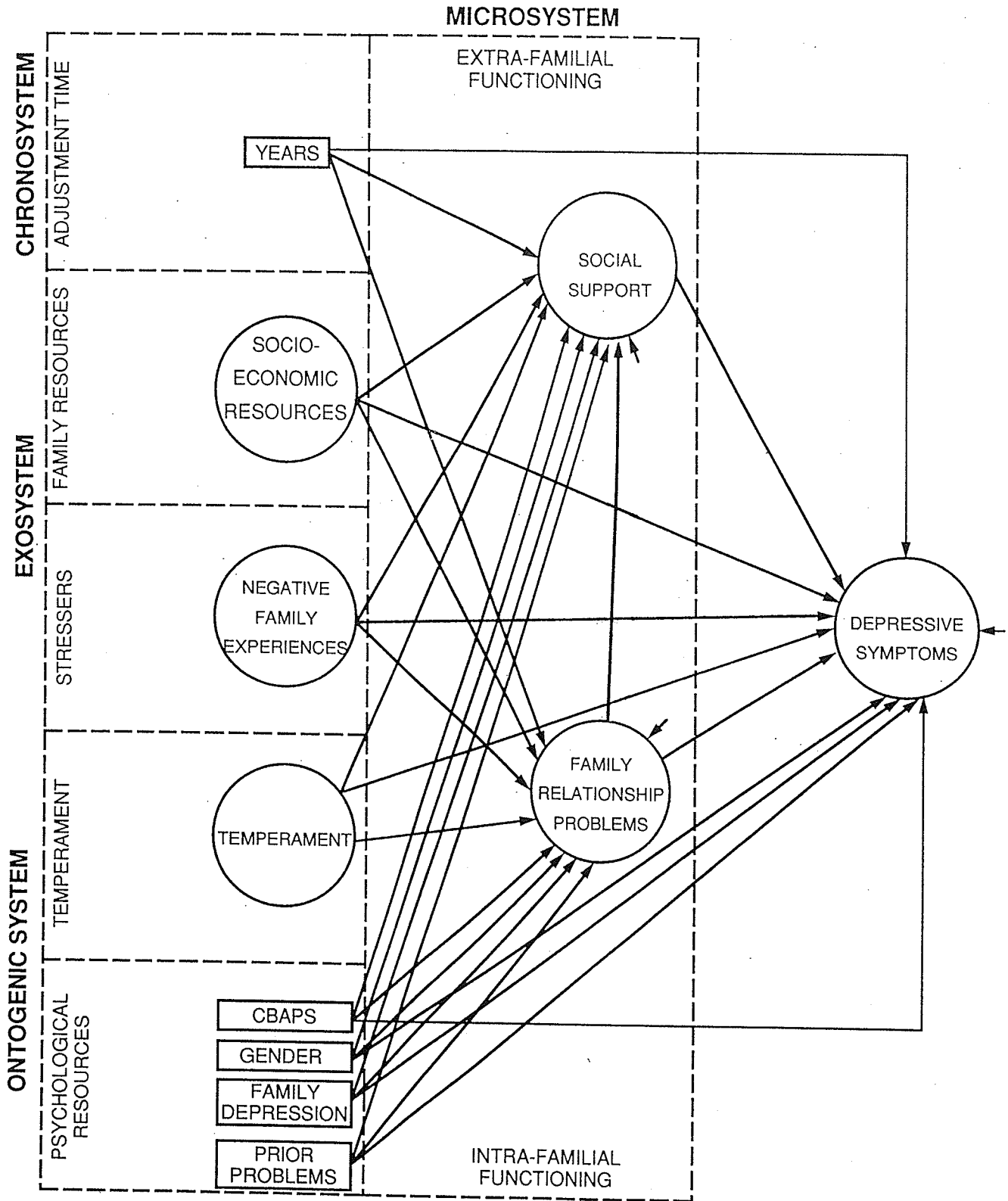


Figure 2. Proposed structural equation model

family environment and on the extra-familial social support perceived by the adolescent. Similarly, less time since the marital breakdown, lower levels of parental socioeconomic resources and family experience of more negative life events were predicted to be indirectly associated with more severe depressive symptoms as a result of their detrimental influence on levels of perceived extra-familial social support and the magnitude of family relationship problems. Finally, more family relationship problems were predicted to be associated with less teen social support.

METHOD

Subjects

Participants were 224 adolescents, 71 male and 153 female, aged 13 to 19, along with their separated or divorced, single, custodial parent. Families were recruited through a search of case files stored in the Clerk's Office of the Family Division of the Court of Queen's Bench in Winnipeg. To be eligible for the study, the adolescent and parent had to be living together, or there had to be a joint custody arrangement in which the adolescent regularly moved between his or her parents' homes. Adolescents living in stepfamilies or the common-law equivalent, adolescents not living with their parents (e.g., in foster care, living independently), those whose parents never lived as married, and those whose parents separated from a common-law marriage were excluded.

Docket Sampling Procedure

The Clerk's Office of the Family Division of the Winnipeg Court of Queen's Bench houses public records of all cases being heard in the Court. Although the Clerk's Office stores proceedings of other types of cases (e.g., guardianship hearings), approximately 90 percent pertain to separations and divorces (see Table 1).

Examination of a randomly chosen sample of files in the Family Division Clerk's Office was used to identify a group of families who appeared to

meet the study selection criteria, for whom addresses and telephone numbers were available. Since separated and divorced families tend to move frequently, especially during the period immediately following the break-up, and since change of address information was not typically available, the decision was made to restrict the sample to files opened within the previous four years (i.e., 1988 through 1991).

During December, 1991, a pilot study of 114 cases approximately evenly distributed by file year was conducted to determine the overall viability of the methodology. To obtain this sample, 892 files were reviewed (see Table 1). Of the 114 pilot cases, it was possible to contact 70 families (61.4%), 54 (47.4%) of whom met the study selection criteria, and 37 (32.4%) of whom requested the study materials (see Table 2). Thirteen families subsequently returned completed surveys (see Table 2). This represents 11.4% of the 114 pilot cases, 24.1% of the traceable families who met the selection criteria, and 35.1% of the 37 families that were mailed surveys (see Table 2).

Since the pilot study occurred during the Christmas season, it was assumed that the return rate was lower than would have otherwise been obtained. Based on studies using similar sampling methodologies (e.g., Arditti & Keith, 1993; Doherty & Needle, 1991; Gray & Silver, 1990; Partridge & Kotler, 1987), it was thought to be more reasonable to expect that approximately 15 to 16% of the fitting cases drawn from the Family Division Clerk's Office would ultimately take part in the study. This estimate represented an anticipated return of surveys from 31.5 to 33% of families who were both traceable, and met the selection criteria, or 45.9 to 48.6% of families requesting the study materials.

TABLE 1

Proportion of Files Reviewed in Pilot Study Meeting Selection Criteria

File Year	Not Divorce Case	Common Law	No Children	Children Wrong Age	Other	Fits Criteria	Total N	Percent
1988	22	19	51	86	11	28	217	24.3
1989	15	11	37	63	10	31	167	18.7
1990	28	20	49	89	14	28	228	25.6
1991	23	44	50	116	20	27	280	31.4
Total	88	94	187	354	55	114	892	100.0
Percent	9.9	10.5	21.0	39.7	6.2	12.8	100.0	

TABLE 2

Proportion of Pilot Sample Requesting Surveys

File Year	Not Traceable	Did Not Fit Criteria	Refused	Asked For Survey	Total N	Percent
1988	10	5	6	7	28	24.6
1989	13	3	6	9	31	27.2
1990	12	4	3	9	28	24.6
1991	9	4	2	12	27	23.7
Total	44	16	17	37	114	100.0
Percent	38.6	14.0	14.9	32.4	100.0	

A relatively large sample was necessary because the fit of the model was tested using structural equation modeling. Although the literature has not yet reached consensus regarding what sample size is sufficiently "large" to enable a reliable test of a given model (Loehlin, 1987; Tanaka, 1987,

1993), there are several rules of thumb for evaluating the adequacy of a sample's size (e.g., Loehlin (1987), $N \geq 100$; Bentler (1985), five to ten subjects per parameter).

In the current study, the moderately conservative guideline of approximately three to four subjects per estimated parameter (cf Tanaka, 1987) was used to calculate the minimum necessary sample size. The structural model (see Figure 2) estimates 58 parameters (i.e., 28 correlations between upstream factors/variables, 3 error terms for downstream factors, 27 structural paths between factors), while the measurement model (see Figure 3) contains 28 estimated parameters (i.e., 6 factor variances, 14 measurement error terms, 8 factor-to-measure paths). Tanaka's (1987) guideline indicated a goal of approximately 258 (i.e., 86×3) families.

Assuming that 15 to 16% of the fitting files identified based on a review of the Court files would yield participating families, it was calculated that 1531 to 1633 additional cases were necessary to obtain a sample size of 258. Approximately 11,000 files, or about eight out of every ten of the 15,751 Family Division Queen's Bench files available for the years 1988 through 1991 were reviewed to obtain the remaining 1533 target cases (see Table 3).

TABLE 3
Proportion of Files Meeting Selection Criteria

File Year	Not Divorce Case	Common Law	No Children	Children Wrong Age	Other	Fits Criteria	N	Total Percent
1988	197	316	530	987	205	429	2664	23.0
1989	224	377	535	1139	214	397	2886	24.9
1990	217	337	529	1155	213	394	2845	24.5
1991	225	502	525	1323	223	399	3197	27.6
Total	863	1532	2119	4604	855	1619	11592	100.0
Percent	7.4	13.2	18.3	39.7	7.4	14.0	100.0	

Note. Does not include pilot sample.

Data Collection

Due to the fact that single parent families are a highly mobile group, addresses and telephone numbers obtained from the Docket files were checked in the Telephone Directory, and then double checked with Directory Assistance. When the address obtained from the Court file could not be confirmed, and/or multiple possibilities were identified, the Henderson Directory was used to further attempt to trace the family.

An introductory letter inviting the family to take part in the study (see Appendix A) was mailed to the most current address available. When there were multiple possible addresses, one was chosen at random. If this first letter was returned, letters were mailed to up to four additional addresses. This procedure enabled assessment of all possible addresses except for a small number of cases where people had extremely common names.

The introductory letter gave families the opportunity to stop further involvement with the project. Any families not using this option were telephoned about one week after the letter was mailed. Up to ten attempts were made to telephone the custodial parent. If this was unsuccessful, or if it was established that the wrong family had been contacted, the strategy outlined above was used to try up to three other available addresses.

Once the custodial parent was reached, a specific protocol was followed (see Appendix B) to confirm that the family met the selection criteria, outline the details of the study, and answer any questions the parent had. If the parent expressed interest in the study s/he was mailed the questionnaire package (see Appendices C to G).

Each package included: a covering letter (see Appendix C), a consent form (see Appendix E), questionnaire batteries for the parent (see Appendix F) and the teenager (see Appendix G), two labeled privacy envelopes, and a pre-addressed, stamped return envelope. To participate, parent and teen initialed the consent form, independently completed the questionnaires, sealed them in the separate privacy envelopes, and returned the surveys.

Packages also included a second letter about the study which families were asked to give to someone they know who fit the selection criteria (see Appendix D). This was designed to expand the sample through a modified "snowball" strategy (cf Sudman, 1976). Unfortunately, very few participants were recruited this way, and they were not included in the final sample.

TABLE 4
Proportion of Total Sample Requesting Surveys

File Year	Not Traceable	Did Not Fit Criteria	Refused	Asked For Survey	N	Total Percent
1988	201	69	83	104	457	26.4
1989	179	70	70	109	428	24.7
1990	170	57	63	132	422	24.3
1991	138	48	83	157	426	24.6
Total	688	244	299	502	1733	100.0
Percent	39.7	14.1	17.2	29.0	100.0	

Note. Total includes pilot sample.

Of the 1733 families drawn from the Court files, including the pilot sample, it was possible to contact 1045 (60.3%) (see Table 4). Five hundred and two of these traceable families both met the selection criteria, and asked for the surveys, and 224 families subsequently took part. This represents 12.9% of the 1733 original cases identified from the Court records, 15.6% of the traceable families who met the selection criteria, and 44.6% of the 502 families requesting surveys.

Measurement Model

To maximize the validity of the test of the structural equation model (Bentler, 1985; Joreskog & Sorbom, 1986; Loehlin, 1987), instruments were chosen based on construct consistency with the relevant latent variable, and evidence of adequate reliability and validity. When possible, more than one instrument was chosen to measure each theoretical construct (see Figure 3) to facilitate model identification (Bollen, 1989), although there were several variables for which only one measure was available.

This section briefly presents the rationales based on which measures were chosen to assess each variable in the model (see Figure 3). Information pertaining to the reliability and validity of the measures is outlined in the next section.

The adolescent's divorce-related beliefs were assessed by The Children's Beliefs About Parental Divorce Scale (CBAPS, Kurdek & Berg, 1987), which was the only published instrument tapping this construct. The amount of time the family had to adjust to the separation was measured by the parent's report of the number of years since the decisive marital breakdown. Adolescent gender was, by definition, measured by a single item. Whether the adolescent experienced psychological problems prior to the parents' split, and the family pedigree of depression were also assessed by single measures provided by the parent.

The Centre for Epidemiologic Studies - Depression Scale (CES-D, Radloff, 1977), the Beck Depression Inventory (Beck et al., 1961), and the Jessor Problem Behavior Scales (JPBS, Jessor & Jessor, 1977) were chosen to evaluate adolescent depressive symptoms. The BDI and the CES-D solicit

information regarding a broad, but slightly different range of depressive symptoms, using different response formats (Snaith, 1993). The Jessor Problem Behavior Scales tap a wide range of anti-social and self-destructive behaviors which are associated features of Major Depressive Episodes in adolescents (cf DSM-III-R, 1987).

Of the five temperaments measured by the Self-Report Emotionality, Activity, Sociability Scale (EAS, Buss & Plomin, 1984), the emotionality-distress and emotionality-fearfulness subscales were chosen to measure adolescent temperament because of evidence that they have the strongest role in the genesis of depressive symptoms (e.g., Eysenck, 1970; Goodyer et al., 1993). An alternate measure of this latent variable, the custodial parent's ratings of the adolescent's temperament on the EAS, was included to provide a way of compensating for the possibility that the adolescent-completed emotionality items and the depression instruments might tap the same underlying latent variable, adolescent distress (cf Compas et al., 1993; Windle, 1992).

The Perceived Social Support from Friends Scale (PSS-Fr, Procidano & Heller, 1983) was used because it was designed specifically to assess support perceived in extra-familial relationships, and measures of the individual's perception of social support are thought to have more explanatory power than purely structural, or functional measures (e.g., Heitzmann & Kaplan, 1988). Since there were no other published self-report measures of perceived social support from friends, a second global measure of the construct was obtained by asking adolescents to indicate the number of people outside their family whom they thought loved and valued them, and to whom they could turn for help if needed.

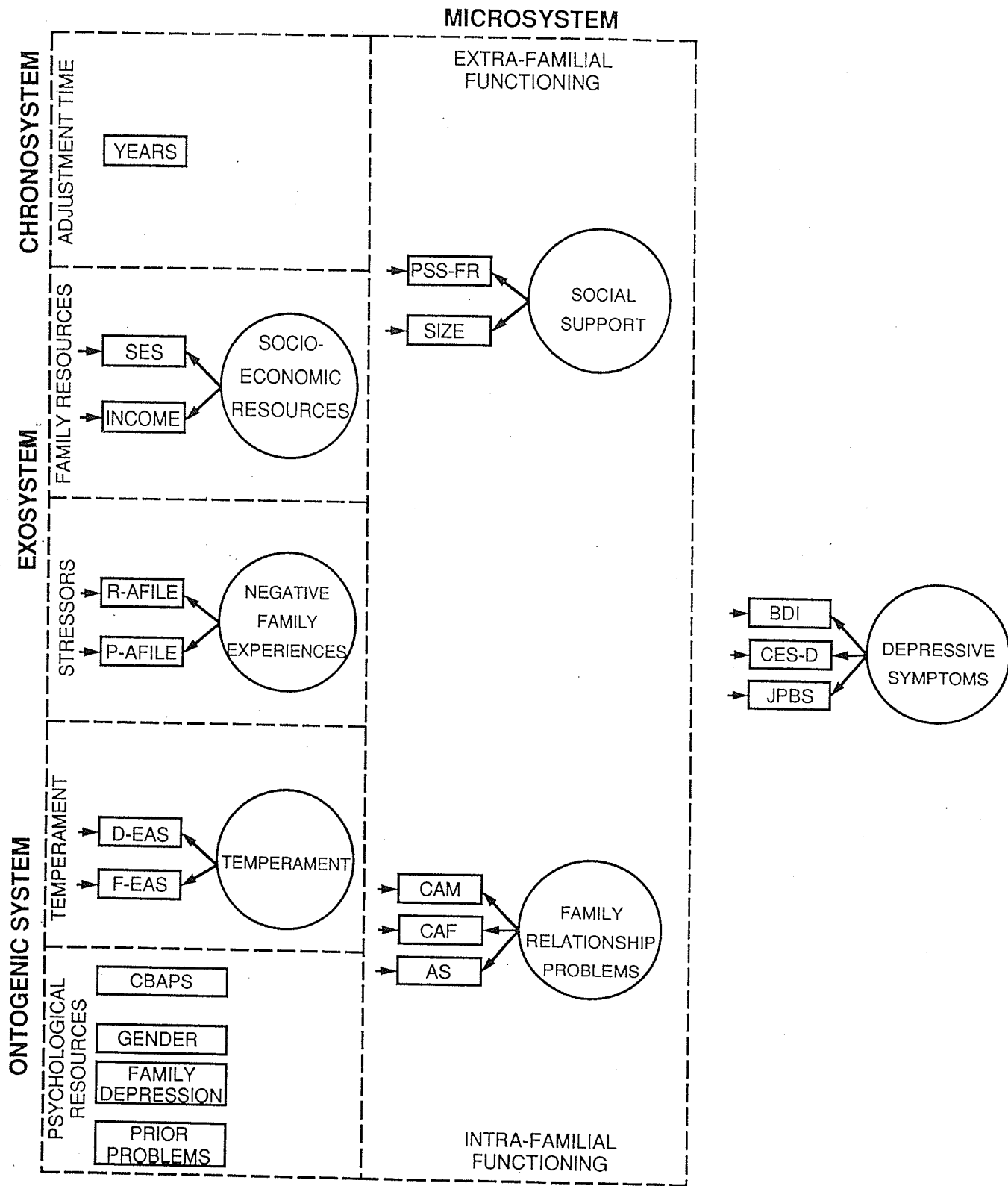


Figure 3. Proposed measurement model

Problems in family relationships, were measured using two instruments which provided indices of dysfunction in the relevant relationships. The Acrimony Scale (AS, Emery, 1982b, cited in Shaw & Emery, 1988) assesses the degree of conflict between separated or divorced parents. The Child's Attitude toward Mother (CAM) and the Child's Attitude toward Father Scales (CAF, Guili & Hudson, 1977; Hudson, 1982) evaluate the quality of the parent-child relationship from the child's perspective (Corcoran & Fisher, 1987).

The Adolescent-Family Inventory of Life Events and Changes (A-FILE, McCubbin, Patterson, Bauman & Harris, 1981) was chosen from the plethora of instruments designed to assess stressful life events experienced by adolescents (e.g., Coddington, 1972a, 1972b; Compas, Davis, Forsythe & Wagner, 1987; Garrison, Schoenbach, Schluchter & Kaplan, 1987; Monoghan, Robinson & Dodge, 1979; Newcomb, Huba & Bentler, 1981; Yeaworth, York, Hussey, Ingle, & Goodwin, 1980) for two reasons. First, the emphasis of the A-FILE is on negative events occurring on both individual and family levels, consistent with an ecological perspective (cf Bronfenbrenner, 1977a, 1977b, 1979; Kurdek, 1981). Secondly, the A-FILE yields indices of both recent and past family changes.

The socioeconomic status (cf Blishen & McRoberts, 1976; Pineo, 1984; Pineo, Porter & McRoberts, 1977) of the occupation of the custodial parent, and the reported family income were used to measure family socioeconomic resources. The revised Pineo-Porter-McRoberts (Pineo, 1984; Pineo et al., 1977) index was chosen due to its specificity to Canadian populations, and due to its use in the Canadian Census.

The bulk of the data was collected from the adolescent. The adolescent questionnaire (see Appendix G) included: a brief demographics section, the CES-D (Radloff, 1977), the BDI (Beck et al., 1961), the JPBS (Jessor & Jessor, 1977), the PSS-Fr (Procidano & Heller, 1983), a rating of perceived social network size, the CAM and the CAF (Giuli & Hudson, 1977), the EAS (Buss & Plomin, 1984), the CBAPS (Kurdek & Berg, 1987) and the A-FILE (McCubbin et al., 1981) (see Appendix G). The parent survey included: the AS (Emery, 1982b, cited in Shaw & Emery, 1988), the EAS (Buss & Plomin, 1984), and a comprehensive demographics section (see Appendix F). To compensate for potential order effects, four randomly determined versions of the of the two questionnaires were used.

Demographic Items

Adolescents provided information regarding age, gender, last year of school completed, current school attendance and grade, employment status, and perceived size of extra-familial social support system (see Appendix G). A more detailed demographics section was administered to parents asking about: age, gender, current marital status, employment status and occupation, educational attainment, income, religious preference, language spoken at home, country of birth, and ethnic and racial background (see Appendix F). Where possible, these questions and response choices were phrased to be consistent with the items in the 1981 Canadian Census. Parents were also asked to provide family-related information such as age, gender, relation to parent, and employment status of other household members, history of mental health or behavioral difficulties manifested by the target adolescent, family history of contact with mental health

professionals, and family pedigree for affective spectrum difficulties in first and second degree biological relatives (i.e., children, parents, uncles and aunts, and siblings) (see Appendix F). Finally, parents completed a section describing the details of the divorce and divorce settlement including: time since the decisive marital separation and since the divorce, length of marriage, custody agreement, visitation arrangements, frequency of visitation and of contact between the divorced parents, level of child support, which partner initiated the separation, and the reasons for the marital dissolution (see Appendix F).

The measure of family background of depression was derived from an interview method for obtaining family prevalence of psychiatric disorder used in epidemiological research, called The Family History Method (cf Andraesen, Endicott, Spitzer & Winokur, 1977). Family loading for depressive spectrum difficulties was computed from six items which asked the parents to indicate the number of biologically-related family members who had been depressed, including: their aunts and uncles, their ex-spouse's aunts and uncles, their siblings, their ex-spouse's siblings, themselves, their parents, and their ex-spouse's parents. The index of family pedigree for depression was calculated by summing the number of family members who had experienced depression, and dividing by the total family size minus the number of relatives for whom the parent was unsure whether they had experienced depression. The index thus ranges from 0 to 1, with numbers closer to one indicating a higher frequency of significant depressive symptomatology in the family.

Socioeconomic status was derived from the revised Pineo-Porter-McRoberts (Pineo, 1984; Pineo et al., 1977) socioeconomic index for occupations in Canada. Ratings were based on the occupation of the custodial parent.

The Acrimony Scale

The AS (Emery, 1982b, cited in Shaw & Emery, 1988) is a 25-item self-report instrument which yields a single score signifying the degree of conflict between separated or divorced parents (see Appendix F). It solicits information about a broad range of potential areas of animosity. Items are counterbalanced between positive and negative wording, and are rated on a four-point scale from "almost never" to "almost always". The total score, which ranges from 1 to 4, is computed by summing the responses and dividing by the number of items answered.

The AS has high internal consistency and substantial temporal stability. Estimates of internal consistency ranging from .83 (Shaw & Emery, 1988) to .88 (Emery, 1982b, cited in Shaw & Emery, 1988) have been obtained in community samples of single parent mothers, and the test-retest reliability of single-parent mothers' AS scores was .88 over a 6-week period (Emery, 1982b, cited in Shaw & Emery, 1988).

The AS also relates to other instruments in the theoretically expected directions. Higher AS scores were associated with more child behavior problems (Shaw & Emery, 1987), lower offspring performance on a measure of intellectual abilities (Shaw & Emery, 1988), and more maternal depressive symptoms (Shaw & Emery, 1988).

Adolescent-Family Inventory of Life Events and Changes

The A-FILE was developed for use with adolescents from 12 to 18 years of age who are living in a family setting (McCubbin et al., 1981). This 50-item self-report instrument assesses an adolescent's perspective on the

family life events and changes experienced during and prior to the past 12 months. The items fall into six general areas (i.e., transitions, sexuality, losses, responsibilities and strains, substance use and legal conflict).

Respondents are asked to indicate whether they or any family member have experienced each of 50 events during the past 12 months. For a subset of 27 events which typically require more long term adjustment, or have chronic effects (McCubbin & Patterson, 1981) respondents are asked to indicate whether any family member also experienced them prior to the last 12 months. Affirmative responses are added to calculate the total recent life changes score (R-AFILE), which ranges from 0 to 50, and the total past life changes score (P-AFILE), which ranges from 0 to 27.

Validation studies for the A-FILE report internal consistencies of between .69 (McCubbin, Needle & Wilson, 1985; McCubbin & Peterson, 1981; Olson, McCubbin, Barnes, Larsen, Mixen & Wilson, 1983), and .80 (Stewart et al., 1994) for the Total Recent Life Changes score. No data regarding the internal consistency of the Total Past Life Changes score were available. Two week test-retest reliability for the instrument in a sample of high school students ranged from .82 for Total Recent Life Changes to .84 for Total Past Life Changes (McCubbin & Patterson, 1981). Evidence for the validity of the A-FILE comes from studies finding significant positive correlations between both Total Recent and Past Life Changes and indices of adolescent dysfunction such as alcohol, marijuana, cigarette use (McCubbin & Patterson, 1981; McCubbin et al., 1985), and depressive symptoms (Stewart et al., 1994), as well as measures of family dysfunction including poor parent-child communication (Stewart et al., 1994).

The Beck Depression Inventory

This instrument consists of 21 items chosen to tap four major groups of symptoms associated with depression: vegetative changes; self-debasement; pessimism and suicidality; and indecision and inhibition (Beck et al., 1961) (see Appendix G). Each item describes four levels of symptom severity from absent (0) to severe (3). The total BDI score, ranging from 0 to 63, is the sum of the individual item ratings.

Estimates of the internal consistency of the BDI range from .79 to .92 in adolescent clinical and community samples (Ambrosini et al., 1991; Kashani et al., 1990; Roberts et al., 1991; Schubiner & Robin, 1990; Strober et al., 1981a; Teri, 1982). Test-retest reliabilities ranging from .61 to .86 have been obtained over periods from five days to six weeks in a variety of teenaged samples (Ambrosini et al., 1991; Roberts et al., 1991; Strober et al., 1981a; Tanaka & Huba, 1987).

Adolescents endorse a constellation of symptoms on the BDI equivalent to adults (Kovacs & Beck, 1977; Strober et al., 1981a; Teri, 1982), and higher BDI scores have been demonstrated among depressed adolescents as compared to those with other diagnoses (Ambrosini et al., 1991; Kashani et al., 1990; Kauth & Zettle, 1990; Lewinsohn et al., 1993a; Roberts et al., 1991; Strober et al., 1981a). Adolescent BDI scores also correlate in the theoretically expected direction with other measures of depressive symptoms (Ambrosini et al., 1991; Carey et al., 1992; Connell & Meyer, 1991; Roberts et al., 1991; Tanaka & Huba, 1987), the frequency of adverse health behaviors (Kaplan, 1980; Kaplan et al., 1984b), suicidal ideation and behavior (Connell & Meyer, 1991; de Man, Leduc & Labreche-Gauthier, 1993;

Lewinsohn et al., 1993b; Steer et al., 1993; Workman & Beer, 1992), helplessness (Bennett et al., 1991; Johnson & McCutcheon, 1981), hopelessness (Connell & Meyer, 1991), anxiety (Bennett et al., 1991; Connell & Meyer, 1991), adjustment in both family and peer relationships (Black & Pedro-Carroll, 1993; Sullivan, 1979) and self-esteem (Sullivan, 1979).

The Center for Epidemiologic Studies - Depression Scale

The CES-D (Radloff, 1977) is a 20-item self-report measure of depressive symptoms experienced during the preceding week (see Appendix G). Items are rated on a three point scale from "rarely or none of the time (less than 1 day)" to "most or all of the time (5-7 days)". The total score, ranging from 0 to 60, is the sum of the item ratings, with higher scores indicating more depressive symptoms of greater duration.

There is considerable evidence that the CES-D has adequate reliability and validity when used with teenagers (Radloff, 1991). Estimates of its internal consistency range from .81 to .91 in a variety of adolescent community samples (Faulstich et al., 1986; Garrison et al., 1989, 1991; Gjerde & Block, 1991; Gjerde et al., 1988; Lewinsohn et al., 1993a; Radloff, 1991; Roberts et al., 1991; Schmitt & Kurdek, 1985; Schoenbach et al., 1982; Siegel & Brown, 1988; Vulcano & Barnes, 1987; Windle et al., 1986). Test-retest reliabilities of between .36 and .69 have been found over periods ranging from two weeks to two years (Faulstich et al., 1986; Garrison et al., 1990; Lewinsohn et al., 1993a; Roberts et al., 1991; Tanaka & Huba, 1987).

CES-D scores significantly predicted scores on the measure eight months later in a child and adolescent school sample (Siegel & Brown, 1988). They also differentiated depressed adolescents from both those with other diagnoses and those with no diagnosis (e.g., Garrison et al., 1991; Lewinsohn et al., 1993a; Radloff, 1991; Roberts et al., 1991).

Adolescent scores on the CES-D have also been found to relate as theoretically expected to scores on other measures of symptoms of depression (Faulstich et al., 1986; Roberts et al., 1991; Siegel & Brown, 1988; Tanaka & Huba, 1987; Weissman, Orvaschel & Padian, 1980), as well as measures of other types of psychopathology including anxiety (Doerfler et al., 1988; Vulcano & Barnes, 1987), suicidal ideation (Cole, 1989; Garrison et al., 1991; Hops et al., 1990; Rotheram-Borus, 1993), and problem behaviors (Hops et al., 1990; Vulcano & Barnes, 1987; Windle et al., 1986). Elements of personality functioning such as locus of control (Doerfler et al., 1988; Vulcano & Barnes, 1987), and self-esteem and ego strength (Doerfler et al., 1988; Gjerde et al., 1988; Hops et al., 1990; Smart & Walsh, 1993; Vulcano & Barnes, 1987; Windle et al., 1986) have similarly covaried with adolescent CES-D scores in the expected directions as have aspects of interpersonal functioning including quality of family relationships (Schmitt & Kurdek, 1985; Vulcano & Barnes, 1987), perceived social competence (Hops et al., 1990; Windle et al., 1986), and social support (Hops et al., 1990; Schmitt & Kurdek, 1985). Indices reflecting more vulnerable temperaments including a tendency to withdraw from new situations, inflexibility, negative mood, distractability, and lack of persistence are also associated with higher CES-D scores in adolescent samples (Windle et al., 1986).

Child's Attitude Toward Father and Mother Scales

The CAM and the CAF (Giuli & Hudson, 1977; Hudson, 1982) were designed to assess the severity of problems 11 to 19 year olds perceive in their relationship with their mother or father, respectively (see Appendix G). The 25 counterbalanced items are rated on a five-point scale from true "rarely or none of the time" to true "most or all of the time". A total score, ranging from 0 to 100, where higher scores indicate more severe parent-child difficulties, is computed by adding the responses, and subtracting 25.

Validation studies suggest this instrument has excellent psychometric properties. Internal consistency reliabilities ranged from .94 (Giuli & Hudson, 1977) to .95 for the CAM (Saunders & Schucts, 1987), and from .95 (Giuli & Hudson, 1977) to .97 for the CAF (Saunders & Schucts, 1987) in high school samples. One-week test-retest reliabilities ranged from .89 to .96 for graduate students, and adolescents in outpatient treatment, respectively (Giuli & Hudson, 1977).

Evidence also supports the discriminant validity of the instruments. CAM and CAF scores correctly identified high school students who reported having problems with their mother or father (Giuli & Hudson, 1977; Saunders & Schucts, 1987), children whom therapists rated as having serious mother-child problems (Giuli & Hudson, 1977), and children living with both natural parents versus a natural parent and a step-parent (Saunders & Schucts, 1987).

Children's Beliefs About Parental Divorce Scale

The CBAPS (Kurdek & Berg, 1987) uses 36 counterbalanced yes-no items to assess the dysfunctional beliefs children between the ages of 6 and 17 hold about their parents' divorce (see Appendix G). Six items were selected to tap each of six major areas of problematic beliefs: peer avoidance and fear of ridicule; maternal blame for the divorce; paternal blame for the divorce; fear of abandonment; hope of parental reunification; and self-blame. The total score, which represents the number of dysfunctional beliefs, ranges from 0 to 36.

Internal consistencies ranged from .75 to .80 in various samples of children and adolescents from divorced families (Friesen et al., 1991; Kurdek & Berg, 1987). Nine week test-retest reliability for a junior high sample was .65 (Kurdek & Berg, 1987).

The validity of the CBAPS is supported by the existence of decreasing total scores, hope-of-reunification beliefs (Friesen et al., 1991; Kurdek & Berg, 1987; Kurdek & Siesky, 1980b), and self-blame (Friesen et al., 1991) with age. Subscale scores also vary with custody and the reasons for the marital breakdown. Higher levels of paternal blame are, for example, found among offspring in mother-custody families (Kurdek & Berg, 1987). Children whose parents separated due to changed feelings expressed less paternal blame than children whose parents separated because of violence, infidelity, or desertion (Friesen et al., 1991). In addition, higher CBAPS scores were associated with more anxiety, lower self-concept, lower levels of social support (Kurdek & Berg, 1987), and more internalizing and externalizing behavior problems (Friesen et al., 1991).

Emotionality, Activity, Sociability Scale

The self-report EAS (Buss & Plomin, 1984) is a 20-item instrument containing four items measuring each of emotionality-distress, emotionality-fearfulness, emotionality-anger, activity, and sociability. Items are rated on five point scales from "not at all characteristic or typical of yourself" to "very characteristic or typical of yourself" (see Appendix G). The parent version of the EAS (see Appendix F), rates the degree to which each characteristic applies to the target adolescent. The five subscale scores are computed by summing the four relevant items and dividing by four. Each temperament score thus ranges from 1 to 5, with higher scores indicating greater expression of the given temperament.

The authors (Buss & Plomin, 1984) did not provide evidence regarding the internal consistency reliability of either the EAS as a whole, or of the five trait scores. However, two week test-retest reliability averaged .82 in an undergraduate sample, ranging from .85 for the sociability and anger scales, to .75 for emotionality-distress (Buss & Plomin, 1984).

Support for the construct validity of the EAS comes from factor analyses which yielded five factors tapping the five traits the measure was designed to assess (Buss & Plomin, 1984; Plomin, Pedersen, McClearn, Nesselroade & Bergeman, 1988). The subscales demonstrated the expected patterns of intercorrelations (cf Buss & Plomin, 1984), with, for example, the three emotionality scales being largely independent from sociability and activity (Buss & Plomin, 1984; Goodyer et al., 1993; Plomin et al., 1988). Higher correlations have been reported for all five EAS subscales between identical twins reared together, and apart compared to similarly reared

fraternal twins. Minimal effects for shared environment have also been noted (Buss & Plomin, 1984; Plomin et al., 1988). In adolescent samples, the relationships among the EAS subscales and adolescent self-reports of sibling interactions, parental treatment and peer characteristics lend support to the role of these traits in personality formation and in shaping experience (Daniels, 1986). Emotionality has, in addition, been found to be the best EAS predictor of symptoms of depression among teenagers (Goodyer et al., 1993).

Jessor Problem Behavior Scales

The JPBS (Jessor & Jessor, 1977) is a series of 25 items assessing teen involvement in five areas of anti-social behavior: marijuana use, sexual intercourse, activist protest, problem drinking, and general deviant behavior (see Appendix G). Sexual intercourse, and political activism are assessed by single, dichotomous items. Marijuana use is measured on a four-point Guttman-type scale on which a score of greater or equal to one indicates significant commitment to use of the drug. All other items are rated on six-point scales from "none" to "10 or more times during the past year". Problem drinking is indicated by five or more incidents of drunkenness, or two or more negative consequences from drinking in the past year on the six items assessing alcohol use. The cut-off score for significant general deviant behavior is a score above the sample mean on 13 items rating delinquent behavior. The Multiple Problem Behavior Index, ranging from 0 to 5, is the sum of the above five dichotomous subscores, such that higher totals indicate more problem behavior.

Psychometric properties of the index are adequate (Jessor & Jessor, 1977). The internal consistency of the General Deviance subscale was, for example, .87 in a mixed sample of adolescents with medical, or psychiatric problems and normal controls (Ebata & Moos, 1991). The validity of the JPBS is demonstrated by findings such as negative correlations with religiosity (Jessor & Jessor, 1977), and positive correlations with social criticism (Jessor & Jessor, 1977), age, and reliance on less adaptive problem solving strategies such as emotional discharge (Ebata & Moos, 1991). There is, in addition, evidence that adolescents diagnosed with either depression or conduct disorder report more deviant behaviors than either medical or normal controls (Ebata & Moos, 1991).

Perceived Social Support from Friends Scale

This instrument (see Appendix G) assesses degree of perceived social support from friends (Procidano & Heller, 1983). It is comprised of 20 statements, five negatively worded, to which respondents answer "yes", "no" or "don't know". Answers are summed to obtain a total score ranging from 0 to 20 for which higher scores indicate more perceived support.

Internal consistencies ranging from .83 to .88 have been found in adolescent samples (Barone, Aguirre-Deandreis & Trickett, 1991; Kurdek & Sinclair, 1988; Procidano & Heller, 1983; Schmitt & Kurdek, 1985; Windle, 1992). Test-retest reliability was .83 over one month in an undergraduate sample for a preliminary 35-item version of the PSS-Fr (Procidano & Heller, 1983).

Adolescent scores on the PSS-Fr were reciprocally related to level of general psychopathology and psychological distress (Barone et al., 1991; Kurdek & Sinclair, 1988; Procidano & Heller, 1983; Rowlison & Felner, 1988), symptoms of depression (Hops et al., 1990; Rowlison & Felner, 1988; Windle, 1992), low self-esteem (Rowlison & Felner, 1988), lack of goal directedness (Kurdek & Sinclair, 1988), anxiety (Bowers & Gesten, 1986; Rowlison & Felner, 1988), conventionality of male sex role attitudes (Burda & Vaux, 1987), perceived social support from family (Ward & Lewko, 1987), loneliness in friendships (Schmitt & Kurdek, 1985), and negative attitudes regarding social support utilization (Vaux, Burda & Stewart, 1986a). The PSS-Fr was positively correlated with an unpublished measure of perceived social support from friends (Vaux, Phillips, Holly, Thomson, Williams & Stewart, 1986b), and with more observed outgoing social behavior (Procidano & Heller, 1983).

Data Analysis

Six main questions were addressed: 1. What are the sociodemographic characteristics of the participant families?; 2. Is the sample representative of single parent divorced families in Canada?; 3. What are the psychometric properties of the measures?; 4. What are the univariate relationships among the measures?; 5. What are the univariate relationships between the measures of depressive symptoms and other variables not included in the model? and 6. Does the proposed model adequately explain the relationships observed among the variables?

Preliminary Analyses

Prior to addressing the six main questions outlined above, data were assessed for any systematic missing variables. The majority of items used to calculate the summary scores included in the model had less than 5% missing values, and seven items distributed across a variety of the measures had between 10 and 15% missing values. Examination of the correlations among items containing over 5% missing values and sample demographic characteristics did not reveal any consistent pattern of relationships.

Missing values on measures or single items used in the model were replaced with the item mean or mode, as appropriate, calculated separately for males and females. This way of dealing with missing values was chosen because inserting means varying as a function of some demographic characteristic is less likely to attenuate correlations than use of the overall item mean (Tabachnik & Fidell, 1983, 1989). Gender was used

because previous research found evidence of sex differences in a number of the variables assessed (e.g., depressive symptoms, temperament, divorce beliefs, parent-child relations, social support). Although correlations may be attenuated if variables have a substantial number of missing values replaced with measures of central tendency (Tabachnik & Fidell, 1983, 1989), this was not thought to be a major influence in the current sample since most of the items used to compute the summary scores had a relatively small number of missing values (Tabachnik & Fidell, 1983, 1989).

The second step of the preliminary analysis involved examination of the distributions of the summary scores for each measure in the model to assess the degree to which they met assumptions regarding univariate normality (cf Bollen, 1990, Bollen & Long, 1992; Joreskog, 1993; Kaplan, 1990; Marsh, Balla & McDonald, 1988; Mulaik, James, Van Alstine, Bennett, Lind & Stilwell, 1989; Muthen, 1993; Wothke, 1993). A measure of multivariate kurtosis, Mardia's coefficient (cf Bentler, 1989), was also computed.

As summarized in Table 5, many of the summary scores were significantly skewed and kurtotic. Mardia's coefficient was 30.7 for the nineteen measures in the proposed model. This figure is relatively high, suggesting the raw data did not meet assumptions of multivariate normality.

To remediate this situation, and facilitate structural equation modeling, transformations were attempted on variables for which univariate distributions were significantly skewed (cf Bentler, 1985, 1989; Joreskog, & Sorbom, 1986; Loehlin, 1987). Negatively skewed variables, INCOME and social support from friends (PSS-Fr), were transformed by reflecting them and taking the square root of the reflected scores when this was helpful

TABLE 5
 Distributional Characteristics of the Variables in the Model

Variable	Mean	Number of items	Range	S.D.	Skewness	Kurtosis
P-AFILE	5.78	27	0-16	3.59	0.61***	-0.08
R-AFILE	10.89	50	1-24	4.96	0.30*	-0.54
D-EAS	2.68	4	1-5	0.99	0.08	-0.72*
F-EAS	2.56	4	1-5	0.89	0.36*	-0.21
CBAPS	6.32	36	0-20	4.02	0.74***	0.52
PSS-Fr	13.40	20	0-20	4.71	-0.60***	-0.43
FRIENDS	5.51	1	0-50	4.91	4.11***	30.31***
CAM	24.74	25	0-100	20.30	1.16***	1.18***
CAF	39.04	25	0-100	28.47	0.39**	-1.12***
AS	2.14	25	1-3.28	0.44	-0.07	0.03
BDI	10.59	21	0-59	10.03	1.43***	2.48***
CES-D	17.23	20	0-55	12.25	0.90***	0.19
JPBS	1.96	25	0-5	1.57	0.18	-1.29***
GENDER	n.a	1	1-2	0.47	n.a	n.a
FAMDEP	0.42	5	0-1	0.33	0.36*	-1.11***
PREVPROB	n.a	1	1-2	0.44	n.a	n.a
YEARS	4.66	1	0.25-16	3.34	1.17***	1.10***
SES	8.48	1	2-15	4.05	-0.17	-1.33***
INCOME	5.79	1	1-8	1.76	-0.58***	-0.43

Note. P-AFILE = Past Index-Family Inventory of Life Events, R-AFILE = Current Index-Family Inventory of Life Events, D-EAS = Distress - Emotionality, Activity, Sociability Scale, F-EAS = Fearfulness - Emotionality, Activity, Sociability Scale, CBAPS= Children's Beliefs About Divorce Scale, PSS-Fr = Perceived Social Support From Friends Scale, FRIENDS=Number of close friends, CAM=Child's Attitude Toward Mother Scale, CAF = Child's Attitude Toward Father Scale, AS= Acrimony Scale, BDI = Beck Depression Inventory, CES-D = Centre For Epidemiologic Studies - Depression Scale, JPBS = Jessor Problem Behavior Scales, GENDER=Teen gender, FAMDEP = Family pedigree for depression, PREVPROB= Teen pre-split behavioral or emotional problems, YEARS=Years since the decisive marital split, SES= Socioeconomic status, INCOME=Parent's income.

* p<.05 ** p<.01 ***p<.001

(Tabachnik & Fidell, 1983, 1989). A log transformation was used to improve the distributional properties of years since the marital breakdown (YEARS), the teen's number of close friends (FRIENDS), and family pedigree for depression (FAMDEP), which were substantially positively skewed (Tabachnik & Fidell, 1983, 1989). The square root was taken of scores on the measures of current (R-AFILE) and past family stress (P-AFILE), depressive symptoms (BDI, CES-D), dysfunctional divorce beliefs (CBAPS), mother-child (CAM) and father-child relationship problems (CAF), and the measure of temperamental fearfulness (F-EAS), which were all moderately positively skewed (Tabachnik & Fidell, 1983, 1989). Following these transformations, Mardia's coefficient decreased substantially, from 30.7 to -5.1.

For the purposes of the structural equation modeling only, variables were subjected to an additional transformation when their standard deviations were extremely different (cf Bentler, 1986, 1989). This transformation involved dividing or multiplying variable standard deviations by constants in order to make them more similar (cf Bentler, 1989). Such transformations are recommended (cf Bentler, 1986, 1989) because the structural equation modeling program used (EQS, Bentler, 1986, 1989) has difficulty finding solutions when standard deviations are widely disparate, as they were in the current data (see Table 5).

The standard deviation of socioeconomic status (SES) was divided by two. The standard deviations of the time since the decisive separation (YEARS), parent income (INCOME), teen gender (GENDER), pre-separation adolescent psychological problems (PREVPROB), temperamental fearfulness (F-EAS), and the measure of temperamental distress (D-EAS) were all multiplied by five. The standard deviations of the indices of current (R-AFILE) and past family

stress (P-AFILE), and social support from friends (PSS-Fr) were multiplied by three. The standard deviation of the number of close friends the teen indicated (FRIENDS) was multiplied by four, and the standard deviation of the rating of family background of depression (FAMDEP) was multiplied by ten.

The third step of the preliminary analysis involved examination of the data for univariate and multivariate outliers (cf Bollen, 1989, 1990; Bollen & Arminger, 1991; Mulaik et al., 1989; Wothke, 1993). When all 19 measures in the model were converted to standard scores (mean=0, S.D.=1) for each case, there were two outlying scores falling more than three standard deviations from the mean (cf Tabachnik & Fidell, 1983, 1989) (case 56, FRIENDS, case 110, BDI). Assessment of multivariate outliers using Mahalanobis distances identified one outlying case ($p < .01$, case 190). These cases were allowed to remain in the sample since one or two extreme values might be expected in a sample of this size (Tabachnik & Fidell, 1983, 1989).

To assess the effect of the multivariate outlier (case 190), the final structural equation was re-run without this case (cf Bollen, 1990). However, the overall fit and interpretation of the model was not substantively altered.

The final step of the preliminary analysis was assessment of the four forms of the parent and adolescent surveys for differences due to the order of the measures. This confound was ruled out since a MANOVA incorporating all possible variables in the model did not indicate any significant univariate or multivariate effects (see Table 6).

TABLE 6
Multivariate Test Statistics for Order Effects

Test Statistic	Value	Num df	DEN df	F	p
Wilks' Lambda	0.74	57	603	1.12	n.s.
Pillai's Trace	0.28	57	612	1.12	n.s.
Hotelling-Lawley Trace	0.32	57	602	1.12	n.s.
Roy's Greatest Root	0.14	19	204	1.55	n.s.

1. Assessment of Sample Characteristics

Univariate statistics including measures of central tendency and frequency were used to describe the sociodemographic characteristics of the participant families.

2. Assessment of Sample Representativeness

Since the participants comprise a nonprobability sample (cf Kitson, Sussman, Williams, Zeehandelaar, Shickmanter & Steinberger, 1982), it was important to establish how they compared sociodemographically to the general population. Although an exhaustive test was impossible (cf Kitson et al., 1982), a series of one-sample chi-square tests was used to evaluate differences between the current sample and frequencies expected based on available figures from the 1981, or the 1991 Canadian Census (cf Sheskin, 1984). For parent ethnicity and first language the comparison group was Manitobans. Parent gender, income, education, visible minority status, job type, and employment status were compared to Canadian lone parents, which include never married and widowed single parents as well as those who are

separated or divorced. Separated and divorced Canadians were the comparison group for the analysis regarding marital status. The form of some of the available Census figures required dividing the sample according to parent gender (i.e., income, education, job type, employment status, and marital status).

3. Psychometric Evaluation of the Measures in the Model

Item-total correlations and Cronbach's alpha (Cronbach, 1951) were used to assess the internal consistency reliability of each of the ten instruments included in the model.

4. Univariate Relationships among the Measures in the Model

A correlation matrix was used to examine the pattern of univariate relationships among the variables in the model. Due to the large number of correlations in this analysis ($N=171$), it was necessary to compensate in some way for the increased probability of Type I error. However, given the exploratory nature of the current study, the extremely small value of the critical probability generated using a Bonferroni-type correction (i.e., $p=.05/171=.0003$) was thought to be inordinately conservative. Instead, the decision was made to adjust for the increased probability of Type I error by interpreting correlations beyond the more conservative .01 level of significance, rather than using the more traditional .05 level.

5. Univariate Relationships Between Symptom Measures and Other Possible Covariates

Due to the largely exploratory nature of the current study, a correlation matrix was also used to examine the pattern of univariate relationships between the measures of depressive symptoms and other possible covariates identified in either depression or divorce literatures which were not included in the model. As in the above analysis, a Bonferroni-type correction (i.e., $p=.05/90=.0006$) was thought to be too conservative a compensation for the increased probability of making Type I errors. As above, in light of the exploratory nature of the current study, the decision was made to adopt a somewhat less restrictive correction, and only interpret correlations significant at the .01 level or less.

Chi-square tests of independence were used to assess whether symptomatology varied as a function of purely categorical variables (i.e., religion, cultural group, and race). For these latter analyses, it was necessary to split the symptom measures into dichotomous variables to ensure sufficient cell sizes (BDI cut-off=24, Kaplan et al., 1984b; CES-D cut-off=16, Radloff, 1977; JPBS cut-off=3)

6. Structural Equation Modeling

Structural equation modeling (cf EQS, Bentler, 1986, 1989) based on Maximum Likelihood (ML) parameter estimation of the covariance matrix was used to test the fit of the proposed model (see Figures 2 and 3). ML parameter estimation was chosen because it enables generation of standard errors and a quantity which permits statistical tests of goodness of fit. ML estimators were also thought to be desirable because they have slightly

better statistical properties compared to other estimators (Loehlin, 1987), including robustness to moderate deviations from multivariate normality (Browne, 1984; Joreskog & Sorbom, 1986).

Assessment of the structural equation model took place in two stages (cf Anderson & Gerbing, 1988, 1992; Herting & Costner, 1985; Joreskog, 1993; Lance, Cornwell & Mulaik, 1988). First, the hypothesized measurement model was evaluated using confirmatory factor analysis. Improvements to the measurement model were only made if the chi-square goodness-of-fit test was significant, indicating the model did not provide an adequate summary of the data. Second, the improved measurement model and the originally hypothesized structural model were estimated together, and, if the chi-square goodness-of-fit test was significant, the structural model was respecified. This two-stage model testing process was used because errors in the measurement and structural models can be difficult to separate if both measurement and structural models are initially estimated simultaneously (Anderson & Gerbing, 1988).

Although justifiable in exploratory research, it has been suggested that post hoc alterations to an hypothesized model may capitalize on chance variability, thereby decreasing model replicability (Godwin, 1988; MacCallum, Roznowski & Necowitz, 1992). To minimize this possibility, the smallest possible number of substantively meaningful modifications were made (MacCallum et al., 1992).

Even though it is contrary to the principal of parsimony, initial priority in the specification search was given to adding paths to the model because unnecessary paths seem to have less of an effect on errors in

parameter estimation than incorrect omission of important paths (Farley & Reddy, 1987). Due to the interpretational difficulties inherent in models with correlated errors (Herting & Costner, 1985; Joreskog, 1993; MacCallum, Wegener, Uchino & Fabringar, 1993), such paths were only considered, with caution, toward the end of the respecification process.

Although there is no consensus on which fit index is ideal (Bentler & Chou, 1993; Bollen & Long, 1992; Bollen & Stine, 1992; Browne & Cudeck, 1992; Gerbing & Anderson, 1992; Marsh et al., 1988; MacCallum, 1990; Mulaik et al., 1989; Steiger, 1990; Tanaka, 1993; Waller, 1993), there is agreement on four main points (cf Bollen & Long, 1992): 1. the best guide to assess possible improvements is theory; 2. the chi-square test should not be the sole criterion for assessing fit; 3. fit should be evaluated based on convergence of indices assessing different aspects of fit; and 4. one should pay attention to indirect indicators of model plausibility (e.g., R-squares of structural equations, negative variance estimates).

Decisions regarding what to modify in measurement and structural models were therefore based on the theoretical meaningfulness of paths that were statistically significant in the Multivariate Lagrange Multiplier (LM) and Wald (W) tests, which, respectively, evaluate the influence of adding and removing each possible path in a model (Bentler, 1989). Since modifications were made in a hierarchically nested manner, it was possible to use comparative chi-square goodness-of-fit tests to assess the efficacy of each respecification.

This fit index was supplemented with the Normed Fit Index (NFI) (Bentler & Bonnett, 1980), the Non-normed Fit Index (NNFI), the CFI (Bentler, 1988),

the AIC (Akaike, 1974), Bozdogan's (1987) consistent version of the AIC (CAIC), chi-square/df (Joreskog & Sorbom, 1979), the Parsimonious Fit Index (PFI, James, Mulaik & Brett, 1982), and the TLI (Tucker & Lewis, 1973). Model fit was evaluated based on convergence of these eight indices (cf Hayduk, 1988), the overall model chi-square test, and the comparative chi-square goodness-of-fit tests. If indices were contradictory, the greatest weight was given to the TLI (Bollen, 1990; Marsh et al., 1988), and the CFI (Bentler, 1990) due to their relative invulnerability to variations in sample size.

According to the law of parsimony, the specification search was ended once the chi-square statistic reached a non-significant value (Kaplan, 1990). This criterion was used because there are no definitive guidelines regarding optimal values of any of the above alternate fit measures (Kaplan, 1988). Nonetheless, values of the NFI, NNFI, CFI, and TLI above .9 (Bentler, 1989; Marsh et al., 1988; Tanaka, 1987), chi-square/df values in the 2.0 to 5.0 range (Marsh & Hocevar, 1985), and minimum values of the AIC and CAIC (Bentler, 1989; Tanaka, 1987) are said to reflect "good" fit.

ML parameter estimates are usually reasonable even when the underlying assumption of multivariate normality is inappropriate (Bentler, 1985; Browne, 1984). However, standard errors, and chi-square tests may be incorrect under such conditions (Bentler, 1985; Browne, 1984; Chou, Bentler & Satorra, 1991; Hu, Bentler & Kano, 1992; Joreskog & Sorbom, 1986). The degree to which the above solution was distorted by deviations from multivariate normality was checked by comparing it to one based on Robust Maximum Likelihood (ML-Robust) estimation, which compensates for violations of distributional assumptions (Bentler, 1989; Hu et al., 1992) with better

accuracy and reliability than other similar methods such as Elliptical or Asymptotically Distribution Free parameter estimation (Chou et al., 1991; Hu et al., 1992; Muthen, 1993).

RESULTS

1. Sample Sociodemographic Characteristics

The Adolescents

Table 7 summarizes the major demographic characteristics of the adolescent participants. Just over two-thirds were female. The sample was relatively evenly distributed across the criterion age range of 14 to 19 years, with the exception of a disproportionately low percentage of 19 year olds, and a very small number of 13 year olds. Only a small proportion of the sample, about 6%, were five years old or younger when their parents separated. Approximately one third were between the ages of six and 11. The vast majority, just over half, were in the 12 to 15 age range, while another 10% were age 16 or older when their parents stopped living together. Of the teenagers engaged in some type of education, there was a relatively equal split between those attending junior high and high school. A smaller proportion were attending university, commensurate with the age range represented in the sample. Approximately one-third of the teens were employed, either full or part-time.

The Parents

Tables 8 and 9 present the major sociodemographic characteristics of the parents. Over 80% were female, and over 90% fell between the ages of 35 and 54, with the majority in the 35 to 44 age range (see Table 8). Most

were divorced rather than separated, and had two children (see Table 8). Socioculturally, the majority of the sample were Canadian born, white, English speaking, Protestants, of British descent, although other cultural, linguistic, religious, and racial groups were represented (see Table 8).

The majority of the families were relatively socioeconomically advantaged. Close to 60% had at least some education beyond high school, with just under one-third having a technical diploma, or university or professional degree (see Table 8). Approximately three-quarters of the parents had full time employment, and less than 12% were unemployed (see Table 8). Over half of the parents earned between \$20,000 and \$45,000 yearly, and about 25% reported higher incomes (see Table 8). However, in spite of the educational qualifications of the majority of the parents, at least 38.5% reported incomes below the 1991 poverty line of \$25,761 for three-member households in a city the size of Winnipeg (National Council of Welfare, 1993).

Parents' occupations were relatively evenly split above and below the mid-point socioeconomic status (cf Pineo, 1984; Pineo et al., 1977) (see Table 9). The normative job was one in clerical, sales or service sectors (43.6%). Also common, were semi-professional jobs such as welfare and child-care workers, physiotherapists and occupational therapists (21.0%), and middle management or low level supervisory positions (18.8%). Relatively few of the parents were employed in the trades or technical sectors (4.9%), in positions requiring manual labour (10.2%), or in high level management or professional occupations (4.9%).

TABLE 7
Adolescent Sociodemographic Characteristics

Characteristic	N	%
<u>Gender</u>		
Male	71	31.7
Female	<u>153</u>	<u>68.3</u>
	224	100.0
<u>Age</u>		
13	3	1.3
14	42	18.8
15	39	17.4
16	36	16.1
17	49	21.9
18	35	15.6
19	<u>20</u>	<u>8.9</u>
	224	100.0
<u>Age at parents' separation</u>		
Preschool (5 or less)	14	6.3
Primary school (6 - 11)	72	32.1
Early teens (12 - 15)	115	51.3
Late teens (16 - 19)	<u>23</u>	<u>10.3</u>
	224	100.0
<u>Grade</u>		
Grade 8	16	7.2
Grade 9	36	16.1
Grade 10	42	18.8
Grade 11	41	18.4
Grade 12	43	19.3
University, college	30	13.4
Not attending School	<u>15</u>	<u>6.7</u>
	223	100.0
<u>Employment status</u>		
Full time	8	3.6
Part time	68	30.6
Not working	<u>146</u>	<u>65.8</u>
	222	100.0

Note. N < 224 due to missing data.

TABLE 8
Parent Sociodemographic Characteristics

Characteristic	N	%
<u>Gender</u>		
Male	36	16.1
Female	188	83.9
	224	100.0
<u>Age</u>		
25-34	12	5.4
35-44	135	60.8
45-54	74	33.3
55-64	1	0.5
	222	100.0
<u>Marital Status</u>		
Separated	82	36.6
Divorced	142	63.4
	224	100.0
<u>Number of Children</u>		
One	49	21.9
Two	108	48.2
Three or more	67	29.9
	224	100.0
<u>Religion</u>		
Catholic	62	27.8
Jewish	8	3.6
Protestant	94	42.2
Other	28	12.6
None	31	13.9
	223	100.0
<u>Race</u>		
Asian	2	0.9
Black	1	0.5
Native, Metis	3	1.4
White	214	96.4
Other	2	0.9
	222	100.0
<u>Country of Birth</u>		
Canada	190	86.0
Europe	18	8.1
Other	13	5.9
	221	100.0

Note. N < 224 due to missing data.

Table 8, continued
Parent Sociodemographic Characteristics

Characteristic	N	%
<u>Cultural Background</u>		
British	77	36.0
Dutch, Scandinavian	12	5.6
French	16	7.5
German	18	8.4
Jewish	8	3.7
Native, Metis	3	1.4
Ukrainian, Russian, Polish	29	13.6
Canadian	27	12.6
Other	24	11.2
	214	100.0
<u>First Language</u>		
English	181	80.8
French	14	6.3
German	12	5.4
Other	17	7.6
	224	100.0
<u>Education</u>		
Grade 9 or less	13	5.8
Some high school	26	11.6
Completed high school	59	26.3
Some college or university	37	16.5
University degree, technical diploma	56	25.0
Post-graduate work	17	7.6
Professional degree	16	7.1
	224	100.0
<u>Employment status</u>		
Full time	162	72.6
Part time	27	12.1
Unemployed	26	11.7
Student	8	3.6
	223	100.0
<u>Yearly Income</u>		
Under \$5000	2	0.9
\$5,000 - \$9,999	10	4.5
\$10,000 - \$14,999	15	6.7
\$15,000 - \$19,999	25	11.2
\$20,000 - \$24,999	34	15.2
\$25,000 - \$34,999	50	22.3
\$35,000 - \$44,999	43	19.2
Over \$45,000	45	20.1
	219	100.0

Note. N < 224 due to missing data.

TABLE 9
Parent Socioeconomic Status

Characteristic	N	%
<u>Socioeconomic Status*</u>		
2 Unskilled manual labour	18	8.0
3 Unskilled clerical, sales, service	23	10.3
4 Semi-skilled manual labour	5	2.2
5 Semi-skilled clerical, sales, service	33	14.7
7 Skilled crafts, trades	3	1.3
8 Skilled clerical, sales, service	30	13.4
9 Foreman/woman	4	1.8
10 Supervisor	21	9.4
11 Middle management	21	9.4
12 Technician	8	3.6
13 Semi-professional	47	21.0
14 High level management	1	0.4
15 Employed professional	10	4.5
	<u>224</u>	<u>100.0</u>

* There were 3 empty socioeconomic status categories: farm labourer (1), farmer (6), and self-employed professional (16).

Prevalence of Adolescent Depressive Symptoms

Table 10 summarizes the prevalence of self-reported symptoms of depression among the adolescents in the sample, and outlines the cut-off scores (cf Barnes & Prosen, 1984; Kaplan et al., 1984b) used to categorize symptom severity. Just over half of the adolescents were currently non-depressed based on their responses to the BDI and the CES-D. The remaining teens were relatively evenly divided among those reporting mild, moderate, and severe depressive symptoms (see Table 10), with 13 (BDI) to 16% (CES-D) of the teens indicating severe symptomatology. A higher proportion, approximately one-quarter (BDI) to one half (CES-D) were

TABLE 10
Severity of Adolescent Depressive Symptoms

Instrument	BDI		CES-D	
	N	%	N	%
Cases of depression*	52	23.2	105	46.9
Non-depressed	127	56.7	119	53.1
Mild depressive symptoms	45	20.1	30	13.4
Moderate depressive symptoms	23	10.3	39	17.4
Severe depressive symptoms	<u>29</u>	<u>12.9</u>	<u>36</u>	<u>16.1</u>
	224	100.0	224	100.0

Note. CES-D cut-off scores for categories of depressive symptoms: non-depressed=0-15; mild=16-20; moderate=21-30; severe=over 30 (Barnes & Prosen, 1984).

*BDI cut-off scores for categories of depressive symptoms: non-depressed=0-9; mild=10-15; moderate=16-23; severe=over 23 (Kaplan et al., 1984b).

* CES-D cutoff-score for case of depression = 16 (Radloff, 1977).

* BDI cut-off score for case of depression = 16 (Kaplan et al., 1984b).

defined as having scores high enough to be identified as cases of clinically significant depression (16, BDI, Kaplan et al., 1984b; 16, CES-D, Radloff, 1977).

Family Background of Psychological Problems and Treatment

Based on parental reports, about one-quarter of the teens experienced emotional or behavioral difficulties prior to the decisive marital breakdown (see Table 12). Significantly more teens, over 40%, experienced such problems following the parents' separation ($\chi^2=23.43$, $df=1$, $p<.001$), with 68.9% of the teens (17.9% of the total sample) who were described as experiencing problems before the split also having subsequent problems.

Close to half of the custodial parents reported that both they and their ex-spouse were in individual counselling or therapy before the separation (see Table 12). Following the marital breakdown, an even higher proportion of the custodial parents received some kind of individual treatment ($\chi^2=9.11$, $df=1$, $p<.01$). The non-custodial parents were less often reported to be in therapy following the separation ($\chi^2=8.49$, $df=1$, $p<.01$), although it is impossible to establish whether this is accurate or simply a reflection of the parents' less intimate knowledge of each other's lives once they were apart. However, the high number of missing or "don't know" responses to this item ($N=69$) argues in favor of the latter possibility. While approximately 20% of the families had at least one child receiving individual treatment prior to the decisive separation, close to half reported children entering therapy at some point afterward ($\chi^2=7.32$, $df=1$, $p<.01$). Less than 10% of parents indicated involvement in family therapy either before or after the decisive marital dissolution ($\chi^2=1.92$, $df=1$, $p>.05$).

TABLE 11

Family Background of Depression and Related Difficulties and Treatment

Family Member	Ever Depressed	Problems Functioning	Tried Suicide	Sought Therapy	Had ECT	Took Medication	Hospitalized
Parent	52.2%	31.7%	5.4 %	27.7%	1.3%	19.6%	6.2%
Children, parent's siblings, aunts/uncles*	41.1%	29.2%	10.3%	29.9%	2.2%	21.0%	13.8%
Parent's parents*	33.5%	16.5%	3.1%	11.2%	5.8%	17.0%	10.3%
Ex-spouse's parents*	35.7%	21.4%	6.2%	13.8%	2.2%	20.1%	12.0%
Ex-spouse's siblings, aunts/uncles*	29.5%	18.8%	9.4%	19.6%	4.0%	19.2%	13.4%

* % of families in which at least one relative had the given experience.

Table 11 summarizes information provided by the parents regarding the frequency of general depressive symptomatology, and related problems and treatment among direct and extended family members. Approximately half of the parents indicated that they had "been depressed (that is sad, down in the dumps, tearful, don't care, feel worthless, want to die)" for two weeks or longer at some point in their lives. They reported slightly lower rates of such symptomatology, ranging from 29.5% to 41%, for their own and their ex-spouse's first and second degree biological relatives.

Among these relatives, 16% to 32% had experienced problems in school, work, marriage or friendships, and 3% to 10% had made a suicide attempt as

TABLE 12
Psychological Problems and Treatment Pre- and Post-separation

	Pre-separation		Post-separation	
	N	%	N	%
<u>Teen behavioral, emotional problems</u>				
Yes	58	26.1	94	42.5
No	<u>164</u>	<u>73.9</u>	<u>127</u>	<u>57.5</u>
	222	100.0	221	100.0
<u>Family Member in Therapy</u>				
Custodial Parent				
Yes	111	49.8	116	52.0
No	<u>112</u>	<u>50.2</u>	<u>107</u>	<u>48.8</u>
	223	100.0	223	100.0
Ex-spouse				
Yes	90	43.1	40	26.0
No	<u>119</u>	<u>56.9</u>	<u>114</u>	<u>74.0</u>
	209	100.0	154	100.0
Children				
Yes	46	20.7	105	47.9
No	<u>176</u>	<u>79.3</u>	<u>114</u>	<u>52.1</u>
	222	100.0	219	100.0
Family				
Yes	21	9.4	17	7.7
No	<u>202</u>	<u>90.6</u>	<u>205</u>	<u>92.3</u>
	223	100.0	222	100.0

Note. N < 224 due to missing data.

a result of their depressive symptoms. Between 11% and 30% of the relatives had seen a psychiatrist or therapist, and approximately 20% had taken antidepressant medication. An additional 6 to 13% had been hospitalized for treatment of their depressive symptoms, and about 6% had received electroconvulsive therapy.

Details of the Separation or Divorce

Tables 13 and 14 summarize the details of the parents' separation or divorce. The majority of parents indicated they were the partner wanting the marriage to end (see Table 14), the most common reasons being unresolvable differences and spousal infidelity (see Table 13). In 20 to 25% of cases, falling out of love, alcohol or drug addiction, and/or physical or sexual abuse were reasons for the marital dissolution (see Table 13). Additional reasons were reported in approximately one third of cases, most commonly emotional or mental abuse.

The bulk of the parents were married for 15 to 20 years prior to the decisive marital breakdown (see Table 14). Less than 20% of the families were surveyed during the first two years of adjustment to the separation (see Table 14). Most of the parents, 72%, had been apart for between two and nine years.

In close to 70% of cases, the responding parent had been awarded sole custody of the children, while there was some kind of joint custody arrangement in another 25% of the families (see Table 14). In 84% of cases the custodial parent was the mother. Very few of the parents had some other custody plan, or were currently involved in a legal dispute regarding custody.

In the vast majority of families (83%), there were no limitations placed on visitation, and non-custodial parents saw their children on a weekly (31%), or monthly basis (23%) (see Table 14). Access was legally denied in 3% of families. However, there was no visitation in 9% of cases and visitation once a year or less for another 12% of non-custodial parents.

TABLE 13
Reasons for the End of the Marriage

Reason	Reason cited		Reason not cited	
	N	%	N	%
Unresolvable differences	107	47.8	117	52.2
Alcohol, drug abuse	56	25.0	168	75.0
Stopped loving each other	48	21.4	176	78.6
Unfaithfulness	107	47.8	117	52.2
Physical, sexual abuse	45	20.1	179	79.9
Other*	79	35.3	145	64.7

* Explanations included: poor communication (N=9), emotional problems of ex-spouse (N=13), mental/emotional abuse (N=34), ex-spouse uninvolved (N=22), abandonment (N=1), married too young (N=3), other reasons (N=20).

In approximately three-quarters of cases (N=161, 72.2%), there was a legal agreement regarding spousal and/or child support, most typically involving total yearly payments of somewhere between \$2,500 and \$9,999, or approximately \$209 to \$833 per month (see Table 14). However, approximately 20% of agreements involved support payments of either less than \$2500, or more than \$10,000 per year. The majority of parents indicated they received the correct amount of support (see Table 14). Nonetheless, a full one-third received less, typically reporting that their ex-spouse gave them \$2500 to \$9,999 per year (approximately \$209 to \$833 per month) less than agreed (see Table 14). Very few, less than 3% of cases, received more than the mandated support.

TABLE 14
 Details of the Separation or Divorce

	N	%
<u>Spouse wanting separation</u>		
Respondent	97	44.3
Ex-spouse	66	30.1
Both	<u>56</u>	<u>25.5</u>
	219	100.0
<u>Years of marriage prior to decisive marital split</u>		
< 4 years	5	2.2
5 to 9 years	22	9.8
10 to 14 years	58	25.9
15 to 19 years	90	40.2
20 to 24 years	42	18.8
> 25 years	<u>7</u>	<u>3.1</u>
	224	100.0
<u>Years since the decisive marital split</u>		
Two years or less	40	17.8
2 to 4 years	92	41.1
5 to 9 years	70	31.3
10 to 14 years	17	7.6
> 15 years	<u>5</u>	<u>2.2</u>
	224	100.0
<u>Custody agreement</u>		
Sole custody to parent	154	68.8
Joint custody	56	25.0
Different children with each parent	8	3.6
Children over 18	3	1.3
Custody in dispute	<u>3</u>	<u>1.3</u>
	224	100.0
<u>Visitation arrangement</u>		
No limits on visitation	185	82.6
Frequency specified in agreement	25	11.2
Supervised visitation	4	1.8
No visitation	3	1.3
Other	<u>7</u>	<u>3.1</u>
	224	100.0

Note. N<224 due to missing data

Table 14, continued
 Details of the Separation or Divorce

	N	%
<u>Frequency of visits</u>		
Daily	6	2.8
1 to 6 times weekly	68	31.2
1 to 2 times monthly	50	22.9
2 to 6 times yearly	47	21.6
Once a year	16	7.3
Less than once yearly	11	5.0
Never	20	9.2
	<u>218</u>	<u>100.0</u>
<u>Amount of yearly support in agreement*</u>		
None	5	3.2
Under \$2,500	26	16.8
\$2,500 to \$4,999	42	27.1
\$5,000 to \$9,999	47	30.3
\$10,000 to \$14,999	21	13.5
\$15,000 to \$19,999	5	3.2
\$20,000 to \$24,999	6	3.9
\$25,000 to \$34,999	2	1.3
Over \$35,000	1	0.6
	<u>155</u>	<u>100.0</u>
<u>Difference between support in agreement and amount received per year**</u>		
\$35,000 less	1	0.6
\$25,000 to \$34,999 less	1	0.6
\$10,000 to \$14,999 less	2	1.3
\$5,000 to \$9,999 less	16	10.3
\$2,500 to \$4,999 less	24	15.5
Under \$2,500 less	8	5.2
No difference	99	63.9
\$10,000 to \$14,999 more	2	1.3
\$20,000 to \$24,999 more	1	0.6
\$25,000 to 34,999 more	1	0.6
	<u>155</u>	<u>100.0</u>

Note. N<224 due to missing data

* Excludes cases indicating "other" for support agreement (N=5), and one missing case.

** Excludes cases indicating "other" for support agreement (N=5).

2. Assessment of Sample Representativeness

Tables 15 to 18 present a series of one sample chi-square tests comparing sociodemographic characteristics of this sample to the 1981 (Statistics Canada, 1987; White, 1990), or, where possible, the 1991 Canadian Census (Lindsay, 1992; Oderkirk & Lochhead, 1992). The current sample was comparable to Canadian lone parents in terms of parental gender (chi-square=0.49, df=1, n.s.) (see Table 16). The number of separated and divorced parents was equivalent to the general population for females (chi-square=2.17, df=1, n.s.) (see Table 17). However, there were more divorces versus separations than expected among the male parents (chi-square=7.13, df=1, p<.01).

All other analyses except that for the first language spoken by the parent indicated that the current sample was biased in terms of ethnic and racial membership, as well as socioeconomic status. Compared to Canadian lone parents, members of visible minorities were under-represented (chi-square=14.14, df=2, p<.001) (see Table 15). A similar pattern was identified when the ethnic breakdown of this sample was compared to Manitobans, in general (chi-square=17.95, df=7, p<.01) (see Table 15). The most notable over-representation was among parents indicating British or Ukrainian descent, while Aboriginals were the most poorly represented of the specific ethnic groups evaluated. In spite of these biases in ethnic and racial representativeness, however, the parents in the current sample were similar to Manitobans in terms of parent first language (chi-square=7.96, df=4, n.s.) (see Table 15). All of the analyses of the variables reflecting socioeconomic status, including parent educational attainment (male, chi-square=8.11, df=3, p<.05; female, chi-square=129.00,

TABLE 15

Parent First Language and Ethnicity Compared to Manitobans

	Sample Proportion	Expected Proportion
<u>First language*</u>		
English	80.8	75.9
French	6.2	4.5
German	5.4	6.7
Ukrainian	2.7	4.0
Other	4.9	8.9
	<u>100.0</u>	<u>100.0</u>
<u>Ethnicity**</u>		
Aboriginal	1.4	5.1
British	36.0	29.4
Dutch	2.3	2.8
French	7.5	5.1
German	8.4	9.3
Polish	2.8	2.3
Ukrainian	10.7	7.5
Other	30.8	38.3
	<u>100.0</u>	<u>100.0</u>

* Expected proportions for first language from Statistics Canada (1987), p. 1.1-1.14.

** Expected proportions for ethnicity from White (1990), p. 20.

df=5, $p < .001$), employment status, (male, chi-square=3.99, df=1, $p < .05$; female, chi-square=76.75, df=1, $p < .001$), job type (male, chi-square=35.12, df=2, $p < .001$; female, chi-square=19.97, df=2, $p < .001$), and income (male, chi-square=4.43, df=1, $p < .05$; female, chi-square=34.23, df=2, $p < .001$) indicated that parents in the current sample were more advantaged than Canadian lone parents, in general (see Table 18).

TABLE 16

Parent Marital Status Compared to Male and Female Separated and Divorced
Canadians

	Male Parents (N=36)		Female Parents (N=188)	
	Sample Proportion	Expected Proportion*	Sample Proportion	Expected Proportion*
Separated	30.6	52.8	37.8	43.1
Divorced	<u>69.4</u>	<u>47.2</u>	<u>62.2</u>	<u>56.9</u>
	100.0	100.0	100.0	100.0

* From Lindsay (1992), p. 17.

TABLE 17

Parent Gender and Visible Minority Status Compared to Canadian Lone Parents

	Sample Proportion	Expected Proportion
<u>Parent gender*</u>		
Male	16.1	18.0
Female	<u>83.9</u>	<u>82.0</u>
	100.0	100.0
<u>Parent visible minority status**</u>		
Aboriginal	1.4	4.9
Other visible minority	2.2	6.8
Other Canadians	<u>96.4</u>	<u>88.3</u>
	100.0	100.0

* Expected proportions for parent gender from Lindsay (1992), p. 5.

** Expected proportions for parent visible minority status from Lindsay (1992), p. 19.

TABLE 18

Parent Socioeconomic Characteristics Compared to Male and Female Canadian Lone Parents

	Male Parents (N=36)		Female Parents (N=188)	
	Sample Proportion	Expected Proportion	Sample Proportion	Expected Proportion
<u>Education*</u>				
< Grade 9***	-	-	3.2	8.5
Some high school	11.1	30.6	15.4	27.1
Finished high school	25.0	22.2	26.6	22.3
Some college, university***	-	-	17.6	10.1
College diploma	38.9	33.3	10.1	23.9
University degree	25.0	13.9	27.1	8.0
	100.0	100.0	100.0	100.0
<u>Employment Status*</u>				
Employed	86.1	72.2	84.5	52.4
Unemployed	13.9	27.8	15.5	47.6
	100.0	100.0	100.0	100.0
<u>Job Type</u>				
Managerial, professional	79.4	32.4	47.6	37.8
Clerical, sales, service	11.8	20.6	39.0	54.9
Semi-skilled, unskilled labour	8.8	47.0	13.4	7.3
	100.0	100.0	100.0	100.0
<u>Income**</u>				
< \$5,000***	-	-	1.1	2.6
\$5,000 to \$19,999	5.6	19.4	25.5	45.2
> \$20,000	94.4	80.6	73.4	52.1
	100.0	100.0	100.0	100.0

* Expected proportions for education (p. 32), job type (p. 31) from Lindsay (1992).

** Expected proportions for income from p. 17, Oderkirk & Lochhead (1992)

*** Combined with next category for male parents, only.

3. Psychometric Evaluation of the Measures in the Model

Table 19 presents the mean and range of item-total correlations, and the Chronbach's Alpha (Chronbach, 1951) for the measures in the structural equation model. These analyses indicate that the measures of depressive symptoms (CES-D, BDI), perceived social support from friends (PSS-Fr), problems in the mother-child (CAM) and father-child relationships (CAF), and parental conflict (AS) all demonstrate high internal consistency.

Internal consistency of the measures of current (R-AFILE) and past family stress (P-AFILE), divorce-related beliefs (CBAPS), temperamental distress (D-EAS) and fearfulness (F-EAS), and teen problem behaviors (JPBS) was moderate, which was not surprising, given the nature of these instruments. High internal consistency would not be expected for life events measures such as the R-AFILE, and the P-AFILE, since they summarize the occurrence of a wide variety of largely unrelated events in a participant's life. The moderate degree of internal consistency that was obtained likely reflects the low frequency of most rated events in this sample.

The internal consistency of the measures of temperamental distress (D-EAS) and fearfulness (F-EAS), and teen problem behaviors (JPBS) would, predictably, be attenuated due to the small number of items on which each score is based (Allen & Yen, 1979). In fact, an internal consistency in the high .60 range, is quite respectable for four or five-item measures (Allen & Yen, 1979).

TABLE 19
Psychometric Properties of the Instruments in the Model

Measure	# Items	Mean	S.D.	Item-total correlation		Alpha
				Range	Mean	
CES-D	20	17.23	12.25	.37-.76	.59	.92
BDI	21	10.59	10.03	.40-.73	.56	.91
R-AFILE	50	10.89	4.96	.00-.41	.17	.71
P-AFILE	27	5.78	3.59	.07-.42	.25	.73
PSS-Fr	20	13.40	4.71	.32-.57	.44	.86
CBAPS	36	6.32	4.02	.00-.43	.24	.74
CAM	25	24.74	20.30	.47-.87	.70	.96
CAF	25	39.04	28.47	.37-.88	.75	.97
D-EAS	4	2.68	0.99	.53-.66	.60	.79
F-EAS	4	2.56	0.89	.32-.58	.46	.68
JPBS	25					
General deviance	13	25.69	10.20	.31-.57	.47	.81
Alcohol use	6	9.88	4.02	.33-.60	.53	.65
Marijuana use	4	2.32	0.56	.37-.76	.57	.75
Sexual intercourse	1	0.57	0.50	n.a	n.a	n.a
Political activism	1	0.15	0.36	n.a	n.a	n.a
*Total score	5	1.96	1.57	.04-.61	.44	.69
AS	25	2.14	0.44	.10-.66	.41	.86

Note. CES-D=Centre For Epidemiologic Studies-Depression Scale, BDI=Beck Depression Inventory, R-AFILE=Current Index - Family Inventory of Life Events, P-AFILE=Past Index-Family Inventory of Life Events, PSS-Fr = Perceived Social Support From Friends Scale, CBAPS = Children's Beliefs About Parental Divorce Scale, CAM = Child's Attitude Toward Mother Scale, CAF = Child's Attitude Toward Father Scale, D-EAS=Distress - Emotionality, Activity, Sociability Scale, F - EAS = Fearfulness - Emotionality, Activity, Sociability Scale, JPBS=Jessor Problem Behavior Scales, AS=Acrimony Scale.

* Total JPBS score is the sum of 5 composite scores.

4. Univariate Relationships Among the Measures in the Model

Table 20 summarizes the correlations among the variables in the proposed model (see Figure 3) for the sample as a whole. As described earlier, to compensate for the increased probability of Type I error due to the large number of correlations in this analysis (N=171), only correlations significant at $p=.01$, or less were interpreted. Correlations among the predictor variables are listed in an order consistent with the structural model (see Figure 3), with upstream variables on ontogenic system, exosystem and chronosystem levels presented before those on the microsystem level, which is structurally intermediate in the model. Results for the three dependent measures (BDI, CES-D, JPBS) are outlined below.

Correlations with Dependent Variables

There was a large, positive correlation between scores on the CES-D and the BDI. Their relation to the measure of teen problem behaviors (JBPS), which was conceptualized as assessing associated features of depression among adolescents (cf DSM-III-R, 1987), was small, but in the expected direction of more teen self-reported depressive symptoms and more problem behaviors co-occurring. However, none of the symptom measures were significantly related to the time since the decisive marital separation (YEARS).

The BDI and the CES-D demonstrated a similar pattern of associations with the ontogenic system, microsystem and exosystem measures. Relatively high, positive correlations were obtained between the CES-D and the BDI and measures of temperamental emotionality (D-EAS and F-EAS), with greater teen

fearfulness and distressfulness being associated with reports of more severe depressive symptoms. Also on the level of the ontogenic system, higher scores on both symptom measures (BDI, CES-D) were more common among girls (GENDER), and teens who endorsed more dysfunctional divorce-related beliefs (CBAPS).

On the level of the exosystem, the BDI and the CES-D demonstrated positive correlations with the measure of current (R-AFILE) family stress, such that teenagers who indicated more stressful family experiences in the past year tended to report more symptomatology. Adolescents with more severe symptoms of depression also indicated that their families had experienced more stressful experiences prior to the last 12 months, but this relationship was only statistically significant for the BDI.

In addition, on the level of the microsystem, teens in families where there was more acrimony between the parents (AS), or more problems in the parent-child relationships (CAM, CAF) were also more likely to report more severe depressive symptoms. There was also an inverse relationship between perceived social support from friends (PSS-Fr) and depressive symptoms as measured by the CES-D, in that teens with higher depression scores reported less social support.

The measure of teen problem behaviors (JPBS) generally related much less strongly to the other measures in the model than did the BDI or the CES-D. Aside from the correlations already described with the BDI and the CES-D, the JPBS was only significantly correlated with the measures of current (R-AFILE) and past (P-AFILE) family stress, in the direction of more problem behaviors being reported by teens in families experiencing more stressors.

TABLE 20
Correlations Among Measures in the Model

Measure	YEARS	SES	+INCOME	R-AFILE	P-AFILE	D-EAS	F-EAS
YEARS	1.00						
SES	.04	1.00					
+INCOME	-.22**	-.31**	1.00				
R-AFILE	-.08	-.02	.17*	1.00			
P-AFILE	.25**	.13	-.06	.24**	1.00		
D-EAS	-.01	.08	.08	.34**	.16	1.00	
F-EAS	.00	.08	.07	.14	.08	.65**	1.00
CBAPS	-.17*	-.14	.29**	.32**	-.05	.42**	.35**
GENDER	-.07	-.13	-.00	.05	.07	.30**	.36**
+PSS-Fr	-.03	-.05	.08	-.06	-.12	.03	.00
FRIENDS	.01	.04	.02	.06	-.08	-.04	-.02
CAM	-.04	-.02	.04	.32**	.02	.29**	.20*
CAF	-.17*	-.10	.28**	.21**	-.01	.29**	.21**
AS	-.23**	-.08	.33**	.33**	.00	.17*	.10
BDI	-.10	-.00	.08	.40**	.20*	.66**	.53**
CES-D	-.04	.01	.10	.32**	.14	.64**	.59**
JPBS	.08	-.05	-.07	.27**	.24**	.15	.04
FAMDEP	-.05	.04	.16*	.23**	.06	.09	-.03
PREVPROB	.16	.07	-.12	-.06	-.01	-.07	-.00

Note. YEARS = Years since the decisive marital split, SES= Socioeconomic status, INCOME = Parent's income, R-AFILE =Current Index - Family Inventory of Life Events, P-AFILE=Past Index-Family Inventory of Life Events, D-EAS=Distress - Emotionality, Activity, Sociability Scale, F-EAS = Fearfulness - Emotionality, Activity, Sociability Scale, CBAPS=Children's Beliefs About Parental Divorce Scale, GENDER= Teen gender, PSS-Fr = Perceived Social Support From Friends Scale, FRIENDS=Number of close friends, CAM=Child's Attitude Toward Mother Scale, CAF = Child's Attitude Toward Father Scale, AS=Acrimony Scale, BDI=Beck Depression Inventory, CES-D=Centre For Epidemiologic Studies - Depression Scale, JPBS = Jessor Problem Behavior Scales, FAMDEP= Family pedigree for depression, PREVPROB= Teen pre-split behavioral or emotional problems.

+ Signs of correlations opposite from those expected because scores reversed when transformed.

* p<.01 ** p<.001

Table 20, continued
Correlations Among Measures in the Model

Measure	CBAPS	GENDER	+PSS-Fr	FRIENDS	CAM	CAF
CBAPS	1.00					
GENDER	.17*	1.00				
+PSS-Fr	.19*	-.19*	1.00			
FRIENDS	-.10	.15	-.39**	1.00		
CAM	.37**	.00	.16	-.07	1.00	
CAF	.58**	.11	.04	.00	-.01	1.00
AS	.42**	.05	.06	.04	.19*	.43**
BDI	.48**	.32**	.12	-.16	.35**	.37**
CES-D	.41**	.28**	.18*	-.13	.26**	.34**
JPBS	.04	.06	-.10	.06	.02	.07
FAMDEP	.09	-.02	-.02	.16	.08	.03
PREVPROB	-.22**	.08	-.02	.06	-.04	-.21*

Note. CBAPS = Children's Beliefs About Parental Divorce Scale, GENDER= Teen gender, PSS-Fr = Perceived Social Support From Friends Scale, FRIENDS = Number of close friends, CAM=Child's Attitude Toward Mother Scale, CAF = Child's Attitude Toward Father Scale, AS=Acrimony Scale, BDI=Beck Depression Inventory, CES-D=Centre For Epidemiologic Studies-Depression Scale, JPBS=Jessor Problem Behavior Scales, FAMDEP = Family pedigree for depression, PREVPROB = Teen pre-split behavioral or emotional problems.

+ Correlation signs reversed because scores reflected when transformed.

* $p < .01$ ** $p < .001$

Table 20, continued
Correlations Among Measures in the Model

Measure	AS	BDI	CES-D	JPBS	FAMDEP	PREVPROB
AS	1.00					
BDI	.22**	1.00				
CES-D	.19*	.77**	1.00			
JPBS	.03	.18*	.18*	1.00		
FAMDEP	.24**	.07	-.02	.08	1.00	
PREVPROB	-.20*	-.10	-.09	-.13	-.20*	1.00

Note. AS= Acrimony Scale, BDI=Beck Depression Inventory, CES-D=Centre For Epidemiologic Studies - Depression Scale, JPBS = Jessor Problem Behavior Scales, FAMDEP = Family pedigree for depression,PREVPROB=Teen pre-split behavioral or emotional problems.

* $p < .01$ ** $p < .001$

5. Univariate Relationships Between Symptom Measures and Other Possible Covariates

Table 21 presents the correlations between the symptom measures (i.e., the BDI, the CES-D, and the JPBS) and other possible exosystem level covariates cited as relating to either depression or post-divorce functioning in the literature which were not included in the proposed model. Table 22 outlines the findings relating to other possible ontogenic system and microsystem variables, and for other possible measures reflecting the chronosystem nature of the current model. As in the previous section, to correct for the probability of Type I error, only correlations significant at the .01 level or less are reported. Findings are described in an order consistent with that in which the various ecosystems are presented in the model.

Possible Exosystem Level Variables

There were a variety of family characteristics assessed in the survey that might have indirectly affected offspring by determining the opportunities available in their immediate environment. As summarized in Table 21, the majority of correlations between the measures of depressive symptoms (BDI, CES-D, JPBS), and these variables were not significant. However, teen depressive symptoms reported on the CES-D were associated with children in the family being in therapy following the marital breakdown.

Variables related to family stress such as background of victimization and substance abuse were of mixed importance. Parent perceptions that substance abuse, or physical or sexual victimization were reasons for the

TABLE 21

Correlations Between Symptom Measures and Other Possible Exosystem Level Variables

Variable	BDI	CES-D	JPBS
Parent education	-.05	-.09	.03
Separated versus divorced	-.08	-.01	.04
Existing support agreement	-.05	.04	-.08
Amount of support in agreement	.05	.06	-.02
Support agreed on vs support received	-.06	-.09	.00
In therapy pre-separation			
Custodial parent	.04	.04	.09
Non-custodial parent	.08	.07	.09
Children	-.03	-.04	.04
Family	.01	.03	.15
In therapy post-separation			
Custodial parent	.12	.12	.01
Non-custodial parent	-.06	-.03	.14
Children	.14	.18*	-.03
Family	.06	-.06	.07
Extended family living in home	.19*	.16	-.15
Teen moved in past year	.04	.05	.03
Teen attended new school in past year	.08	.03	-.01
+Alcohol problems in family	.18*	.16	.29**
+Drug problems in family	.18*	.17	.50**
++Substance abuse reason for split	-.05	-.05	.08
+Family members victimized	.19*	.20*	.22**
++Physical/sexual abuse reason for split	.05	.02	.03
Severity of family psychopathology	.13	.09	.16
Custody arrangement	-.05	-.02	-.05
Parent gender	.05	.05	.02
Parent/child of same gender	-.22**	-.20*	-.04

Note. BDI=Beck Depression Inventory, CES-D=Centre for Epidemiologic Studies-Depression Scale, JPBS=Jessor Problem Behavior Scales.

+ Teen ratings of family problems.

++ Parent ratings of family problems.

* $p < .01$ ** $p < .001$

marital breakdown were uncorrelated with any of the symptom measures, but teen ratings of similar items were. More problem behaviors (JPBS) and more severe symptoms of depression (BDI) were reported by adolescents who revealed family problems with drugs and/or alcohol. Teen perception of physical or sexual victimization of family members was related to higher scores on all three symptom measures (BDI, CES-D, JPBS).

Variables related to general family characteristics, including custody arrangement, parent gender, race (BDI, Chi-square=0.13, df=1, $p>.05$; CES-D, Chi-square=1.78, df=1, $p>.05$; JPBS, Chi-square=2.31, df=1, $p>.05$), cultural group (BDI, Chi-square=4.60, df=5, $p>.05$; CES-D, Chi-square=4.22, df=5, $p>.05$; JPBS, Chi-square=3.40, df=5, $p>.05$), and religion (BDI, Chi-square=0.02, df=3, $p>.05$; CES-D, Chi-square=0.70, df=3, $p>.05$; JPBS, Chi-square=0.65, df=3, $p>.05$) were not significantly associated with any of the three symptom measures. Only concordance of parent and teen gender and whether a member of the extended family lived in the household proved to be important, with more teen symptoms being associated with living with a parent of the opposite sex (BDI, CES-D), and having a member of the extended family in the home (BDI) (see Table 21).

Possible Ontogenic, Microsystem and Chronosystem Variables

On the level of other possible ontogenic system characteristics, neither measure of depressive symptoms (BDI, CES-D) was associated with teens' current age, or age at the decisive marital separation (see Table 22). There was, in contrast, a small, but significant relationship between current age and the problem behavior scales (JPBS), in the direction of older adolescents receiving higher scores. The alternate microsystem

TABLE 22

Correlations Between Symptom Measures and Other Possible Ontogenic System,
Microsystem and Chronosystem Level Variables

Variable	BDI	CES-D	JPBS
<u>Ontogenic System Level</u>			
Teen age	-.02	.01	.29**
Age at marital breakdown	.05	.02	.11
<u>Microsystem Level</u>			
Frequency of parental visits	.04	.01	-.01
Parental depression	.00	-.07	-.13*
<u>Chronosystem Level</u>			
Length of marital cohabitation	.02	-.01	.18*

Note. BDI=Beck Depression Inventory, CES-D=Centre for Epidemiologic Studies-Depression Scale, JPBS=Jessor Problem Behavior Scales.

* $p < .01$ ** $p < .001$

variables, the frequency of visits with the non-custodial parent, and parental depression, were unrelated to any of the symptom measures, with the exception of a small, but significant relationship between parental depression and more teen problem behaviors. The additional chronosystem measure assessed, length of the parents' marriage prior to the decisive separation, was also not associated with either measure of depressive symptoms (BDI, CES-D). There was, however, a tendency for teens in families where the parents remained together for longer before separating to report more problem behaviors (JPBS).

6. Structural Equation Modeling

Specification Search

Tables 23 and 24 summarize the steps in the initial evaluation and subsequent respecification of the proposed structural equation model, which is presented in Figures 2 and 3. All of the initial fit indices based on an analysis of the combined proposed measurement and structural models indicated that improvements were possible. A specification search was therefore conducted, beginning with a confirmatory factor analysis of the measurement model.

To ensure identifiability and set the scale for the latent variables, it was necessary to fix one latent-variable-to-measure path to one for each factor (cf Bentler 1986, 1989). In all analyses, the following paths were therefore fixed to a value of one: the path from Family Socioeconomic Resources to the measure of family socioeconomic status (SES), the path from Family Stress to the measure of past family stress (P-AFILE), the path from Temperament to the measure of temperamental distress (D-EAS), the path from Social Support to the index of the teen's social network size (SIZE), the path from Family Relationship Problems to the measure of difficulties in the mother-child relationship (CAM), and the path from Depressive Symptoms to the Beck Depression Inventory (BDI, Beck et al., 1961).

At each step, the results of the Lagrange Multiplier (LM) and Wald (W) Tests were examined to determine whether addition or removal of any theoretically meaningful paths might increase the fit of the model. As already detailed, improvements to the measurement model were evaluated, one path at a time, until its fit was found to be adequate, after which the measurement and structural models were assessed together.

Eight paths were sequentially added to the model in this manner, including a correlated error between the two measures of problems in the parent-child relationships (CAM and CAF) (see Tables 23 and 24). After these improvements, the chi-square value remained statistically significant, although most of the other fit indices fell in ranges suggesting that the model provided an adequate description of the data.

The LM test similarly indicated that the remaining paths that might be added to the model resulted in only small, barely statistically significant decreases (i.e., 4 or less) in the size of the chi-square statistic. Consistent with the LM test, the fit index most sensitive to parsimony, the PFI, decreased slightly when the seventh and eighth paths were added, suggesting addition of further paths would be uneconomical (see Table 24).

Further improvements of the measurement model were pursued, however, since the Wald (W) test indicated there were a number of covariances among upstream variables it might be beneficial to drop. Four covariances were removed: between teen gender (GENDER) and Socioeconomic Resources; between Temperament and family pedigree for depression (FAMDEP); between teen gender (GENDER) and family pedigree for depression (FAMDEP); and between Temperament and the time since the decisive marital separation (YEARS).

Following these four deletions, the measurement model could not be rejected (chi-square=121.63, df=98, $p>.05$) (see Table 23), and the structural paths were then estimated along with the improved measurement model. Since this did not result in any decrease in the fit of the model, it was re-assessed using ML-Robust estimation (cf Bentler, 1989). This produced a Satorra-Bentler scaled chi-square (S-B chi-square=121.25, df=98,

$p > .05$) which was not substantially different from the non-adjusted chi-square. Deviations from normality thus did not appear to have a notable effect on the final solution (see Table 23, step 14).

As outlined previously, it was also necessary to assess the possibility that items used to measure depressive symptoms, emotionality-distress, and emotionality-fearfulness tapped one underlying latent variable relating to general emotional distress. This was done by conducting a series of nested confirmatory factor analyses, which evaluated whether conceptualizing Depressive Symptoms, and Temperament as a single latent variable ($\chi^2 = 42.63$, $df = 5$, $p < .001$) provided a better fit than defining them separately ($\chi^2 = 8.96$, $df = 4$, $p > .05$). Consistent with other research addressing this question (e.g., Windle, 1992), the current analyses indicated that although the two latent variables were strongly correlated ($r = .85$), a significantly better fit to the data was obtained when they were defined as measuring separate factors (χ^2 , difference = 33.67, $df = 1$, $p < .05$).

TABLE 23

Summary of Chi-square Fit Indices and Steps Taken in the Specification Search

Respecification	Chi-square (df,p)	Hierarchical Chi-square Test (df,p)	Chi-square/df
1. Initial model	233.25 (df=102,p<.001)	n.a.	2.30
2. YEARS added as a predictor of R-AFILE	213.90 (df=101,p<.001)	19.35 (df=1,p<.05)	2.12
3. JPBS allowed to load on Family Stress	200.08 (df=100,p<.001)	13.82 (df=1,p<.05)	2.00
4. Correlated error allowed between CAM and CAF	165.98 (df=99,p<.001)	34.10 (df=1,p<.05)	1.68
5. R-AFILE allowed to load on Family Relationship Problems	154.33 (df=98,p<.001)	11.65 (df=1,p<.05)	1.58
6. FAMDEP added as a predictor of CAF	143.87 (df=97,p<.001)	10.44 (df=1,p<.05)	1.48
7. Socioeconomic Resources added as a predictor of CAM	134.25 (df=96,p<.006)	9.62 (df=1,p<.05)	1.40

Note. YEARS = Years since the decisive marital split, R-AFILE = Current Index - Family Inventory of Life Events, JPBS = Jessor Problem Behavior Scales, CAM=Child's Attitude Toward Mother Scale, CAF= Child's Attitude Toward Father Scale, FAMDEP = Family pedigree for depression.

Table 23, continued
 Summary of Chi-square Fit Indices and Steps Taken in the Specification Search

Respecification	Chi-square (df, p)	Hierarchical Chi-square Test (df, p)	Chi-square/df
8. D-EAS allowed to load on Family Stress	128.03 (df=95, p<.01)	6.22 (df=1, p<.05)	1.35
9. D-EAS allowed to load on Family Relationship Problems	121.41 (df=94, p<.03)	6.23 (df=1, p<.05)	1.29
10. Covariance between Socioeconomic Resources and GENDER dropped	121.41 (df=95, p<.04)	n.a.	1.28
11. Covariance between Temperament and FAMDEP dropped	121.48 (df=96, p<.04)	n.a.	1.26
12. Covariance between GENDER and FAMDEP dropped	121.54 (df=97, p<.05)	n.a.	1.25
13. Covariance between Temperament and YEARS dropped	121.63 (df=98, p>.05)	n.a.	1.24
14. Structural paths added to model	121.63 (df=98, p>.05)	n.a.	1.24

Note. YEARS=Years since the decisive marital split, FAMDEP=Family pedigree for depression, D-EAS = Distress - Emotionality, Activity, Sociability Scale, GENDER=Teen gender.

TABLE 24

Summary of Supplementary Fit Indices For the Specification Search

Respecification	Absolute Residual	NFI	NNFI	CFI	AIC	CAIC	TLI	PFI
Step 1	.040	.82	.80	.88	29.26	-420.73	.69	.487
Step 2	.037	.83	.83	.90	11.90	-433.67	.71	.491
Step 3	.036	.84	.84	.91	0.08	-441.09	.73	.493
Step 4	.035	.87	.90	.94	-32.02	-468.77	.77	.503
Step 5	.031	.88	.91	.95	-41.67	-474.01	.78	.504
Step 6	.031	.89	.92	.96	-50.87	-478.06	.80	.503
Step 7	.029	.89	.94	.96	-57.75	-481.27	.78	.502
Step 8	.030	.90	.95	.97	-61.97	-481.08	.81	.499
Step 9	.027	.90	.96	.98	-66.59	-481.29	.82	.497
Step 10	.027	.90	.96	.98	-68.59	-487.69	.82	.502
Step 11	.028	.90	.96	.98	-70.52	-494.04	.82	.508
Step 12	.028	.90	.96	.98	-72.46	-500.38	.83	.513
Step 13	.028	.90	.96	.98	-74.37	-506.71	.83	.518
Step 14	.028	.90	.96	.98	-74.37	-506.71	.83	.518

Note. NFI=Normed Fit Index, NNFI=Non-normed Fit Index, CFI=Comparative Fit Index, AIC=Akaike's Information Criterion, CAIC=Consistent Akaike's Information Criterion, TLI=Tucker-Lewis Index, PFI=Parsimonious Fit Index.

Final Measurement Model

Figure 4 and Table 25, together, present the final measurement model. To simplify Figure 4, all of the paths added in the specification search were summarized in Table 25.

The predicted relationships were supported for all levels of the measurement model except for the measure of teen problem behaviors (JPBS), which was more associated with the Family Stress latent variable than with the hypothesized Depressive Symptoms factor (see Figure 4 and Table 25). Although the expected pattern of associations between measures and factors

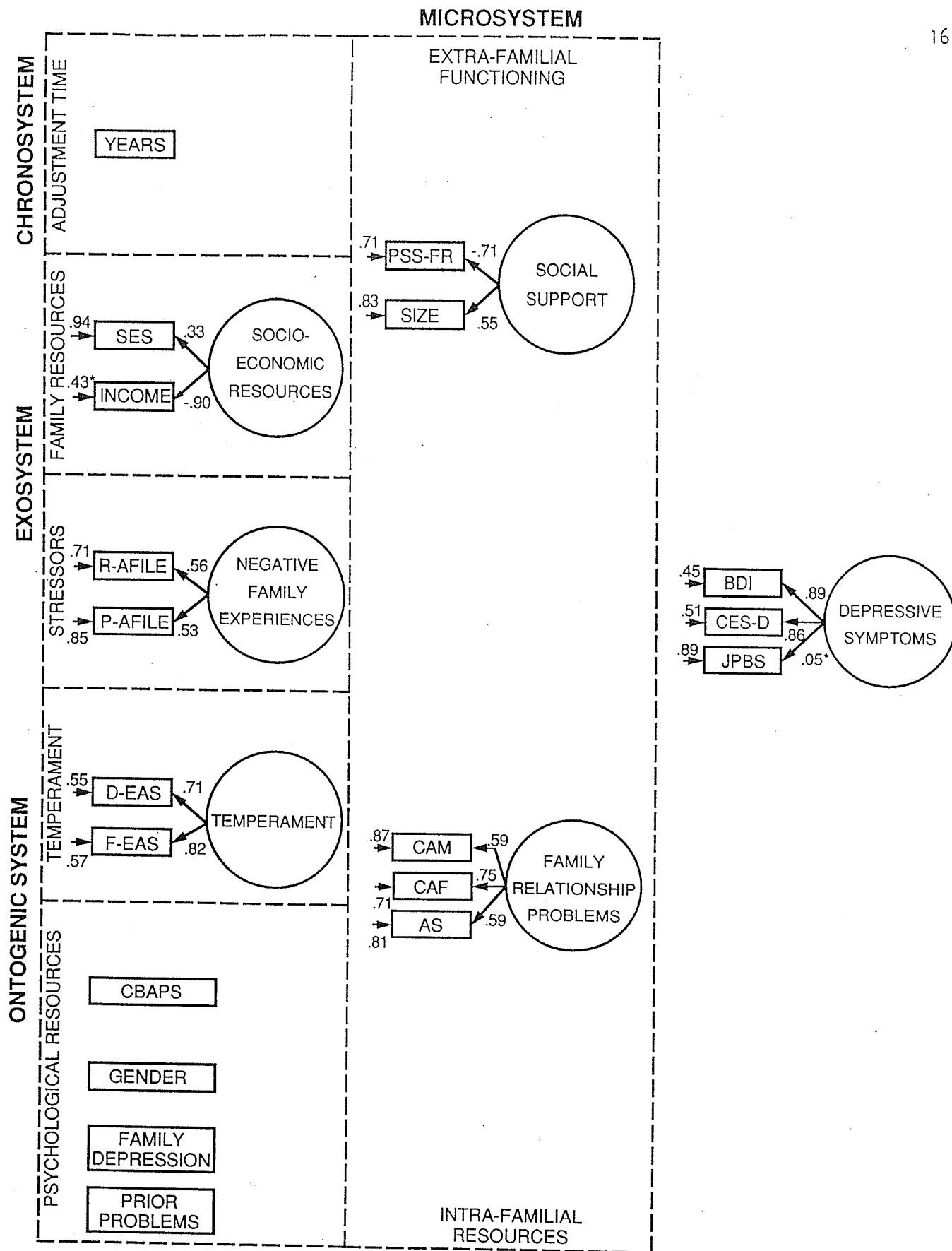


Figure 4. Final measurement model

Note. All paths added in specification search are presented in Table 25

* Not statistically significant, $p > .05$

TABLE 25

Standardized Path Coefficients for Paths Added in the Specification Search

Path	Standardized Path Coefficient	p
1. YEARS to R-AFILE	-0.18	p<.05
2. Family Stress to JPBS	0.44	p<.05
3. Correlated error between CAM and CAF	-0.54	p<.05
4. Family Relationship Problems to R-AFILE	0.40	p<.05
5. FAMDEP to CAF	-0.24	p<.05
6. Socioeconomic Resources to CAM	0.29	p<.05
7. Family Stress to D-EAS	0.21	p<.05
8. Family Relationship Problems to D-EAS	0.18	p<.05

Note. YEARS= Years since the decisive marital split, R-AFILE = Current Index - Family Inventory of Life Events, JPBS= Jessor Problem Behavior Scales, CAM = Child's Relationship with Mother Scale, CAF = Child's Relationship with Father Scale, FAMDEP=Family pedigree for depression, D-EAS = Distress - Emotionality, Activity, Sociability Scale.

was otherwise obtained, there was also slightly more complexity than anticipated for the exosystem and microsystem level variables, especially for the measures of current (R-AFILE) and past family stress (P-AFILE). This intricacy involving the measures of stressful life events was not surprising in light of their lower internal consistency (see Table 19), suggesting possible factorial complexity.

In addition to its hypothesized association with the Family Stress latent factor, the measure of stress currently experienced by family members (R-AFILE) was predicted with almost equal strength by the time since the decisive marital separation (YEARS). Increasing time since the marital dissolution (YEARS) was associated with less current stress (R-AFILE).

The measure of current family stress (R-AFILE) demonstrated additional complexity in that it also loaded positively on the microsystem latent factor reflecting family relationship problems. More problems in family relationships thus were associated with higher levels of current stress. Greater Family Stress predicted more extreme temperamental distress (D-EAS) as well.

The remaining exosystem level factor, Socioeconomic Resources, significantly predicted the two SES variables. The strongest relationship was with parental income (INCOME), which had a negative loading because, as described previously, it was necessary to reflect the variable when it was transformed. However, the Socioeconomic Resources factor also loaded on the measure of parental socioeconomic status (SES) approximately as strongly as it loaded on the measure of problems in the mother-child relationship (CAM).

There was, in turn, also slightly more complexity than anticipated within the microsystem factor, Family Relationship Problems, in that the error terms for the indices of problems in the mother-child (CAM) and father-child (CAF) relationships correlated negatively. Temperamental distress (D-EAS) also loaded on Family Relationship Problems to a small extent, and the measure of family pedigree for depression (FAMDEP) had a small loading on the index of problems in the father-child relationship (CAF).

Correlations Among Upstream Variables and Factors

Table 26 presents the inter-relationships among the single measure variables and latent factors in the ontogenic system, exosystem and chronosystem, which, together comprise the upstream level of the model (see Figure 5). On the ontogenic system level, Temperament and the teen's divorce related beliefs (CBAPS) were significantly correlated such that distorted beliefs and temperamental emotionality increased together. Also on the ontogenic system level, teen gender (GENDER) and Temperament were strongly associated in the direction of greater temperamental emotionality among girls. Finally, teen experience of emotional or behavioral problems prior to the parents' separation (PREVPROB) was more likely with both increasing dysfunctional divorce-related beliefs (CBAPS), and stronger family background of depression (FAMDEP).

The two exosystem level factors were not significantly correlated. There were, however, a number of significant relationships that crossed ecosystems, including associations with both exosystem and ontogenic system variables and the time since the decisive marital breakdown. In terms of the exosystem, more Socioeconomic Resources were associated with longer time since the decisive marital dissolution (YEARS). There was also a significant, positive correlation between the time since the decisive marital separation (YEARS) and the level of Family Stress, such that the passage of time was associated with the accumulation of negative family experiences. In addition, on the level of the ontogenic system, higher scores on the measure of dysfunctional divorce-related beliefs (CBAPS) were associated with less time since the decisive separation (YEARS). PREVPROB and YEARS were also significantly correlated, with parental reports that

TABLE 26

Correlations Among the Upstream Measures and Latent Variables

Measure/ Factor	YEARS	Socioeconomic Resources	Family Stress	Tempera- ment	CBAPS	GENDER	PREVPROB
FAMDEP	-.05	-.18	.16	++	.10	++	-.20**
PREVPROB	.16*	-.14	.12	-.03	-.22***	.08	
GENDER	-.06	++	.05	.42***	.17**		
CBAPS	-.16*	-.32**	-.05	.42***			
Temperament	++	-.04	.11				
Family Stress	.35**	.16					
Socioeconomic Resources	.25*						

Note. YEARS=Time since the decisive marital split, CBAPS = Children's Beliefs About Parental Divorce Scale, GENDER=Teen gender, PREVPROB = Teen pre-split experience of behavioral or emotional problems, FAMDEP = Family pedigree of depression.

++ Correlation dropped in specification search.

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

the teen experienced problems before the decisive marital separation (PREVPROB) being less likely as time since the decisive marital separation increased (YEARS).

Finally, there was one correlation which connected the exosystem and the ontogenic system, a negative association between divorce beliefs (CBAPS) and Socioeconomic Resources. Teens endorsing fewer maladaptive divorce-related beliefs (CBAPS) were thus more likely to come from families with better financial resources.

Final Structural Model

The paths in the structural model which were statistically significant at the .05 level or less are summarized in Figure 5. The ten hypothesized direct predictors of the Depressive Symptoms latent variable accounted for approximately 89% of its common variance.

Teen gender (GENDER), and the Temperament factor on the ontogenic system level, the exosystem latent variable reflecting family stress, and the two microsystem factors, Family Relationship Problems, and Social Support, had the most importance in explaining the variability of the Depressive Symptoms latent variable. There was little support for the predicted direct contributions of teens' divorce-related beliefs (CBAPS), the time since the decisive marital split (YEARS), and Family Socioeconomic Resources.

The strongest predictor of Depressive Symptoms was temperamental emotionality, for which, as expected, higher scores predicted more symptomatology. This latent factor accounted for approximately 32% of the variance in depression when the other variables were held constant. As hypothesized, more Family Stress, more Problems in Family Relationships, and less Social Support also predicted a higher degree of symptoms, each accounting for between 10 and 20% of the variance in depression when the other contributing factors were controlled. Teen gender (GENDER), with girls reporting more depressive symptoms, accounted for just less than 3% of the variability, holding the other factors constant.

A number of the predicted indirect effects of the time since the marital breakdown, the ontogenic system and the exosystem variables also emerged.

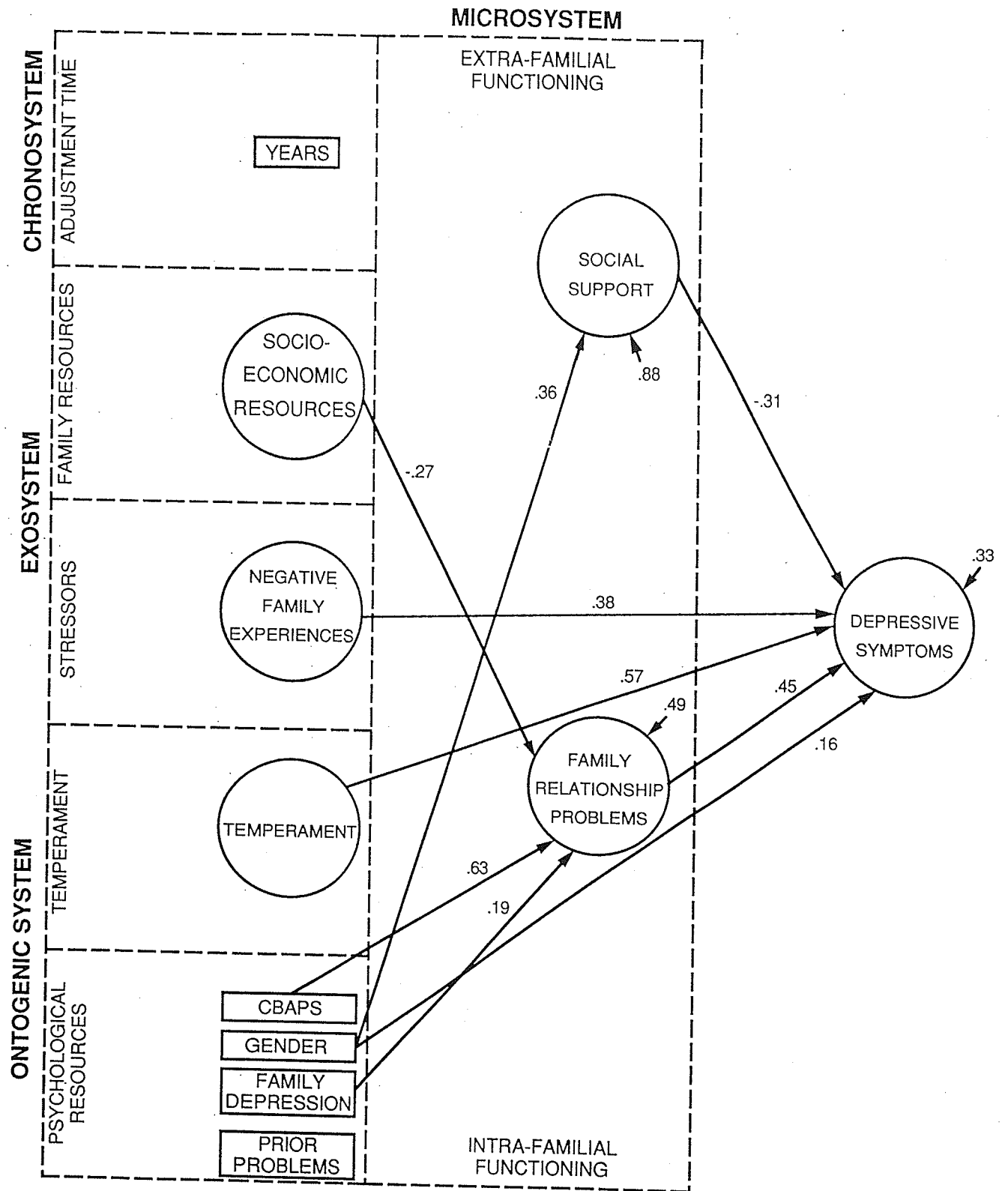


Figure 5. Final structural equation model

Note. Only statistically significant paths are presented

However, Social Support had a relatively small percentage (23%) of its common variance accounted for by the effects of the upstream factors and measures. The strongest, and only statistically significant predictor of the Social Support latent variable was teen gender (GENDER), explaining 13% of its variability when the other factors were controlled.

The effects of gender seem to be somewhat complex in this model. Being female predicted more Social Support, but girls were also more prone to Depressive Symptoms. The types of peer relationships reported by females thus seem to have a protective effect, while other aspects of being female appear to be related to increased risk for depressive symptoms.

The time since the decisive separation, the ontogenic system and the exosystem variables had a substantially stronger role in explaining Family Relationship Problems, the eight variables together accounting for approximately 76% of its common variance. The most important predictor of this factor was teen divorce-related beliefs (CBAPS), which accounted for 40% of its variability, controlling for the contribution of the other upstream measures. Thus, although the dysfunctional divorce-related ideas held by the teens (CBAPS) did not have a direct association with the degree to which they experienced symptoms of depression, their beliefs did play a strong indirect role through the relationship of this variable with increased Family Relationship Problems.

Of slightly lesser importance was a negatively weighted path from the Socioeconomic Resources factor, which accounted for approximately 7% of the variability in Family Relationship Problems when the other upstream variables were held constant. In the context of the other findings

described above, this path indicated that Socioeconomic Resources had their primary role in predicting Depressive Symptoms indirectly through the association between better financial solvency and fewer problems experienced in family relationships.

The final significant upstream contribution to explaining Family Relationship Problems was the family pedigree for depression (FAMDEP). This relationship was relatively minor, accounting for 4% of the variability when other factors were controlled. Family background of depression (FAMDEP) had a primarily indirect relation to risk of Depressive Symptoms through its association with more negative family relationships.

DISCUSSION

The current investigation was designed to test an ecological model (cf Bronfenbrenner, 1977a, 1977b, 1979; Kurdek, 1981) of the factors predicting self-reported symptoms of depression among teenagers living in separated or divorced, single-parent families. In addition to the time since the marital breakdown, this chronosystem model hypothesized inter-relations among variables on multiple ecosystem levels, including characteristics of teenagers (i.e., the ontogenic system), the experiences and resources available to their families (i.e., the exosystem), and the processes occurring in the contexts in which the adolescent functions on a day-to-day basis (i.e., the microsystem) (see Figure 3).

Time since the decisive marital separation was included in the model to reflect its chronosystem nature. Teenager characteristics included on the ontogenic system level of the model were gender, the extent to which teens endorsed dysfunctional beliefs about their parents' separation or divorce, the background of depression among first and second degree relatives, temperament, and whether they had experienced behavioral or emotional problems prior to their parents' marital breakdown. The severity of stress experienced by families and their socioeconomic resources comprised the exosystem level variables in the model. The microsystem variables included the degree of family relationship problems, and the magnitude of peer social support perceived by teens.

The model hypothesized three "tiers" of variables. The time since the marital separation, the ontogenic system and the exosystem were conceptualized as being predictively "upstream", while the microsystem variables were intermediate. All variables were hypothesized to have a direct contribution to the severity of the depressive symptoms teens reported, which formed the third "tier" of the model. The upstream variables were also posited to have an additional role in predicting adolescent symptoms of depression as a result of their association with the microsystem variables.

Overall, the responses provided by the current sample of teenagers and their separated or divorced custodial parents were consistent with the proposed model. Adolescent symptoms of depression were predicted by the exosystem characteristics evaluated, especially more reported family stress, both prior to, and within the past year. Risk for depressive symptoms was also related directly to characteristics of the teenager, in particular, more extreme temperamental emotionality, and being female.

Both proposed microsystem level variables were also directly associated with increased risk for depressive symptoms, as hypothesized. Less peer social support, defined by having fewer close friends, and reporting less satisfaction with social support from friends, predicted more teen symptoms of depression. Similarly, more conflict between the ex-spouses, and more teen-rated mother- and father-child problems were associated with increased severity of depressive symptoms.

In addition to these direct contributions to greater risk for depressive symptoms, there were also, as proposed, a number of characteristics of the

teenagers, and the experiences and resources of their families which were indirectly important due to their ability to predict teen social support from peers and family relationship problems. The number of dysfunctional divorce-related beliefs held by the teenager was indirectly associated with teen depressive symptoms via its connection with family relationship problems. Although teens who held more dysfunctional beliefs about their parents' separation or divorce did not inherently appear to be more vulnerable to depressive symptoms, such beliefs were indirectly pathogenic because of their association with negative family relationships. Family background of depression had a similar indirect association with increased risk for teen depressive symptoms, in that having a more extensive family pedigree for depression predicted more problems in family relationships which, in turn, was associated with greater severity of symptoms of depression. Also important was the relationship between teen gender and social support. Girls tended to perceive more social support, which was associated with less risk for symptoms of depression.

On the level of family experiences and resources (i.e., the exosystem), the most important indirect connection was the path from family socioeconomic resources to family relationship problems. Greater family financial resources predicted fewer problems in family relationships. This, in turn, was associated with less risk for depressive symptoms.

Although the model provided a good fit to the data overall, accounting for 89% of the shared variance among the measures of depressive symptoms, some of the hypothesized paths made a greater contribution than others. The ecosystem characteristics most strongly pathogenic of teen symptoms of depression were more family stress, greater temperamental emotionality,

being female, having more problems in family relationships, and perceiving less peer social support. Of these direct paths, the most important appeared to be those from temperament and family relationship problems to depressive symptoms, respectively. On the other hand, the hypothesized direct paths to depressive symptoms from time since the decisive marital separation, family socioeconomic resources, dysfunctional beliefs held by teens about their parents' divorce, family background of depression, and teen experience of emotional or behavioral problems before the decisive marital dissolution all made very minor, statistically non-significant contributions to the fit of the model.

The hypothesized indirect effects of the upstream variables also had varying degrees of importance in the model. In specific, of all the proposed indirect paths, the association between teen divorce-related beliefs and family relationship problems was the most important. Family socioeconomic resources, teen divorce-related beliefs, and family pedigree for depression made statistically noteworthy contributions to the fit of the model, but only through their connection with family relationship problems. The opposite was true for teen gender, which had indirect effects due to its association with social support, but did not make a statistically significant contribution to predicting family relationship problems. The time since the marital separation, family stress, and teen experience of behavioral or emotional problems before the separation did not have any statistically significant indirect weight in the model.

In spite of the smaller than expected contribution of the time since the decisive marital breakdown and some of the ontogenic system and exosystem level variables, there were a number of statistically significant

inter-correlations among these upstream variables which support their explanatory importance in the model. In particular, while none of the structural paths associated with the time since the marital separation were statistically significant, the passage of time was related to better family socioeconomic resources, more reported stressful family experiences, fewer dysfunctional divorce-related beliefs, and less chance that the adolescent had experienced psychological problems before the separation. There was also a connection between families reporting greater socioeconomic resources, and teens endorsing fewer dysfunctional divorce-related beliefs. More temperamental emotionality was similarly associated with greater likelihood of adolescents endorsing maladaptive beliefs about the separation or divorce, both of which were more frequent among girls. Reporting more dysfunctional divorce-related beliefs was, in addition, connected with being identified as having experienced emotional or behavioral problems before the separation. Finally, this second variable was also associated with membership in a family with a more extensive family pedigree of depression.

Comparison With Previous Research

Consistent with many recent descriptions of the multitude of processes affecting children's struggle to adjust to their parents' separation or divorce (e.g., Atkeson et al., 1982; Kurdek, 1981; Wallerstein, 1983, 1991; Wallerstein & Blakeslee, 1989), the current study supports the existence of a complex web of evolving individual, family, and social factors that foster and mitigate against the experience of depressive symptoms among teenaged children of separated or divorced couples. While many of the

paths found to be important in the current model parallel previous research, there were a number of surprises. These similarities and differences between the current findings and previous research will be outlined below. Variables will be discussed in the order in which they were presented in the model (see Figures 4 and 5).

Time Since the Marital Breakdown

The operationalization of the chronosystem nature of the model, the time since the marital breakdown, played a smaller than expected role in the model. This finding is, nonetheless, consistent with the divorce literature in that longitudinal studies generally find that the passage of time following the separation or divorce affects outcome variables related to offspring mental health and family functioning, while the support from cross-sectional studies is typically weak (Amato & Keith, 1991). Longitudinal designs may simply be a more powerful way of studying chronosystem effects than between-subjects, cross-sectional designs (Amato & Keith, 1991) like that used in the current investigation.

The smaller-than-expected role of the time since the decisive separation may, in addition, be at least partially attributable to a number of characteristics of both the current sample, and depression among teenagers in single-parent families, in general. First, the majority, over 80%, of families in the current sample were well beyond the first year to two years post-separation. This early period is that most typically associated with family dysfunction and upheaval, and acute emotional disturbances among children of the marriage (e.g., Hetherington et al., 1976, 1978; Maccoby et al., 1990; Wallerstein & Kelly, 1974, 1975, 1976). Longitudinal studies

tracking the evolution of children's adjustment to their parents' separation find that characteristics, and processes -- in the child, the family and the post-separation environment -- such as the quality of the parent-child relationships, the severity of conflict between the parents, and the stability of the household, become increasingly important in predicting offspring functioning as time passes beyond the initial, acute, post-separation crisis (e.g., Wallerstein, 1987; Wallerstein & Blakeslee, 1989; Wallerstein & Kelly, 1980b). In addition, this same body of research, especially the research of Wallerstein and her colleagues, indicates that after the initial crisis period, there is considerable stability in offspring functioning, including depression (Wallerstein, 1987; Wallerstein & Kelly, 1980b).

Given that most of the families in the current study were well beyond the first two years of adjustment to the marital breakdown, the greater explanatory importance of variables other than the time since the separation should not be surprising. Conversely, in a sample with more families closer to the decisive marital separation, it might be expected that the amount of time which has passed would have more importance in explaining symptoms of depression among teenaged children, as well as other variables pertaining to the functioning of adolescents and their families.

There was an unexpected, counter-intuitive correlation between longer time since the marital separation and the smaller likelihood of the parent indicating that the teenager experienced behavioral or emotional problems prior to the marital breakdown. This relationship may be attributable to the parents forgetting, especially given that a long time had generally passed since the initial separation for most of the families in this

sample. However, the relationships between the time since the decisive marital dissolution and other variables in the model generally conform to expectation (e.g., increasing family socioeconomic resources with time), suggesting that this unanticipated pattern may, instead, reflect some parents' more positive re-evaluation of the decision to separate as time has passed (cf Hops et al., 1990; Jensen et al., 1988a, 1988b; McGee et al., 1990), or selective forgetting of negative or unpleasant experiences (cf Lewinsohn et al., 1993c). It, in addition, may be an artifact of the possible low reliability of the single, dichotomous item used to assess the teenager's pre-separation behavioral and emotional functioning. This artifactual explanation must unfortunately be given some currency in light of the generally disappointing performance of the item; none of the expected connections to family relationship problems, family stress, social support, or depressive symptoms were found.

Family Socioeconomic Resources

The body of evidence evaluating the relationship between family socioeconomic resources and the symptoms of depression among teenagers, in general (e.g., Ambrosini et al., 1991; Carey et al., 1992; Fauber et al., 1987; Friedrich et al., 1982; Garrison et al., 1989; Reinherz et al., 1993b; Velez et al., 1989), and in separated and divorced families, in specific (e.g., Amato & Keith, 1991; Blum et al., 1988; Gibbs, 1981; Handford et al., 1986; McCauley et al., 1988; Pearson & Thoennes, 1990; Smith, 1990), is equivocal. The most supportable conclusion based on this research is that family financial difficulties work their negative effects on offspring mental health indirectly, due to the resulting decreased

functioning of the parents, especially as it manifests itself in hostility toward and conflict with offspring (e.g., Conger et al., 1992, 1993, 1994; Elder et al., 1985; Garvin et al., 1993; Kline et al., 1991; Lempers et al., 1989; Simons et al., 1993a, 1993b). The findings of the current study are consistent with this possibility, in that fewer financial resources were associated with more family relationship problems which, in turn, predicted more adolescent depressive symptoms.

The non-significant correlation between the latent variables reflecting family stress and socioeconomic resources was surprising in light of previous research indicating the importance of the connection (e.g., Abelson & Saayman, 1991; Amato & Keith, 1991; Blum et al., 1988; Garrison et al., 1987; Pearson & Thoennes, 1990; Simons et al., 1993a). However, this finding may be a function of the largely middle class nature of the current sample, in that the stresses experienced by such families may be less tied to economic factors than those experienced by families who are struggling financially.

Family Stress

Evidence of the direct connection between greater family stress and more severe teen depressive symptoms is consistent with much of the other cross-sectional research on the topic (e.g., Abelson & Saayman, 1991; M. Adams & J. Adams, 1991; Armsden & Greenberg, 1987; Berney et al., 1991; Forehand et al., 1991a; Garrison et al., 1990; Goodyer et al., 1990a, 1990b; Hetherington et al., 1985; Pearson & Thoennes, 1990; Stewart et al., 1994; Tschann et al., 1990). The associations between family stress and teen social support from friends (e.g., Puig-Antich et al., 1993; Stinson,

1991; Wallerstein, 1980), and between family stress and family relationship problems (e.g., Simons et al., 1993a) documented elsewhere in the divorce and adolescent depression literatures were not replicated in the current study. Nonetheless, the current findings suggest considerable complexity in the functioning of these factors -- at least in this model, in this sample.

The loading of the measure of current family stress (R-AFILE) on both the family stress and family relationship problems latent variables added in the specification search (see Table 25) may be an artifact of overlapping item content among the relevant instruments (cf Kofkin & Rappucci, 1991). This additional path may also reflect possible idiosyncratic characteristics of the current sample (cf, Godwin, 1988; MacCallum et al., 1992). However, the double loading of the measure of current family stress may also stem from the existence of some degree of causal reciprocity between the factors relating to family relationship problems and family stress (e.g., Conger et al., 1994).

This possibility would certainly be consistent with an ecological perspective (cf Bronfenbrenner, 1977a, 1977b, 1979; Kurdek, 1981). Problems in family relationships may be associated with or escalate family stress (cf Stewart et al., 1994), for example, by contributing to antisocial, disruptive, or self-destructive behavior on the part of teenaged offspring (e.g., McCubbin & Patterson, 1981; McCubbin et al., 1985; Shaw & Emery, 1988). In support of this alternative, family stress was connected with both greater risk for teen depressive symptoms, in general (e.g., de Wilde et al., 1992; Deykin et al., 1992; Rae-Grant et al., 1989; Stewart et al., 1994; Stone, 1993), and more teen problem behaviors, in specific, in the current model.

The association between increased time since the marital separation and increased family stress is compatible with the idea that members of separating and divorcing families experience cascading, inter-connected changes, many of which require long-term adjustment (e.g., Bane, 1976; Brandwein et al., 1974; Garvin et al., 1993; McLanahan & Booth, 1989; Peterson et al., 1984). This path, and the path connecting less time since the separation with more stress in the past year are also congruent with the possibility that, in addition to the extreme stress often characteristic of the initial period following parents' separation, the decreased protection afforded by the single-parent family may result in a 'domino effect' in which stress begets stress (e.g., Garvin et al., 1993; Hetherington, 1979b, 1980; McLanahan & Booth, 1989; Schlesinger, 1982; Tessman, 1978; Wallerstein & Kelly, 1980b). Nonetheless, the path from the time since the separation to recent family stress (R-AFILE) must be interpreted with some caution, given the possibility that, because it was added in the specification search, it may reflect chance variability (cf Godwin, 1988; MacCallum et al., 1992).

Temperament

Behavioral genetics research converges on 30 to 50% as the best estimate of the proportion of variance in personality, including emotionality, which is accounted for by heredity (Plomin, 1986). Consistent with this estimate, the current model indicated that temperamental emotionality was the single most important contributor to vulnerability to depressive symptoms, accounting for approximately one-third of the variability in the depressive symptoms latent factor.

Although previous research on temperament generally indicates a complex web of reciprocal inter-relations between environmental and temperamental characteristics (e.g., Daniels, 1986; Haaga, Dyck & Ernst, 1991; Maziade et al., 1990; Windle, 1989, 1992; Windle et al., 1986), the findings of the current study are equivocal on the subject. Emotionality was not significantly correlated with most of the other upstream variables in the model, with the exception of divorce-related beliefs and gender, which will be discussed in more detail below.

The paths from temperament to both peer social support and family relationship problems were similarly not statistically significant. However, in support of some degree of reciprocity among these variables, temperamental distressfulness loaded on the temperament factor as well as on the latent variable reflecting family relationship problems. This latter path must be interpreted with caution given that it was added in the specification search and therefore may reflect chance variability (cf Godwin, 1988; MacCallum et al., 1992). Nonetheless, one tentative interpretation might be that family turmoil may escalate or enhance the degree to which temperamental distress is expressed, or the degree to which extreme distressfulness has pathogenic implications (cf Bezirgian & Cohen, 1992; Maziade et al., 1990).

Divorce-Related Beliefs

More dysfunctional beliefs were associated with living in a family with fewer socioeconomic resources, being female, being more temperamentally emotional, and having emotional or behavioral problems pre-dating the separation. The current model is thus consistent with the possibility that

the system of divorce-related beliefs held by teenagers reflects complex processes at work in the teenager, and the single parent family (cf Kurdek et al., 1981; Kurdek & Siesky, 1980a, 1980b).

The associations between divorce beliefs and both more temperamental emotionality, and experiencing behavioral or emotional problems prior to the marital breakdown suggest the possibility that divorce-related beliefs may also be affected by pre-existing characteristics of the teenager (cf Haaga et al., 1991; Kurdek, 1981). While temperamental emotionality is not inherently pathogenic, children who are apt to react to experiences with fearfulness or distress may have more trouble accomplishing the psychological processing imposed on children when their parents have marital difficulties, and later separate or divorce (cf Buss & Plomin, 1984; Wallerstein, 1983; Wallerstein & Blakeslee, 1989). They may, for example, be more apt than less temperamentally emotional children to have problems overcoming catastrophic fears about being abandoned or unloved by their parents, or concerns about their responsibility for causing or resolving the parents' discord.

Behavioral and emotional problems which pre-date the marital breakdown may similarly fuel vulnerability to reaching an understanding of the parents' separation or divorce which has dysfunctional elements. However, the current findings also indicate that, in addition to teenager characteristics, aspects of the single-parent family including socioeconomic resources, and the extent of family relationship problems covary with the beliefs teens hold about their parents separation or divorce.

In this study, teenagers holding more dysfunctional beliefs about their parents' marital breakdown were also more likely to be in families characterized by more severe acrimony between the parents, and worse relationships between the adolescent and each parent (e.g., Kurdek & Berg, 1987). Although the direction of the relationship proposed in the model is from dysfunctional beliefs to problematic family relationships, it may be more realistic to conceptualize the relationship as reciprocal (cf Emery et al., 1992; Haaga et al., 1991; Reinherz et al., 1989).

For example, children in families that divorce with severe parental conflict are more likely to experience inadequate relationships with their parents for a host of reasons -- including the likelihood of being used as pawns or weapons by one or both parents (e.g., Tschann et al., 1989, 1990), and of being parented by one or two adults who are preoccupied, remote, irritable, inconsistent, emotionally needy, or depressed (e.g., Black & Pedro-Carroll, 1993; Fauber et al., 1990; Forehand et al., 1988; Long et al., 1988; Tschann et al., 1989, 1990; Wierson et al., 1989). Such experiences may foster or fuel teenagers' inaccurate ideas about their parents' marital breakdown (e.g., that one parent is to blame, that they caused or must solve their parents' problems, that their parents do not love them). Beyond this, parents who are consumed with malevolence for each other or have a negative relationship with their children are less likely to have the energy, insight or ability to explain the situation to them in a helpful way (cf Forehand et al., 1988; Long et al., 1988), let alone provide them with an arena in which to voice their thoughts about the situation so that any maladaptive beliefs can be challenged (e.g., Jacobson, 1978c). Conversely, as indicated in the current model,

dysfunctional beliefs teenagers hold about their parents' marital breakdown may, in turn, interfere with their ability to have a positive relationship with one or both of their parents (cf Reinherz et al., 1989).

The one study investigating the relationship between child divorce-related beliefs and family socioeconomic status did not yield evidence of an association between these variables (Friesen et al., 1991). Nonetheless, the connection between meager family socioeconomic resources and more adolescent maladaptive beliefs about the separation or divorce found in the current study suggests that the relationship between adolescent depressive symptoms and family disadvantage may be more multifaceted than implied by the predictive sequence described above (e.g., Conger et al., 1992, 1993, 1994) -- that family financial problems are associated with difficulties in family relationships, which are, in turn, connected with symptoms of depression among teenaged children. Experiences related to family financial hardship may also directly or indirectly influence offspring mental health by fostering maladaptive beliefs about the separation or divorce.

Living in a disadvantaged family, especially where this socioeconomic situation was precipitated by the separation or divorce, may, for example, fuel offspring fears that they will be abandoned by their angry, preoccupied parents, or ostracized by their now-more-advantaged peers. The sense of burden of teenagers who feel responsible for the marital breakdown may be exaggerated if they somehow conclude they contribute to the custodial parent's financial struggles, or any related family deprivation. The tendency to reach such inaccurate conclusions may be realistic if irritable, over-burdened parents, in fact, lash out at their children (cf

Conger et al., 1994). In addition, if the non-custodial parent's financial situation is noticeably better, as is often the case (e.g., Wallerstein & Blakeslee, 1989), this may stoke the fires of a teenager's anger and blame -- perhaps toward themselves, but also likely toward one, or both parents.

Gender

The effects relating to gender are similarly multifaceted. Some aspects of being female seem to protect against symptoms of depression, while other characteristics or experiences appear to be harmful. Consistent with other studies, girls tended to have better peer social support, in terms of both number of close friends, and perceived social support from friends (e.g., Barone et al., 1991; Raja et al., 1992; Rowlison & Felner, 1988; Slavin & Ranier, 1990; Windle, 1992). Also parallel with the bulk of the literature, this, in turn, predicted less depressive symptoms (e.g., Raja et al., 1992; Rowlison & Felner, 1988; Slavin & Ranier, 1990; Windle, 1992). In spite of the apparent benefits of peer social support for the girls in this sample, they also demonstrated the increased vulnerability to depressive symptoms observed by most other researchers (e.g., Baron & Campbell, 1993; Connelly et al., 1993; Finchman et al., 1994; Hops et al., 1990; Lewinsohn et al., 1993a, 1994b; Raja et al., 1992).

While this study did not provide clear evidence that might illuminate the reasons for this latter gender effect, consistent with other research, being female was associated with a tendency toward more severe temperamental emotionality (e.g., Buss & Plomin, 1984; Daniels, 1986; Goodyer et al., 1993). Contrary to previous studies (e.g., Friesen et al., 1991; Kurdek & Berg, 1987), girls in the current sample also endorsed more

maladaptive beliefs about their parents' separation or divorce. It may be possible that both of these correlations reflect a pattern of greater neuroticism (cf Eysenck, 1970) among girls. As hypothesized by Eysenck (1970) and others (e.g., Buss & Plomin, 1984), greater neuroticism or emotionality may reflect genetic vulnerability. However, research based on multifactoral models of disease transmission is not generally supportive of a direct genetic vulnerability to depression (Kashani et al., 1990), or emotionality (e.g., Buss & Plomin, 1984) associated with being female.

There is more support for social status and socialization explanations (Kashani et al., 1990). It may thus be plausible that the observed gender effects, in addition, or instead, reflect the influence of cultural expectations (J. H. Block et al., 1986; Buss & Plomin, 1984; Doherty & Needle, 1991), disadvantages inherent in female social roles (Kashani et al., 1990), or the increased likelihood that adolescent girls will experience psychosocial risk factors for depression (Lewinsohn et al., 1994b; Nolen-Hoeksema & Girgus, 1994).

The findings of the current study are also not inconsistent with the possibility, described earlier, that gender differences present prior to adolescence, such as a ruminative cognitive style, when combined with the greater challenges that adolescence may present for girls, may make them more prone to depression than their male age-mates (Nolen-Hoeksema & Girgus, 1994). These gender-related patterns may be especially toxic when combined with the additional stresses associated with parental separation or divorce.

For example, socialization valuing affiliation, dependency, and emotional expressiveness in girls may make them more susceptible to a depressogenic cognitive style characterized by rumination, helplessness and over-valuing of emotional distress (Kashani et al., 1990; Nolen-Hoeksema, 1990). The greater affiliative focus in the value systems and relationship patterns of teenaged girls (e.g., Gilligan, 1982) may, in addition, make parental marital conflict, separation, or divorce more emotionally taxing for girls, on the average (Black & Pedro-Carroll, 1993; Buchanan et al., 1991). The value they place on affiliation may make them especially vulnerable to a number of experiences which are apt to make them feel caught between their parents, and may foster inaccurate or self-defeating ideas about their parents' separation or divorce. Teenaged girls may be more likely to assume the role of parental confidant, and may be especially prone to try to mediate between their parents (Black & Pedro-Carroll, 1993; Buchanan et al., 1991). Both of these proclivities may, in turn, promote an inappropriate sense of personal responsibility for parental marital difficulties, or a distortedly one-sided view of the reasons for the marital breakdown.

Family Background of Depression

In this study, more extensive family pedigree for depression was directly associated with greater risk for family relationship problems, especially interparental conflict. There was, in addition, a relationship between more depression in the teenagers' first and second degree relatives and greater likelihood of having experienced psychological or behavioral problems before the parents' separation. Family pedigree for depression

covaried with family relationship problems, which, in turn, predicted increased risk for teen depressive symptoms. This pattern parallels much of the previously reviewed research on the dysfunctional relationships in families with a background of depression (e.g., Burge & Hammen, 1991; Fendrich et al., 1990; Forehand et al., 1986, 1987; Magnussen, 1991; Tarullo et al., 1994; Whitbeck et al., 1992).

These findings do not exclude the possibility of a genetic contribution to all of these variables -- family pedigree for depression, family relationship problems, and teen symptoms of depression. The pattern of associations found in the current study is, in fact, consistent with the substantial body of research on the heritability of emotionality, and of depression (e.g., Buss & Plomin, 1984; Cadoret et al., 1985; Plomin et al., 1988). However, the absence of a genetic marker (Downey & Coyne, 1990; Faraone et al., 1990), the likely heterogeneous nature of depressive phenomena (e.g., Angold, 1988a), the cross-sectional nature of the current study, and the very rough nature of the method used to assess family background of depression make it difficult to rule out the contribution of shared environmental characteristics to the observed patterns (e.g., Cummings & Davies, 1994; Downey & Coyne, 1990; Faraone et al., 1990; Rende et al., 1993).

Family Relationship Problems

All in all, this study supports the realistic assumption that there are multiple variables which contribute to problematic family relationships in separated and divorced, single parent families. Nonetheless, consistent with the bulk of the previous research on the subject, this study found

that regardless of their antecedents, conflict between the parents (e.g., J. H. Block et al., 1981; Burt et al., 1988; Johnston et al., 1989; Reinherz et al., 1993b; Sandler et al., 1992), and worse parent-child relationships (e.g., J. Block et al., 1988; Shaw et al., 1993; Thomas & Forehand, 1993; Tschann et al., 1989) were associated with greater severity of depressive symptoms among teenaged children of the marriage. However, an alternative possibility not assessed is that conflict between the parents has detrimental effects on the mother- and/or father-child relationships, which, in turn, increase teenagers' vulnerability to depressive symptoms (cf Black & Pedro-Carroll, 1993; Downey & Coyne, 1993; Fauber et al., 1990; Wierson et al., 1989).

Peer Social Support

The current model supports the findings of previous research indicating an association between perceived inadequacies in social support from friends, and symptoms of depression among teenagers (e.g., Armsden & Greenberg, 1987; Armsden et al., 1990; Berney et al., 1991; Brent et al., 1993a; Connolly et al., 1992; Goodyer et al., 1990b, 1991a, 1991b; Hops et al., 1990; Lewinsohn et al., 1994b; Reinherz et al., 1989, 1993b). Nonetheless, contrary to other studies, there was little evidence of a connection between negative family relationships and perceived or actual teen social isolation from their peers (e.g., Puig-Antich et al., 1993; Stinson, 1991; Wallerstein, 1980).

In this sample, teenagers' perception of peer social support and family relationship problems, instead, appeared to make independent contributions to the severity of their depressive symptoms. The pattern of these

separate contributions was, in addition, consistent with other research indicating greater importance of family relationships in fostering adolescent well-being, compared to peer support (e.g., Raja et al., 1992; Rubenstein et al., 1989; Windle, 1992).

There was, similarly, little evidence of a relationship between family stress and teen social support from peers, either in the direction of family stress resulting in decreases in teens' sense of support (e.g., Stinson, 1991), or in the direction of social support from friends buffering the detrimental effects of family stress (cf Cohen & Wills, 1985). The findings based on the current model thus favor the hypothesis that these two variables have relatively independent, direct effects on depressive symptoms.

An alternate explanation for the failure to find the expected relationships pertaining to teen social support from friends stems from the narrow scope, and lack of specificity to separation and divorce of the social support measures used. Perhaps an index reflecting divorce-related changes in teens' social networks, patterns of social interaction, or degree to which they pursue or allow emotional intimacy might be more strongly, or differently related to the exosystem and ontogenic system variables in the current model.

Limitations of the Current Study

The consistency of the current findings with much of the literatures on adolescent depression, and adjustment to parental separation and divorce is encouraging. There are, nonetheless, several aspects of the sample and methodology which impose necessary limits on the degree to which the model can describe Canadian separated and divorced families.

Correlational Nature of the Study

First, and foremost, although this study tested a model which hypothesized directional influences among variables, and therefore implied causality, such interpretations cannot be legitimately offered (e.g., Berk, 1991; Blalock, 1991; Freedman, 1991; Godwin, 1988). Any explanations indicating directionality of influence must be tempered by awareness and recognition that the data are cross-sectional. The ability to make directional interpretations is similarly constrained by the fact that some of the information is retrospective (i.e., the ratings of present and past family stress, the items assessing family pedigree for depression, and pre-separation teen emotional or behavioral problems). Although structural equation modeling enables assessment of models of hypothesizing causal influences among variables, any directional hypotheses must remain just that, without confirmation from non-retrospective, longitudinal, ideally, prospective studies.

Methodological Bias Toward Higher Functioning Families

There are also several limitations stemming from the method used to obtain the current sample which made it inherently biased toward more resourced, better functioning families. The initial selection of parents having filed separation or divorce petitions through the Family Division of the Court of Queen's Bench in Winnipeg was random. However, to be included in the study pool, there had to be an address for the custodial parent in the Court file. Given that these files are public information, it is common practice to omit information such as addresses and telephone numbers in cases involving domestic violence or sexual assault, to block one avenue abusers might use to locate their partner or children. This means that the sample necessarily under-represents families in which there was victimization of some kind.

To be included in the study, families also had to have a traceable telephone number. This necessity likely biased the sample against families too impoverished to be able to afford a telephone, and against chaotic or financially disadvantaged families who may have had to move frequently (cf Fleming et al., 1993; Garrison et al., 1990). It also precluded participation of families with unlisted telephone numbers, also possibly further biasing the sample against families where domestic violence or extreme parental conflict necessitated such protective measures.

In addition, participation required that custodial parents be sufficiently conversant in English to carry on a rather detailed telephone conversation. Both teens and parents also had to read and write English well enough to complete the surveys. These requirements unfortunately

introduced an obvious bias against immigrant families, and families where the reading ability of the parent or child was inadequate to the task of filling out the questionnaire.

Finally, to participate, parent and teen had to be living together. Since both provided information, they had to be able to confer, reach a decision about whether they wanted to take part, and coordinate how to do so. This aspect of the methodology likely introduced some degree of bias against families where there was either extreme parent-child conflict, or teen or parent mental health problems (cf Fleming et al., 1993; Garrison et al., 1990). Such families were less likely to meet the initial selection criteria because teenaged children were more apt to be living somewhere other than with the parent. In addition, parents and teens in such families were likely at greater risk for being unable to agree or mobilize themselves to take part. The ability to generalize the findings of this study to low functioning teenagers, especially those who have extremely dysfunctional relationships with their custodial parent, is thus likely limited.

Limitations in Sample Representativeness

In spite of these possible limitations, an encouraging 45% of the requested surveys were returned. This response rate was better than, or comparable to many studies using similar methodologies (e.g., 47%, Arditti & Keith, 1993; 25%, Buehler & Trotter, 1990; 48%, Doherty & Needle, 1991; 24%, Kurdek & Berg, 1987; 29%, McCombs et al., 1987; 50%, Partridge & Kotler, 1987). However, it was far from ideal, in that it was not possible to evaluate the differences between participants and either the 55% of the

traceable families not returning their requested surveys, the 17% of the traceable families that refused, or the 40% of the original cases drawn from the Court records that could not be contacted (cf La Greca & Silverman, 1993; Lewinsohn et al., 1994b).

The return rate was respectable (45%), the sample size (N=224) was large for the divorce literature, and the sample was representative in terms of some demographic characteristics (i.e., parent gender, marital status, first language). Nonetheless, the Census comparisons confirmed that the sample was non-representative of Canadian single parent families on other counts. The participating families were more often white, Anglo Saxon, employed, and better educated than the general population of Canadian lone parents. This pattern likely reflects "volunteerism", but the limitations in the methodology described above unfortunately may have exaggerated this bias toward more advantaged families.

Contrasts with other Canadian samples in the divorce literature reaffirms the hypothesis that the families in this study may be more advantaged than the norm for this population. Similar proportions of custodial parents were receiving child support in this sample (71%) and another comparable group of divorced families (80%, Stewart & Steel, 1990). The figure of one-third found in the current study appears high for the proportion of custodial parents indicating their ex-spouse is not complying with a support agreement. It is, nonetheless, substantially less than the 50% rate typical for separated and divorced families in Canada (McCall, Hornick & Wallace, 1988). In addition, the average amount of support to which custodial parents in the current sample were entitled (\$603 per month) is more than three times the average amount awarded in Canadian

divorce settlements between 1986 and 1987 (\$178, Watchtel, 1988), and is close to twice the average amount cited in a similar Manitoban sample (Stewart & Steel, 1990).

Current Canadian figures indicate that physical or mental cruelty is the legal grounds for the marital breakdown in between 15 to 41% of divorce cases (Sev'ler, 1992; Statistics Canada, 1985, 1992). Given that the 1985 Divorce Act requires only separation of at least one year as grounds for divorce, these figures likely underestimate the prevalence of abuse in divorcing families in Canada (Sev'ler, 1992). In light of the previously described biases in the sampling procedure, it is especially distressing that 20% of parents acknowledged that physical or sexual abuse was part of the reason for the marital breakdown, and 14% of teenagers revealed that someone in their family had been "robbed or attacked (physically or sexually)." These figures are even more distressing given that they likely underestimate the prevalence of abuse in this comparatively advantaged, well functioning sample due to the vague nature of the abuse-related questions, and due to the stigma and secrecy around abuse which makes people reluctant to admit to such experiences even on anonymous surveys.

The degree to which the current sample might be thought to represent the range of depressive symptoms typical of teens in separated and divorced families is questionable and difficult to assess. The rates of depression found in the current study (BDI=23%, CES-D=47%) are comparable to those found in general population studies of adolescents using the BDI (5 to 20%. e.g., Albert & Beck, 1975; Connelly et al., 1993; Friedrich et al., 1982; Gibbs, 1985; Kaplan et al., 1980, 1984a; Reynolds, 1984; Roberts et al., 1991; Siegel & Griffin, 1984; Whitaker et al., 1990) and the CES-D (29 to

53%. e.g., Doerfler et al., 1988; Radloff., 1991; Roberts et al., 1991; Schoenbach et al., 1982; Vulcano & Barnes, 1987). In spite of these rough parallels, the frequency of severe symptoms of depression (BDI=13%, CES-D=16%) appear to be high in the current sample compared to estimates based on high school samples using either the BDI (1 to 5%, e.g., Kaplan et al., 1980, 1984a; Roberts et al., 1991; Teri, 1982) or the CES-D (8 to 12%, e.g., Garrison et al., 1991; Roberts et al., 1991; Vulcano & Barnes, 1987).

However, the importance of these similarities and differences is impossible to evaluate because there are no data available on the distribution of scores on the BDI or the CES-D in other samples of adolescents in separated and divorced families. In addition, without a comparison group of teens in ever-married families, the current study cannot clarify the underlying question of whether teens in separated and divorced families are, indeed, a group at particular risk.

Limitations Due to Measures and Overall Design

The ability to draw generalizations from the current study is also limited by the characteristics of some of the measures, and the overall design, itself. First, to obtain a large enough sample to test the model, it was necessary to combine separated and divorced families, in spite of a very small, but suggestive body of research indicating differences between such families (Allison & Furstenberg, 1989).

Second, the current survey did not include items to assess pre-separation family income, or socioeconomic status (Barber & Eccles, 1992). As a result, it is not possible to evaluate the influence of

changes, most likely decreases, in income or social class stemming from the marital breakdown.

Third, the measures of the teenagers' pre-separation emotional and behavioral functioning, and the family pedigree for depression were likely highly unreliable. The former is a very general, single-item, retrospective rating. In the latter case, the questions were general and retrospective. The required ratings were also vulnerable to possible idiosyncracies in the parents' understanding of depression, and there were a large proportion of "don't know" responses to the relevant items. Neither one of these measures can therefore be seen to provide more than rough indices of these variables; both the presence and absence of paths in the model regarding these teen characteristics must be interpreted with corresponding caution.

Fourth, as mentioned above, several of the measures were retrospective (i.e., the item pertaining to teen pre-separation emotional and behavioral problems, the ratings of family pedigree for depression, and the measures of current and past family stress). They are consequently fraught with the well-documented inaccuracies stemming from selective forgetting of negative or unpleasant experiences (e.g., Aneshensel, Estrada, Hansell & Clark, 1987; Lewinsohn et al., 1993c).

Finally, there were no comparison groups -- either pertaining to other forms of teen psychopathology (e.g., symptoms of anxiety, externalizing behavior problems), or to parental marital status (i.e., never-married, common law, ever-married, re-married, widowed, and/or parent absent families). The degree to which the current model is specific to teen

depressive symptoms following parental separation or divorce therefore remains to be established.

Strengths of the Current Study

In spite of these limitations, the current study also has a number of theoretical and methodological advantages, and makes important contributions to the literature. First, this study goes beyond much of the largely descriptive and atheoretical research on divorce (Abelsohn & Saayman, 1991; Amato, 1993a; Kunz, 1992; Kurdek, 1981, 1993; Wallerstein, 1991) by testing a specific, theoretically and empirically based model. The proposed model was, in addition, multifaceted, incorporating many of the individual, family and social characteristics and processes thought to influence both depressive symptoms and divorce adjustment among adolescents. Although limited by the cross-sectional nature of the data, the web of inter-relations among a complex group of variables was explored, assessing both their relative importance, and how they work together. As well, in spite of concern expressed by numerous writers about the unique difficulties life in a single-parent family presents to teenagers (e.g., Barber & Eccles, 1992; Wallerstein, 1991; Wallerstein & Blakeslee, 1989; Wallerstein & Corbin, 1989), and the risk for depression among teens who have experienced their parents' marital breakdown (e.g., Atkeson et al., 1982; Schwartzberg, 1980; Wallerstein, 1980, 1987), the current study is one of a small number actually assessing depressive symptoms in this population.

The current sample was community-based, and is not a sample of convenience, as is common in the divorce literature (e.g., Kurdek et al.,

1981; Kurdek & Siesky, 1980a, 1980b). Even though it was not completely random or representative, it is larger, and more socioculturally diverse than those in much previous research (e.g., Chess et al., 1983b; Grossman et al., 1980; Hetherington et al., 1978; Wallerstein & Kelly, 1974, 1975, 1976, 1978).

In addition, the majority of the measures used have previously established reliability and validity. In light of meta-analysis by Amato & Keith (1991) which indicated smaller effects in more recent samples and in studies using more psychometrically sound measures, the strong relationships found in the current data are especially encouraging.

Finally, this study supported the utility of ecological theory and models (cf Bronfenbrenner, 1977a, 1977b, 1979; Kurdek, 1981) as the basis for research on divorce and symptoms of depression. The data reaffirm the considerable complexity of the processes thought to affect the post-divorce functioning of teenagers. Some previous findings have been reaffirmed, while others have been challenged, contributing to the ongoing scientific dialogue in both divorce and depression literatures, and generating much fuel for thought and future research.

Future Research

In spite of these substantial strengths, the current model is exploratory, and therefore in need of replication. Its generality should be evaluated on many fronts. Evaluation of the model in other, hopefully more representative samples of teens and single custodial parents will be crucial.

The current study looked at a slice of the lives of the participating families taken at varying points from the marital breakdown. Although the model provided hints at possible directional influences, it remains for longitudinal research to provide a stronger test of its utility. In this regard, follow-up of the current sample is a viable possibility.

Prospective research suggests the possibility that at least some of the destructive parental behavior and child psychological disturbance attributed to separation and divorce begin well before the fact (e.g., J. Block et al., 1988; J. H. Block et al., 1986; Shaw et al., 1993). As a result, many authors have voiced the opinion that to obtain a realistic picture of the effects of separation and divorce, as well as the factors which precipitate and mitigate against problems in functioning among children, it is necessary to follow a cohort of offspring from two-parent, ever-married families, some of whom will ultimately experience their parents' separation or divorce (e.g., Barber & Eccles, 1992; J. H. Block et al., 1986; Grych & Fincham, 1992; Shaw et al., 1993). In the current study, the rough measure of teen pre-separation functioning had explanatory power in the model. The importance of this likely unreliable measure further highlights need for prospective research, in addition to longitudinal studies of families in which the parents have already separated.

There is ample evidence pointing to the possibility that at least some of the relationships between depressive symptoms and other variables in the current model are non-specific. For example, exposure to inter-parental conflict (e.g., Fauber et al., 1990; Shaw & Emery, 1988; Tschann et al., 1990) and family stress (e.g., Kliever & Sandler, 1992; Stolberg & Anker,

1983; Webster-Stratton, 1990) also predict externalizing behavior problems. In addition, children of depressed parents are at increased risk for externalizing behavior problems as well as for depression (e.g., Anderson & Hammen, 1993; Fendrich et al., 1990; Hammen et al., 1987), as are children living in separated or divorced families (e.g., J. H. Block et al., 1986; Brady et al., 1986; Doherty & Needle, 1991). There is also considerable evidence of overlap or co-morbidity of depression and other syndromes among adolescents (e.g., Angold & Costello, 1993; Fleming & Offord, 1990; Lewinsohn et al., 1991; Rohde et al., 1991; Tannenbaum, Forehand & Thomas, 1992).

As a result, it will be crucial for future research to address the question of whether the current conceptual framework is specific to depressive symptoms. This might be accomplished by contrasting adolescents reporting symptoms of depression with teens manifesting other types of emotional or behavioral difficulties such as externalizing behavior problems, or anxiety. In light of the failure of the measure of teen problem behaviors (JPBS) to function as an index of depressive symptoms in this sample, it may be possible to use the current data to tentatively address the question of the specificity of the model to depressive symptoms. Given that the current sample may be biased toward teens who are better functioning, it will also be important to evaluate the model in samples more diverse with respect to depressive symptoms, as well as in more severely disturbed samples (e.g., teens diagnosed as depressed).

A related area of future research is the question of whether the current model is specific to separated or divorced families, or whether it also predicts depressive symptoms in families that came to be headed by one

parent for other reasons (e.g., abandonment, parents never lived together, parental death, parent in prison, parent has an occupation where they are absent for extended periods). The greater ambiguity of marital separation without divorce may hamper offspring adjustment. It may therefore also be helpful to compare offspring of parents that divorce with those whose parents stay separated over long periods. Similarly, it remains to be established, the degree to which this model also predicts depressive symptoms in teens living in various forms of two-parent families (e.g., ever-married parents, step-families, parents living in common-law marriages).

In addition, the presence of correlations between teen gender and both temperament and divorce-related beliefs, and paths from teen gender to both peer social support and depressive symptoms, suggest the possibility that the model may function differently for boys and girls. There were, unfortunately, not enough boys in the current sample to test the model separately for each gender, and it remains for this question to be answered in future research.

The current model accounted for a substantial 89% of the variability in the measures of teen depressive symptoms. Nonetheless, the model is far from exhaustive in terms of other variables that either divorce or depression literatures have identified as potentially important.

Although not supported in the current study, it is, for example, possible that religious, racial or cultural group membership may affect child, parent, or family functioning as a result of differences in the acceptance of separation and divorce as solutions to marital unhappiness,

and in the degree to which these communities mobilize themselves to support, as opposed to isolate, single parent families (e.g., Kurdek, 1981, 1991, Taylor et al., 1993; Zaslow, 1988). There are also a multitude of possibly salient characteristics pertaining to the separation or divorce, itself, that might also contribute to the model. Such variables might include the duration of inter-parental conflict, the degree to which children were protected from any marital hostilities (e.g., Buchanan et al., 1991; Johnston & Campbell, 1988; Kofkin & Rappucci, 1991; Tschann et al., 1989, 1990), whether there was a custody battle (e.g., Johnston et al., 1989), whether the family was involved in mediation or treatment, how the children were prepared for the marital breakdown, children's satisfaction with the custody and visitation arrangements, the social resources utilized by the custodial parent, and the degree and quality of changes in family and teen social networks.

In the current study, teen perception that family members had been physically or sexually victimized predicted more severe depressive symptoms and problem behaviors. This finding is consistent with other research in the area (e.g., de Wilde et al., 1992; Deykin et al., 1992; Pearson & Thoennes, 1990; Reinherz et al., 1993b; Wallerstein & Blakeslee, 1989), suggesting the possible utility of adding some index of teen or family experiences with victimization to the model. It is also possible that other characteristics relating to pre- or post-separation family functioning, such as the parenting abilities of both custodial and non-custodial parents, and the presence of parent mental health problems (e.g., Burge & Hammen, 1991; Forehand et al., 1986; Tarullo et al., 1994; Whitbeck et al., 1992) would contribute to the model.

There are numerous ways in which parent mental health might relate to or illuminate other links observed in the current study. Parent mental health may, for example, affect offspring depressive symptoms by increasing the risk of exposure to pathogenic family relationships (cf Downey & Coyne, 1990). However, it may be that both child and parent mental health problems are sequelae of family relationship problems (cf Downey & Coyne, 1990), that child maladjustment and family relationship problems may be the result of parental depression (cf Downey & Coyne, 1990), or that parent depression, family relationship problems, and child maladjustment all mutually affect one another (cf Downey & Coyne, 1990; Hammen et al., 1990).

It is, in addition, possible that genetic contributions might affect many variables in the current model on a variety of levels (cf Buss & Plomin, 1984; Daniels, 1986; Plomin et al., 1988). Genetic influences may, for example, affect the actual characteristics assessed by any given instrument, as well as the manner in which individuals perceive the environment and respond to assessment devices (Plomin, Reiss, Hetherington & Howe, 1994). The measurement paths indicating that adolescent temperamental distress also loaded on the factors reflecting family stress and family relationship problems may stem from such genetic effects on the perception of the environment and responses to survey items. This hypothesis must be highly tentative, however, given that the relevant paths were added in the specification search (cf Godwin, 1988; MacCallum et al., 1992). Comparing the fit of the model across sibling groups of varying degrees of genetic and environmental relatedness (e.g., identical twins versus fraternal twins versus biological siblings versus half-siblings versus step-siblings) might be one way for future research to assess and

differentiate the possible effects of such genetic, environmental and interactional influences.

Equally important, is the need to compare the efficacy of other possible configurations of the variables and factors in the current model (cf Emery et al., 1992; Godwin, 1988; MacCallum et al., 1992; MacCallum, Wegener, Uchino & Fabringar, 1993). While it does, undoubtedly, provide a good fit to the data, it is possible, if not likely, that there are other models that might have as much or more utility. For example, it may be illuminating to separate the measure of parental conflict from the indices of problems in the mother- and father-child relationships, perhaps assessing the hypothesis that the former might affect the latter (cf Black & Pedro-Carroll, 1993; Fauber et al., 1990; Kline et al., 1991; Tschann et al., 1989, 1990; Wierson et al., 1989).

Although it may be parsimonious to conceptualize different ecosystems at uniformly different levels of "explanatory" proximity to the outcome variable, such models may be inadequate to encompass the complexity of the phenomena at hand. It will be important to test the utility of models incorporating the not unrealistic assumption that some of the ontogenic, microsystem, and exosystem variables included in this study might function at more remote or "prior" degrees of causal proximity, while others would be more appropriately defined as causally "downstream." It would also not be unrealistic to assume that there might be reciprocal relationships among many of the included variables, or that the interplay among them would change over time, and across situations (cf Emery et al., 1992; Haaga et al., 1991).

A model in which time since the decisive separation is causally prior to divorce beliefs, family stress and family socioeconomic resources would, for example, not be unreasonable based on the results of the current study. Conceptualizing divorce-related beliefs as the product of problematic family relationships would be consistent with at least some of the findings in both divorce and depression literatures (e.g., Kurdek & Berg, 1987). Also consistent would be a model in which temperament predicts divorce-related beliefs, which, in turn, predicts family relationship or social support problems (e.g., Kessler, Kendler, Heath, Neale & Eaves, 1992; Windle, 1992). Most importantly, however, at least some of the previous literature is congruent with the possibility that some of the variables, including social support, family stress, parent-child relationship problems, and cognitive distortion are coloured by, or are sequelae of depression (e.g., Cohen et al., 1987; Kofkin & Rappucci, 1991; Petersen et al., 1993; Reinherz et al., 1989; Swearingen & Cohen, 1985). Although it would be impossible to unequivocally assess this question in a cross-sectional design, it would nonetheless be possible to test alternative models conceptualizing depressive symptoms as being at an intermediate level of causality with variables such as divorce beliefs, social support, family stress and parent-child problems as effects of depression (cf Burge & Hammen, 1991; Frost & Pakiz, 1990; Hamilton et al., 1993; Hammen et al., 1990; Joffe et al., 1990; McCauley et al., 1993; Ollendick et al., 1992; Vernberg, 1990).

CONCLUSIONS

The current investigation was designed to test an ecological model (cf Bronfenbrenner, 1977a, 1977b, 1979; Kurdek, 1981) of the factors predicting self-reported symptoms of depression among teenagers living in separated or divorced, single-parent families. In addition to the effects of the time since the decisive marital breakdown, the model hypothesized relationships among aspects of the ontogenic system (i.e., teen gender, divorce-related beliefs, family background of depression, temperament, and experience of behavioral or emotional problems prior to the marital breakdown), the exosystem (i.e., family stress, and family socioeconomic resources), and the microsystem (i.e., family relationship problems, and teen peer social support).

Overall, the model provided a good fit to the current data, accounting for 89% of the shared variance among the measures of depressive symptoms. The ecosystem characteristics most strongly pathognomic of teen symptoms of depression were more family stress, greater temperamental emotionality, being female, having more problems in family relationships, and perceiving less peer social support. Of these direct paths, the most important were those from temperament and family relationship problems to depressive symptoms, respectively.

A number of indirect contributions to the severity of depressive symptoms were also important in the model. Living in a family with fewer socioeconomic resources, holding more dysfunctional divorce-related

beliefs, and having a stronger family background of depression indirectly predicted teen depressive symptoms via their connection with more destructive family relationships. In addition, girls tended to perceive more social support, which was, in turn, associated with lowered risk for symptoms of depression.

In spite of some possible limitations in generalizability, the current study makes a number of important contributions to the literature on teenagers' adjustment to their parents' separation or divorce. By testing a specific, theoretically and empirically based model, this study went beyond much of the largely descriptive, atheoretical research on divorce. The model incorporated many of the individual, family and social characteristics and processes thought to influence adolescent depressive symptoms and divorce adjustment. This enabled assessment of both the relative importance of each variable, and one possibility for how they might work together. As well, this study was one of a small number actually assessing depressive symptoms among teens living in single parent, separated or divorced families. The current sample, although not completely random or representative, was community-based, and is larger, and more socioculturally diverse than is typical in the divorce literature. In addition, contrary to much previous research, the majority of the measures used were of established reliability and validity.

Finally, and most importantly, this study supports the utility of ecological theory and models (cf Bronfenbrenner, 1977a, 1977b, 1979; Kurdek, 1981) as the basis for research on divorce and symptoms of depression. In spite of the good fit of the model to the data, and in spite of the study's substantial strengths, the model is, nonetheless, exploratory, and therefore in need of replication on many fronts.

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Appendix A
INITIAL INTRODUCTORY LETTER

Dear Parent and Teenager,

My name is Rebecca Broder. I am a candidate for a Ph.D. in Clinical Psychology at the University of Manitoba, and am conducting a research project on teenagers' reactions to their parents' separation or divorce. This study is being done in conjunction with Dr. Gordon Barnes of the Departments of Family Studies and Psychology at the University of Manitoba.

As you may be aware, separation and divorce are experiences that are a part of the lives of many teenagers and their families. The strengths and weaknesses of each family and its members make the process of adjusting to the changes stemming from divorce and separation different for everyone. Unfortunately, very little is known about the reactions of teenagers to their parents' marital break-up.

I am interested in finding out what about teenagers, their families, and their experiences make adjusting to life in a single parent family easier or more difficult for them. This project will provide valuable information which will help people working with teenagers to know who is at risk for having difficulties adjusting to their parents' split so they can be helped before they start to experience major problems.

Along with the names of several hundred other families, your name was randomly chosen from the divorce dockets, which are the public records of all divorces that occur in Manitoba. I have sent you this letter about my study to personally invite you and your teenager to take part.

To be in the study, parents must be divorced or separated, and single (i.e., not remarried or living with a new partner). The parent must have a teenaged child between the ages of 14 and 19 who is currently living with them. I am hoping you will both agree to be involved because I am asking parents and their teenaged child each to give me different and important information. I am interested in the experiences of teenagers and their custodial parent at all points in the adjustment process, so your participation would be helpful no matter when the divorce or separation occurred.

To take part, teenagers and custodial parents each complete an anonymous questionnaire that takes about 45 minutes to fill out. The surveys include questions on topics such as basic characteristics of your family, your life experiences during the past year, and your general mood and happiness.

Your help with this study is entirely voluntary. You are free to withdraw your participation at any point, and I will not pressure you to take part. If you do not wish to have further involvement with the project, are not a member of a single parent family with a teenaged child, or have previously taken part, simply call 943-8641, which is a 24 hour, 7 day answering service. Leave your name, along with a message stating you do not want to take part, and you will not hear from me again.

If I do not hear from you, I will be telephoning you in the near future so that I can personally answer any questions you might have about the project, and find out if your family meets the participation criteria. If you are interested in the study, and your family meets the entry criteria, I will mail you the surveys. If you have changed your last name, obtained an unlisted telephone number, or moved since your separation or divorce was finalized I would greatly appreciate it if you could call 943-8641 and leave me your current telephone number to make sure I am able to contact you.

Please feel free to call 943-8641 and leave a message for me, Rebecca Broder if you have any questions, concerns or comments about anything related to this project. I will return your call as soon as I can.

Thank you for your help and cooperation.

Sincerely,

Rebecca Broder, M.A.

Gordon Barnes, Ph.D.

Appendix B

PROTOCOL FOR TELEPHONE CALL TO FAMILY

PROTOCOL FOR FOLLOW-UP PHONE CALL

(Ask for parent.)

Hello _____. My name is Rebecca Broder. I'm calling from the University of Manitoba Psychology Department. About a week ago I sent you a letter telling you about a study I'm doing on how teenagers cope with their parent's separation or divorce. I was calling to make sure you received the letter.

(If they don't spontaneously indicate that they received the letter, ask:)

Did you receive the letter?

(If they did not get the letter, ask them if they would like me to send them a second copy of the letter. If they decline, thank them for their time. If they ask for a second copy of the letter, confirm their address, and that they are the correct person, and tell them that you will be calling them back in about a week to make sure they did get the letter this time.)

(If they did get the letter say:)

I was also calling to find out if you were interested in hearing a bit more about why I am doing the study, and what it would involve for you so that you can decide whether you're interested in being involved.

(If they say no, thank them for their time, and for letting me know, and say good bye. If they say they don't fit for the study, inquire to make sure this is true, and if it is, thank them for their time, and say good bye.)

(If they indicate they are interested in hearing more, ask them if they have about five minutes. If they say no, ask about when would be a better time to call, and say good bye. If they say they have the time, say:)

What I will do is tell you a bit more about why I'm doing the study, and why I am asking for your help. Next, I'll tell you more about what the study would involve for you, and then you can ask me any questions you might have, and tell me whether you're interested in being involved. Before I do that, though, I'd like to ask you a few questions to make sure you really do fit for the study. Is that O.K?

(Wait for their agreement, and then go on.)

As I mentioned in the letter, what I'm looking for is people who are separated or divorced, who haven't remarried and aren't living with a new partner, who have at least one teenager who lives with them who is somewhere between the ages of 14 and 19.

(If they don't say anything to indicate whether they do or don't fit, say:)

Does this fit your situation?

(If they say it doesn't, inquire about how, and if they, in fact don't fit, thank them for their time and interest, answer any questions they have, and say good bye.)

(If they do fit, say:)

What I'd like to do first, is tell you more about why I'm doing the study and why I need your help so much. Basically, there are 2 main reasons why I'm doing the study. First of all, even though anyone who has had anything

to do with families who are splitting up knows the teenagers are just as affected by the whole thing as everyone else in the family, not much is known about what makes it easier or harder for teens to cope with the whole situation. I want to find out more about what makes it easier and more difficult for teenagers to cope so that parents can be given more information about what they can do to help their teenagers, and so that people working with families who are splitting up will have a better idea of what suggestions to make that will be helpful for the teens in the family. I also want to find out more about what makes it hard for teens hard to cope. And I'd like to be able to pass that kind of information on to people working with teens so that they will have a better idea of which kids might be at risk for having problems after their parents split up, so that they can have a better chance of getting the help they might need before they come to someone's attention because they have gotten into trouble somehow.

So, those are the main reasons why I'm doing the study.

Your help with the study would be completely voluntary. What it would involve is you and your teenager each separately filling out a questionnaire. It is anonymous, it takes about 45 minutes to fill out, and most of the questions are multiple choice. It asks about things like the background of your family, and the different kinds of experiences you've had since the divorce or separation, your teenager's mood, and how they deal with different kinds of experiences, and what your relationship with your ex-husband/wife is like. Things like that. I have a questionnaire for each of you because I ask you about different things. If you tell me you're interested in the study, what will happen is that I'll mail you the

questionnaires and you can have a look at them. If you decide you're not interested after all, you just throw them out, and if you decide you are interested, you fill them out as soon as you can. The questionnaires come with what I call privacy envelopes. They're used to seal the questionnaires up as soon as you are done so that your answers will be private. I also give you a prepaid return envelope so that you don't have to pay to get the the surveys back to me.

The surveys are anonymous, so your name doesn't go on them at all. They do have numbers on them, but that's just so I can keep track of how many I send out and how many are returned, and so that I can keep parent and teenager questionnaires matched up. I don't write down which survey goes to which family, so I'd have absolutely no way of knowing which survey was yours, or even if you decided to fill out the surveys.

I also have an answering service that's part of the study. The number is on the questionnaires so that you could call and leave a message for me to call you if you had any questions about anything once you saw the surveys.

The last thing that I need to tell you about is that I'm delighted to send you a summary of the results of the study when it is done. You could let me know if you were interested in this, either by leaving a message with my answering service if you asked for the questionnaires, or if you are sure that you would be interested in the results, you could tell me now, while we are on the phone.

Do you have any questions about anything I've said so far, or any questions you had I haven't answered yet?

(If they say they are interested in the results of the study, tell them I will put them on the list, warn them that it will be about a year before they will hear anything, and tell them to ignore the message on the surveys to leave a message if they want to results.)

(If they haven't already said whether they are interested, say:)

Would you be willing to help me?

(If they say no, thank them for their time, and say good bye.)

(If they are, say:)

Great! I'll be putting the surveys in the mail to you _____. You should get them by _____.

Before I let you go I'd like to confirm your mailing address, and the spelling of your name.

(Do this, and thank them.)

Before I go, I want to tell you again to please don't hesitate to leave a message for me to call you if you have any questions once you see the questionnaires, and that applies to your teenager, too.

Thanks for your time and your interest.

Appendix C

COVERING LETTER INCLUDED WITH SURVEY PACKAGE

Dear Parent and Teenager,

My name is Rebecca Broder. I am a candidate for a Ph.D. in Clinical Psychology at the University of Manitoba. I am conducting a research project with Dr. Gordon Barnes of the Departments of Family Studies and Psychology at the University of Manitoba.

As you may be aware, the reactions of teenagers and their families to the stresses brought about by separation and divorce are matters of public concern. The strengths and weaknesses of each family and its members make the process of dealing with the hurt, and adjusting to the changes stemming from divorce and separation different for everyone. However, very little is known about the experiences of teenagers in separated and divorced families. I am interested in finding out what about teenagers, their families, and their experiences make adjusting to life in a single parent family easier or more difficult for them. This project will provide valuable information which, in general, will help health professionals to more effectively help teenagers and their families to cope with divorce and separation. More specifically, it will help people working with teenagers to know who is at risk for experiencing difficulties adjusting to their parents' divorce or separation so they can be helped before they start showing major problems.

I am looking for parents and their teenaged children. To be in this study, parents must be divorced or separated, and single. They must have a teenaged child between the ages of 14 and 19 who is currently living with the parent who is considering taking part in this study. I am hoping you will both agree to be involved because I am asking each of you to give me different and important information. If only one of you wants to take part, please do not bother, because I need the information supplied by both of you for it to be useful. Whether you choose to take part is completely up to you.

Your help with this study is entirely voluntary for both of you. It would involve each of you initialing the enclosed consent form, and then completing one of the enclosed surveys. The surveys will each take about 45 minutes to complete and include questions on topics such as basic characteristics of your family, your life experiences during the past year, and your general mood and happiness. Please feel free to look at the surveys before deciding whether you will take part.

You are only to initial the consent form. Please do not sign your name and do not put your name anywhere else on the survey. This is to ensure that your answers to the survey will be completely anonymous. I am assuming that if you initial the consent form, you have read this letter, and you have contacted me and have received satisfactory answers to any questions you had about the study. I am also assuming that you are therefore aware of what the study involves, and agree to take part.

If you are willing to take part in this study, please:

1. initial the consent form
2. complete the surveys
3. seal your completed surveys in the privacy envelopes
4. seal these two envelopes and the consent form in the return envelope
5. mail the surveys and consent form to me
6. (optional) if you want to be mailed a summary of the results, and/or want to be invited to be in any follow up project I do, please leave a message with my answering service including your name, address, and why you are providing me with this information.

The results of this study will be presented in group form. You will not be given information about individual scores on the survey.

If you are not interested in this study, are not a member of a single parent family with a teenaged child living at home, or have previously been invited or taken part, please simply throw away the contents of this envelope.

Also, I have given you another letter in a sealed envelope. This letter describes this study and invites whoever reads it to take part. Even if you do not take part, I would greatly appreciate it if you would pass this letter on to a single parent you know who has an adolescent child.

Finally, as a service to all families, I have attached a list of some of the resources available in Manitoba that provide counselling about dealing with separation, divorce or any other difficulty. I have done this because some families, parents, and children end up having difficulty adjusting to

the many changes separation or divorce brings about. . . Often they feel better if they talk about how they are feeling with someone impartial outside of their family.

Getting help is especially important if you or anyone in your family is depressed. It is likely that someone is depressed if they have been either feeling down in the dumps or not enjoying the things they usually enjoy most of the time for at least two weeks and if this mood change occurs along with at least five of the following: notable weight or appetite changes, changes in sleep pattern, changes in activity level, loss of energy, feelings of worthlessness, problems concentrating, or recurrent thoughts of suicide. If you or anyone in your family feels this way, or wants help for any other difficulty, please contact one of the resources listed below.

If you want help in choosing a place to go, please feel free to contact me. Also, if you have any questions, concerns or comments about anything related to this project, please call 943-8641 and leave a message for me, Rebecca Broder. I will return your call as soon as I can.

Thank you for your help and cooperation.

Sincerely,

Rebecca Broder, M.A.

Gordon Barnes, Ph.D.

Places to go for help in Winnipeg

- Beginning Experience
-Support group for separated, divorced individuals.
256-1151 (24 hr answering service)
820 Cottonwood Rd.
- *Child & Family Services of Central Winnipeg
Logan 944-4190
Redboine 944-4210
Sargent Park 944-4230
Broadway 944-4170
- *Child & Family Services-East
St. Anne's 944-4286
Windsor Park-Southdale 944-4265
St. Boniface-Norwood 944-4268
- *Child & Family Services of Winnipeg West
Assiniboia 944-4475
Charleswood 944-4495
St. James 944-4477
- Children's Home of Winnipeg
-Provides individual & family therapy, family & parent support.
400-777 Portage Ave.
786-7051
- Children's Hospital-Child & Adolescent Psychiatry Service
-Provides individual child & family therapy.
331-685 William Ave.
787-3873
- Community of Separated & Divorced
-Self-help group for separated, divorced people
255 Stafford St.
474-2351
- Community Resource Clinic
-Provides individual, & family counselling.
301-321 McDermott
956-6560
- Family Services of Winnipeg
-Provides individual & family counselling
400-287 Broadway
947-1401
- Health Sciences Centre-Adult Psychiatric Department
-Provides individual adult & family therapy.
697 McDermott
787-3367
- Hope Centre Health Care, Inc.
-Provides individual & family counselling.
240 Powers St.
589-8354
- Indian Family Centre
-Provides individual & family counselling.
470 Selkirk Ave.
586-8393
- Interfaith Pastoral Institute
-Provides individual & family counselling, parenting education.
515 Portage Ave.
786-9251
- Jewish Child & Family Services
-Provides individual & family therapy, parenting education, child welfare services.
2055 McPhillips St.
338-0358
- Klinic-Community Health Centre
-provides 24 hour crisis & suicide phone counselling
786-8686
- Misericordia General Hospital Department of Psychiatry
-provides individual therapy.
99 Cornish Ave.
788-8114
- Mount Carmel Clinic
-provides individual & family therapy.
886 Main St.
582-2311
- *Northwest Child & Family Services
2188 McPhillips 944-4119
80 Satler St. 944-4051
1020 Keewatin St. 944-4099
1386 Main St. 944-4000
- Parents Without Partners
-Provides support to single parents & their children.
P.O. Box 1756
244-0133
- Psychological Service Centre University of Manitoba
-Provides individual child & adult & family therapy.
161 Dafoe Bldg.
474-9222
- St. Boniface General Hospital
-Provides individual child & adult, & family therapy
Outpatient Adult 237-2335
Outpatient Child/Adolescent 237-2690
- Service de Consieller
-Provides individual & family in English & French.
261 Des Murons St.
237-8295
- Teen Touch Inc.
-Provides telephone counselling for teens.
233-0914 (24 hr distress line)
- *Winnipeg South Child & Family Services
River Heights 944-4381
Ft. Rouge 944-4398
Ft. Gary 944-4414

*All listed Child and Family Service agencies provide child welfare services, parenting education courses, support groups for single mothers and children.

Places to go for help outside of Winnipeg

- | | | |
|---|--|---|
| *Anishinabe Child & Family Services
East side-Winnipeg 949-0855
West side-Winnipeg 942-7088
Ashern 1-659-4546 | *Awasis Agency of Northern Manitoba
Island Lake 1-458-2015
The Pas 1-623-7456
Thompson 1-778-4401
Winnipeg 943-3335 | Brandon General Hospital
-Provides individual child & adult, & family therapy
150 McTavish Ave E.
Brandon
1-728-3321 |
| Brandon Mental Health Centre
-Provides individual child & adult, & family therapy
Box 420, 1st St N
Brandon
1-728-7110 | *Child & Family Services of Central Manitoba
Portage La Prairie 1-857-8751
Altona 1-324-1334
Amaranth 1-843-2816
Carman 1-745-6405
Morden 1-822-6247
Treherne 1-723-2170
Winkler 1-325-4889 | *Child & Family Services of Eastern Manitoba
Winnipeg 233-8931
Beausejour 1-268-1571
Oakbank 1-444-2334
St Pierre Jolys 1-433-7254
Steinbach 1-326-9885 |
| *Child & Family Services
-Interlake Regional Office
Selkirk 1-482-4511
Ashern 1-768-2585
Stonewall 1-467-5535
Gimli 1-642-5173 | *Child & Family Services
-Norman Regional Office
The Pas 1-623-6411
Flin Flon 1-687-3457
Grand Rapids 1-639-2363 | *Child & Family Service
-Parkland Regional Office
Birch River 1-236-4321
Dauphin 1-638-7024
Duck Bay 1-524-2176
Roblin 1-937-2151
Ste Rose du Lac 1-447-2010
Swan River 1-734-3436 |
| *Child & Family Service
-Thompson Regional Office
Thompson 1-677-6570
Churchill 1-675-8881
Gillam 1-652-2636
Lynn Lake 1-356-2451
Norway House 1-359-6695 | *Child & Family Service of Western Manitoba
Brandon 1-726-6280
Killarney 1-523-4667
Melita 1-522-3914
Minnedosa 1-867-2219
Neepawa 1-476-2314
Pilot Mound 1-825-2466
Souris 1-483-2161
Virden 1-748-3063 | Eden Mental Health Centre
-Provides therapy to children & families
1500 Pembina Ave.
Winkler
1-325-4325 |
| Family Conciliation
-Provides divorce & separation related mediation & counselling
The Pas 1-623-6411
Thompson 1-677-6497
Brandon 1-726-6189 | Human Resource Centre - Lord Selkirk School Division
-Provides psychological assistance
211 Main St.
Selkirk
1-785-8224 | Kids Help Phone
-Provides counselling for teens & children
1-800-668-6868 |
| Ma-Mow-We-Tak Friendship Centre
-Provides counselling & referral services
122 Hemlock Cr.
Thompson
1-778-7337 | Parents Without Partners
-Provides support to single parents & their children
Box 874
Brandon
1-725-4110 | Thompson General Hospital
-Provides individual child & adult therapy
871 Thompson Dr. S.
Thompson
1-677-5300 |
| *West Region Child & Family Service
38-First Ave NW.
Dauphin
1-638-6941 | Westman Pastoral Institute
-Provides individual & family counselling
10 Victoria Ave. E.
Brandon
1-726-8706 | |

*All listed Child and Family Service agencies provide child welfare services, parenting education courses, support groups for single mothers and children.

Appendix D

LETTER FAMILY WAS ASKED TO GIVE TO A FRIEND

Dear Parent and Teenager,

My name is Rebecca Broder. I am presently a candidate for a Ph.D. in Clinical Psychology at the University of Manitoba. I am conducting a research project with Dr. Gordon Barnes of the Departments of Family Studies and Psychology at the University of Manitoba.

As you may be aware, the reactions of teenagers and their families to divorce are matters of public concern. Divorce and separation are often stressful and upsetting experiences for all family members. It is clear that the strengths and weaknesses of each family and individual member makes adjustment a unique process for each person. However, very little is known about the experiences of teenagers in separated and divorced families. I am interested in finding out what characteristics of teenagers, their families, and their experiences make adjusting to life in a single parent family easier or more difficult for teenagers. This project will provide valuable information which, in general, will help health professionals to more effectively help teenagers and their families to cope with divorce. More specifically, it will help people working with teenagers to identify teenagers who are at risk for experiencing difficulties adjusting to their parents' divorce or separation before they start showing major problems.

The friend of yours who gave you this letter was helping me with this research by passing this letter on to a family they knew who they thought might be interested in taking part.

I am looking for parents and their teenaged children. To be in this study, parents must be divorced or separated, and single (i.e., in other words, not remarried, or living as married with a new partner). They must have a teenaged child between the ages of 14 and 19 who is currently living with the parent who is considering taking part in this study. I am hoping you will both agree to be involved because I am asking each of you to give me different and important information. If only one of you wants to take part, please do not bother, because I will not be able to use the information supplied by just one of you.

Your help with this study would involve each of you completing a self-report survey. They will each take about 45 minutes to complete and include questions on topics such as basic characteristics of your family, your life experiences during the past year, and your general mood and happiness. Your answers to these surveys will be completely confidential and anonymous.

If you are interested in taking part in this study, or want to find out more about it before you make up your mind, and are a member of a single parent divorced family with a child between the ages of 14 and 19 who is living at home, please call me, Rebecca Broder, at 943-8641. Leave a message including your name, address and postal code, and I will mail you a copy of the survey as soon as I can. The phone number I have given you is a 24 hour, 7 day answering service, so I will be sure to get your message.

Also, as a service to all families, I have attached a list of some of the resources available in Manitoba that provide counselling about dealing with separation, divorce or any other difficulty. I have done this because some families, parents, and children end up having difficulty adjusting to the many changes separation or divorce brings about. Often they feel better if they talk about how they are feeling with someone impartial outside of their family.

Thank you for your help and cooperation.

Sincerely,

Rebecca Broder, M.A.

Gordon Barnes, Ph.D.

Places to go for help in Winnipeg

Beginning Experience
-Support group for separated,
divorced individuals.
256-1151 (24 hr answering
service)
820 Cottonwood Rd.

*Child & Family Services of
Central Winnipeg
Logan 944-4190
Redboine 944-4210
Sargent Park 944-4230
Broadway 944-4170

*Child & Family Services-East
St. Anne's 944-4286
Windsor Park-Southdale 944-4265
St. Boniface-Norwood 944-4268

*Child & Family Services of
Winnipeg West
Assiniboia 944-4475
Charleswood 944-4495
St. James 944-4477

Children's Home of Winnipeg
-Provides individual & family
therapy, family & parent
support.
400-777 Portage Ave.
786-7051

Children's Hospital-Child &
Adolescent Psychiatry Service
-Provides individual child &
family therapy.
331-685 William Ave.
787-3873

Community of Separated &
Divorced
-Self-help group for
separated, divorced people
255 Stafford St.
474-2351

Community Resource Clinic
-Provides individual, &
family counselling.
301-321 McDermott
956-6560

Family Services of Winnipeg
-Provides individual & family
counselling
400-287 Broadway
947-1401

Health Sciences Centre-Adult
Psychiatric Department
-Provides individual adult &
family therapy.
697 McDermott
787-3367

Hope Centre Health Care, Inc.
-Provides individual & family
counselling.
240 Powers St.
589-8354

Indian Family Centre
-Provides individual & family
counselling.
470 Selkirk Ave.
586-8393

Interfaith Pastoral Institute
-Provides individual & family
counselling, parenting
education.
515 Portage Ave.
786-9251

Jewish Child & Family Services
-Provides individual & family
therapy, parenting education,
child welfare services.
2055 McPhillips St.
338-0358

Klinik-Community Health Centre
-provides 24 hour crisis &
suicide phone counselling
786-8686

Misericordia General Hospital
Department of Psychiatry
-provides individual therapy.
99 Cornish Ave.
788-8114

Mount Carmel Clinic
-provides individual & family
therapy.
886 Main St.
582-2311

*Northwest Child & Family
Services
2188 McPhillips 944-4119
80 Satler St. 944-4051
1030 Keewatin St. 944-4099
1386 Main St. 944-4000

Parents Without Partners
-Provides support to single
parents & their children.
P.O. Box 1756
244-0133

Psychological Service Centre
University of Manitoba
-Provides individual child &
adult & family therapy.
161 Dafoe Bldg.
474-9222

St. Boniface General Hospital
-Provides individual child &
adult, & family therapy
Outpatient Adult 237-2335
Outpatient Child/
Adolescent 237-2690

Service de Consieller
-Provides individual & family
in English & French.
261 Des Murons St.
237-8295

Teen Touch Inc.
-Provides telephone counselling
for teens.
233-0914 (24 hr distress
line)

*Winnipeg South Child & Family
Services
River Heights 944-4381
Ft. Rouge 944-4398
Ft. Gary 944-4414

*All listed Child and Family Service agencies provide child welfare services, parenting education courses, support groups for single mothers and children.

Places to go for help outside of Winnipeg

- | | | |
|--|---|--|
| <p>*Anishinabe Child & Family Services
 East side-Winnipeg 949-0855
 West side-Winnipeg 942-7088
 Ashern 1-659-4546</p> | <p>*Awasis Agency of Northern Manitoba
 Island Lake 1-458-2015
 The Pas 1-623-7456
 Thompson 1-778-4401
 Winnipeg 943-3335</p> | <p>Brandon General Hospital
 -Provides individual child & adult, & family therapy
 150 McTavish Ave E.
 Brandon
 1-728-3321</p> |
| <p>Brandon Mental Health Centre
 -Provides individual child & adult, & family therapy
 Box 420, 1st St N
 Brandon
 1-728-7110</p> | <p>*Child & Family Services of Central Manitoba
 Portage La Prairie 1-857-8751
 Altona 1-324-1334
 Amaranth 1-843-2816
 Carman 1-745-6405
 Morden 1-822-6247
 Treherne 1-723-2170
 Winkler 1-325-4889</p> | <p>*Child & Family Services of Eastern Manitoba
 Winnipeg 233-8931
 Beausejour 1-268-1571
 Oakbank 1-444-2334
 St Pierre Jolys 1-433-7254
 Steinbach 1-326-9885</p> |
| <p>*Child & Family Services
 -Interlake Regional Office
 Selkirk 1-482-4511
 Ashern 1-768-2585
 Stonewall 1-467-5535
 Gimli 1-642-5173</p> | <p>*Child & Family Services
 -Norman Regional Office
 The Pas 1-623-6411
 Flin Flon 1-687-3457
 Grand Rapids 1-639-2363</p> | <p>*Child & Family Service
 -Parkland Regional Office
 Birch River 1-236-4321
 Dauphin 1-638-7024
 Duck Bay 1-524-2176
 Roblin 1-937-2151
 Ste Rose du Lac 1-447-2010
 Swan River 1-734-3436</p> |
| <p>*Child & Family Service
 -Thompson Regional Office
 Thompson 1-677-6570
 Churchill 1-675-8881
 Gillam 1-652-2636
 Lynn Lake 1-356-2451
 Norway House 1-359-6695</p> | <p>*Child & Family Service of Western Manitoba
 Brandon 1-726-6280
 Killarney 1-523-4667
 Melita 1-522-3914
 Minnedosa 1-867-2219
 Neepawa 1-476-2314
 Pilot Mound 1-825-2466
 Souris 1-483-2161
 Virden 1-748-3063</p> | <p>Eden Mental Health Centre
 -Provides therapy to children & families
 1500 Pembina Ave.
 Winkler
 1-325-4325</p> |
| <p>Family Conciliation
 -Provides divorce & separation related mediation & counselling
 The Pas 1-623-6411
 Thompson 1-677-6497
 Brandon 1-726-6189</p> | <p>Human Resource Centre - Lord Selkirk School Division
 -Provides psychological assistance
 211 Main St.
 Selkirk
 1-785-8224</p> | <p>Kids Help Phone
 -Provides counselling for teens & children
 1-800-668-6868</p> |
| <p>Ma-Mow-We-Tak Friendship Centre
 -Provides counselling & referral services
 122 Hemlock Cr.
 Thompson
 1-778-7337</p> | <p>Parents Without Partners
 -Provides support to single parents & their children
 Box 874
 Brandon
 1-725-4110</p> | <p>Thompson General Hospital
 -Provides individual child & adult therapy
 871 Thompson Dr. S.
 Thompson
 1-677-5300</p> |
| <p>*West Region Child & Family Service
 38-First Ave NW.
 Dauphin
 1-638-6941</p> | <p>Westman Pastoral Institute
 -Provides individual & family counselling
 10 Victoria Ave. E.
 Brandon
 1-726-8706</p> | |

*All listed Child and Family Service agencies provide child welfare services, parenting education courses, support groups for single mothers and children.

Appendix E
CONSENT FORM

FAMILY CONSENT FORM

To be completed by all participating teenagers:

I understand that I will be taking part in a project studying what makes it easier and harder for families to adjust to divorce. All of my questions about this study have been answered to my satisfaction. I understand that my participation in this project is totally voluntary, and I may decide to withdraw at any time.

teenager's initials _____ today's date _____

(Please fill in your initials only. Do not sign your full name.)

To be completed by all participating parents:

I agree to take part and to allow my child, (Fill in child's initials only. Do not fill in the child's name) _____, to take part in this research project. I understand that its purpose is to study what makes it easier and harder for families to adjust to divorce. All of my questions about this study have been answered to my satisfaction. I understand that our participation is totally voluntary, and I or my child may decide to withdraw at any time.

parent's initials _____ today's date _____

(Please fill in your initials only. Do not sign your name.)

Appendix F
PARENT SURVEY

PARENT QUESTIONNAIRE

Dear Parent,

Thank you for agreeing to take part in this research project. This survey will ask you to describe yourself, and your family. It will take you about 45 minutes to complete. Please find a quiet, private place where you will not be disturbed. It is important that you fill out the whole survey at one time.

There are no right or wrong answers to any of the questions, so just give the answers that best describe you and your family. If you are unsure about the meaning of any of the items or choices, have any concerns about your participation in this study, or your reactions to it, or any other issue related to this project, please telephone me, Rebecca Broder, at 943-8641. This is a 24 hour, 7 day answering service. If you leave your name and phone number, I will return your call as soon as I can.

Your answers to this survey are to be private, so DO NOT SHOW ANYONE YOUR ANSWERS. Please seal your questionnaire in the privacy envelope marked "Parent" as soon as you have finished, without showing it to anyone. Please do not write your name anywhere on the questionnaire, or on the return envelope.

You are free to change your mind about taking part in this study at any time, and you do not have to complete this questionnaire. If you find that you do not want to answer some of the questions, just leave them out.

Again, thank you for taking the time to be in this study.

PART 1

Please describe the following characteristics about yourself.

1. Gender (check one): (1) male (2) female
2. Age (please fill in): _____ years.
3. Date of birth (please fill in): Day _____ Month _____ Year _____
4. Current marital status (check one):
 - (1) Never married
 - (2) Married
 - (3) Equivalent of married
 - (4) Divorced
 - (5) Separated
 - (6) Married (or the equivalent), but divorced or separated before
 - (7) Widowed
 - (8) Other (please explain) _____
5. What is your current employment status? (check one)
 - (1) Employed full-time
 - (2) Employed part-time
 - (3) Unemployed
 - (4) Student
6. What is your occupation? (check one)
 - (1) Professional, technical
 - (2) Clerical, sales, services
 - (3) Semi-skilled, unskilled labor
 - (4) Homemaker
 - (5) Not employed
7. In your most recent job, what is/was your title? (please fill in).

8. What is the highest grade you attended in school or degree you received? (check one)
 - (1) Less than Grade 9
 - (2) Grade 9 completed
 - (3) Some high school
 - (4) High school completed
 - (5) Some college or university
 - (6) A technical diploma
 - (7) University graduate
 - (8) Some post-graduate work
 - (9) Master's Degree or Doctorate
 - (10) Professional degree
9. What was your total income including child support from your ex-spouse for the past year (that is, total income before taxes, including wages, welfare income, farm income, interest, dividends)? (check one)
 - (1) Under \$5,000
 - (2) \$5,000 to \$9,999
 - (3) \$10,000 to \$14,999
 - (4) \$15,000 to \$19,999
 - (5) \$20,000 to \$24,999
 - (6) \$25,000 to \$34,999
 - (7) \$35,000 to \$44,999
 - (8) over \$45,000
 - (9) Don't know
10. What is your religious preference? (check one).
 - (1) Catholic
 - (2) Jewish
 - (3) Protestant (please describe denomination)

 - (4) Other (please specify) _____
 - (5) None
11. When you were growing up, what was the language used most often in your home? (check one)
 - (1) English
 - (2) French
 - (3) German
 - (4) Ukrainian
 - (5) Other (please specify) _____

12. What is the language used most often in your home now? (check one)
- | | |
|---|--|
| <input type="checkbox"/> (1) English | <input type="checkbox"/> (2) French |
| <input type="checkbox"/> (3) German | <input type="checkbox"/> (4) Ukrainian |
| <input type="checkbox"/> (5) Other (please specify) _____ | |
13. In what country were you born? (please fill in)
- _____
14. In what country were your children born? (please fill in)
- _____
15. To what ethnic or cultural group do you feel you belong? (check one)
- | | |
|--|---|
| <input type="checkbox"/> (1) Asian | <input type="checkbox"/> (2) British |
| <input type="checkbox"/> (3) Dutch | <input type="checkbox"/> (4) French |
| <input type="checkbox"/> (5) German | <input type="checkbox"/> (6) Italian |
| <input type="checkbox"/> (7) Jewish | <input type="checkbox"/> (8) Native |
| <input type="checkbox"/> (9) Scandinavian | <input type="checkbox"/> (10) Ukrainian |
| <input type="checkbox"/> (11) Other (please specify) _____ | |
16. What racial category would you consider yourself? (check one)
- | | |
|---|------------------------------------|
| <input type="checkbox"/> (1) Asian | <input type="checkbox"/> (2) Black |
| <input type="checkbox"/> (3) Native or Metis | <input type="checkbox"/> (4) White |
| <input type="checkbox"/> (5) Other (please specify) _____ | |

PART 2

Please describe the following characteristics of your family.

1. Please describe the other members of your household besides yourself:

Relationship to Yourself	Age	Date of Birth			Gender	
		Day	Month	Year	Male	Female
_____	_____	Day _____	Month _____	Year _____	<input type="checkbox"/> (1)	<input type="checkbox"/> (2)
_____	_____	Day _____	Month _____	Year _____	<input type="checkbox"/> (1)	<input type="checkbox"/> (2)
_____	_____	Day _____	Month _____	Year _____	<input type="checkbox"/> (1)	<input type="checkbox"/> (2)
_____	_____	Day _____	Month _____	Year _____	<input type="checkbox"/> (1)	<input type="checkbox"/> (2)
_____	_____	Day _____	Month _____	Year _____	<input type="checkbox"/> (1)	<input type="checkbox"/> (2)
_____	_____	Day _____	Month _____	Year _____	<input type="checkbox"/> (1)	<input type="checkbox"/> (2)
_____	_____	Day _____	Month _____	Year _____	<input type="checkbox"/> (1)	<input type="checkbox"/> (2)
_____	_____	Day _____	Month _____	Year _____	<input type="checkbox"/> (1)	<input type="checkbox"/> (2)
_____	_____	Day _____	Month _____	Year _____	<input type="checkbox"/> (1)	<input type="checkbox"/> (2)

2. Please describe the child who is taking part in this research project.

Relationship to Yourself	Age	Date of Birth			Gender	
		Day	Month	Year	Male	Female
_____	_____	Day _____	Month _____	Year _____	<input type="checkbox"/> (1)	<input type="checkbox"/> (2)

3. Is the child who is taking part in this research project currently living with you? (check one)

(1) Yes (2) No

4. Is the child who is taking part in this research project adopted? (check one)

___ (1) Yes ___ (2) No

5. Did the child who is taking part in this research project show any behavioral or mental health problems (such as aggressiveness, delinquency, severe anxiety, depression) before the end of your marriage? (check one).

___ (1) Yes ___ (2) No

6. Has the child who is taking part in this research project shown any behavioral or mental health problems since the end of your marriage? (check one)

___ (1) Yes ___ (2) No

7. Did anyone in your family (that is, yourself, your children, your ex-spouse) see a counsellor or therapist before the end of your marriage? (check one for each family member)

	(1) Yes	(2) No	(3) Don't know
Self	___	___	___
One or more of of children	___	___	___
Ex-spouse	___	___	___
Family as a whole	___	___	___

8. Has anyone in your family seen a counselor or therapist since the end of your marriage? (check one for each family member)

	(1) Yes	(2) No	(3) Don't know
Self	___	___	___
One or more of of children	___	___	___
Ex-spouse	___	___	___
Family as a whole	___	___	___

9. Have you ever been depressed (that is sad, down in the dumps, tearful, don't care, feel worthless, want to die) for two weeks or longer? (please check)

___ (1) Yes ___ (0) No

10. If you answered "yes" to #9, did you ever experience or do any of the following while you were depressed? (check one for each choice)

saw a psychiatrist or therapist	___ (1) Yes	___ (0) No
had electroconvulsive therapy	___ (1) Yes	___ (0) No
took antidepressant medication	___ (1) Yes	___ (0) No
was hospitalized	___ (1) Yes	___ (0) No
made a suicide attempt	___ (1) Yes	___ (0) No
had problems in school, work, marriage or friendships	___ (1) Yes	___ (0) No

11. As far as you know, were either of your biological parents (that is your real parents, NOT your foster, adoptive or step parents) ever depressed? (check one)

___ (1) Mother ___ (2) Father ___ (3) Both ___ (0) Neither ___ (4) Don't know

12. If one or both of your parents were ever depressed, as far as you know, have either of them ever experienced or done any of the following while they were depressed? (check one for each choice)

	Mother	Father	Both	Neither
saw a psychiatrist or therapist	___ (1)	___ (2)	___ (3)	___ (0)
had electroconvulsive therapy	___ (1)	___ (2)	___ (3)	___ (0)
took antidepressant medication	___ (1)	___ (2)	___ (3)	___ (0)
was hospitalized	___ (1)	___ (2)	___ (3)	___ (0)
made a suicide attempt	___ (1)	___ (2)	___ (3)	___ (0)
had problems in school, work, marriage or friendships	___ (1)	___ (2)	___ (3)	___ (0)

13. How many children did you have with your ex-spouse? (please fill in number)
- _____ children
14. How many real (biological) brothers and sisters do you have? (please fill in number)
- _____ brothers and sisters
15. How many biological aunts and uncles (that is, brothers and sisters of your father and mother NOT their spouses) do you have? (please fill in number)
- _____ aunts and uncles
16. What is the total number of relatives have you listed in questions 13, 14 and 15? (please fill in the total)
- _____ relatives
17. As far as you know, how many of your children, brothers, sisters, aunts and uncles have ever been depressed (that is sad, down in the dumps, tearful, don't care, feel worthless, want to die) for two weeks or longer? (please fill in number)
- _____ number ever depressed
- _____ number don't know
- _____ number never depressed
18. If any of these children, brothers, sisters, aunts or uncles have ever been depressed, did they ever experience or do any of the following while they were depressed? (please fill in number for each experience)
- | | number
experienced | number
don't know | number never
experienced |
|--|-----------------------|----------------------|-----------------------------|
| saw a psychiatrist or therapist | _____ | _____ | _____ |
| had electroconvulsive therapy | _____ | _____ | _____ |
| took antidepressant medication | _____ | _____ | _____ |
| was hospitalized | _____ | _____ | _____ |
| made a suicide attempt | _____ | _____ | _____ |
| had problems in school, work, marriage or friendship | _____ | _____ | _____ |
19. As far as you know, were either of your ex-spouse's biological parents (that is your ex-spouse's real parents, NOT your foster, adoptive or step parents) ever depressed? (check one)
- ___(1) Mother ___(2) Father ___(3) Both ___(0) Neither ___(4) Don't know
20. If one or both of your ex-spouse's parents were ever depressed, as far as you know, have either of them ever experienced or done any of the following while they were depressed? (check one for each choice)
- | | Mother | Father | Both | Neither |
|---|--------|--------|--------|---------|
| saw a psychiatrist or therapist | ___(1) | ___(2) | ___(3) | ___(0) |
| had electroconvulsive therapy | ___(1) | ___(2) | ___(3) | ___(0) |
| took antidepressant medication | ___(1) | ___(2) | ___(3) | ___(0) |
| was hospitalized | ___(1) | ___(2) | ___(3) | ___(0) |
| made a suicide attempt | ___(1) | ___(2) | ___(3) | ___(0) |
| had problems in school, work, marriage or friendships | ___(1) | ___(2) | ___(3) | ___(0) |

21. How many real (biological) brothers and sisters does your ex-spouse have? (please fill in number)

_____ brothers and sisters

22. How many biological aunts and uncles (that is, brothers and sisters of your ex-spouse's father and mother NOT their spouses) does your ex-spouse have? (please fill in number)

_____ aunts and uncles

23. What is the total number of brothers, sisters, aunts and uncles you listed for your ex-spouse in questions 22 and 23 above? (please list total)

_____ relatives

24. As far as you know, how many of these brothers, sisters, aunts and uncles have ever been depressed (that is sad, down in the dumps, tearful, don't care, feel worthless, want to die) most or all of the time for two weeks or longer? (please fill in number)

_____ number ever depressed

_____ number don't know

_____ number never experienced

25. If any of your ex-spouse's biological brothers, sisters, aunts or uncles have ever been depressed, as far as you know, how many of them have ever experienced or done any of the following while they were depressed? (please fill in number for each)

	number experienced	number don't know	number never experienced
saw a psychiatrist or therapist	_____	_____	_____
had electroconvulsive therapy	_____	_____	_____
took antidepressant medication	_____	_____	_____
was hospitalized	_____	_____	_____
made a suicide attempt	_____	_____	_____
had problems in school, work, marriage or friendship	_____	_____	_____

PART 3

Please describe the following characteristics of your divorce or separation:

1. For how many years were you and your ex-spouse married prior to your separation? (please fill in)

_____ years.

2. Number of years since you and your ex-spouse decided to separate (please fill in)

_____ years.

3. If you are divorced, number of years since your divorce (please fill in)

_____ years.

4. What is your current custody arrangement? (check one)

- (1) I have custody
 (2) My ex-spouse has custody
 (3) Joint custody
 (4) Not yet decided
 (5) I have custody, but this is being challenged
 (6) My ex-spouse has custody, but I am challenging this
 (7) Other (please explain) _____

5. What is your current arrangement about how often your ex-spouse may see your children? (check one)

- (1) No limits placed on visits
 (2) Frequency of visits limited in custody agreement
 (3) Only supervised visits allowed in custody agreement
 (4) No contact allowed
 (5) Other (please explain) _____

6. How often does your ex-spouse usually see your children? (check one)

- (1) Daily
 (3) 1 to 2 times a WEEK
 (5) Every other MONTH
 (7) Once a YEAR
 (9) Never
 (2) 3 to 6 times a WEEK
 (4) 1 to 2 times a MONTH
 (6) 2 to 3 times a YEAR
 (8) Less often

7. How often do you usually have contact with your ex-spouse? (check one)

- (1) Daily
 (3) 1 to 2 times a WEEK
 (5) Every other MONTH
 (7) Once a YEAR
 (9) Never
 (2) 3 to 6 times a WEEK
 (4) 1 to 2 times a MONTH
 (6) 2 to 3 times a YEAR
 (8) Less often

8. According to your divorce or separation agreement, should you be receiving child support payments from your ex-spouse? (check one)

- (1) Yes (2) No (3) Not applicable

9. If you answered "yes" to #8 above, according to your divorce or separation agreement, what is the amount of child support you should receive yearly from your ex-spouse? (check one).

- (1) None
 (3) \$2,500 to \$4,999
 (5) \$10,000 to \$14,999
 (7) \$20,000 to \$24,999
 (9) over \$35,000
 (2) Under \$2,500
 (4) \$5,000 to \$9,999
 (6) \$15,000 to \$19,999
 (8) \$25,000 to \$34,999
 (10) other (please explain)

10. What was your actual income from child support from your ex-spouse for the past year? (check one)

- (1) No child support received
 (3) \$2,500 to \$4,999
 (5) \$10,000 to \$14,999
 (7) \$20,000 to \$24,999
 (9) over \$35,000
 (2) Under \$2,500
 (4) \$5,000 to \$9,999
 (6) \$15,000 to \$19,999
 (8) \$25,000 to \$34,999
 (10) other (please explain)

11. Who wanted your marriage to end? (check one)

- (1) I did (2) My ex-spouse did (3) We both did

12. What best explains the reasons for the end of your marriage? (check as many as apply)

- (1) We had unresolvable differences (2) Alcohol/drug abuse
 (3) We just stopped loving each other (4) Unfaithfulness
 (5) Physical/sexual abuse (6) Other (please explain)
-
-

PART 4

For the following questions, circle "one" (1) if the answer is almost never; circle "two" (2) if the answer is some of the time; circle "three" (3) if the answer is much of the time; and circle "four" (4) if the answer is almost always.

	Never	Some of the time	Much of the time	Almost always
1. Do you feel friendly toward your former spouse?	1	2	3	4
2. Do your children feel friendly toward your former spouse?	1	2	3	4
3. Are gifts to the children a problem between you and your former spouse?	1	2	3	4
4. Is visitation a problem between you and your former spouse?	1	2	3	4
5. Do you have friendly talks with your former spouse?	1	2	3	4
6. Is your former spouse a good parent?	1	2	3	4
7. Do your children see your former spouse as often as you would like?	1	2	3	4
8. Do your children see your former spouse as often as he would like?	1	2	3	4
9. Do you and your former spouse agree on discipline for the children?	1	2	3	4
10. Are your children harder to handle after a visit with your former spouse?	1	2	3	4
11. Do you and your former spouse disagree in front of the children?	1	2	3	4
12. Do the children take sides in disagreements between you and your former spouse?	1	2	3	4
13. Are alimony or child support payments a problem between you and your former spouse?	1	2	3	4
14. Do your children feel hostile toward your former spouse?	1	2	3	4
15. Does your former spouse say things about you to the children that you don't want them to hear?	1	2	3	4
16. Do you say things about your former spouse to the children that he wouldn't want them to hear?	1	2	3	4
17. Do you have angry disagreements with your former spouse?	1	2	3	4

	Never	Some of the time	Much of the time	Almost always
18. Do you feel hostile toward your former spouse?	1	2	3	4
19. Does your former spouse feel hostile toward you?	1	2	3	4
20. Can you talk to your former spouse about problems with the children?	1	2	3	4
21. Do you have a friendly divorce or separation?	1	2	3	4
22. Are pick-ups and drop-offs of the children between you and your former spouse a difficult time?	1	2	3	4
23. Does your spouse encourage your child to live with him or her?	1	2	3	4
24. Have you adjusted to being divorced or separated from your former spouse?	1	2	3	4
25. Has your former spouse adjusted to being separated or divorced from you?	1	2	3	4

PART 5

Rate each of the items below on a scale of 1 (not characteristic or typical of your child) to 5 (very characteristic or typical of your child)

	Not typical				Very typical
1. (S)he likes to be with people.	1	2	3	4	5
2. (S)he usually seems to be in a hurry.	1	2	3	4	5
3. (S)he is easily frightened.	1	2	3	4	5
4. (S)he frequently gets distressed.	1	2	3	4	5
5. When displeased, (s)he lets people know right away.	1	2	3	4	5
6. (S)he is something of a loner.	1	2	3	4	5
7. (S)he likes to keep busy all the time.	1	2	3	4	5
8. (S)he is known as hotblooded and quick-tempered.	1	2	3	4	5
9. (S)he often feels frustrated.	1	2	3	4	5
10. His/her life is fast paced.	1	2	3	4	5
11. Everyday events make him/her troubled and fretful.	1	2	3	4	5
12. (S)he often feels insecure.	1	2	3	4	5
13. There are many things that annoy him/her.	1	2	3	4	5
14. When (s)he gets scared (s)he panics.	1	2	3	4	5

	Not typical				Very typical
15. (S)he prefers working with others rather than alone.	1	2	3	4	5
16. (S)he gets emotionally upset easily.	1	2	3	4	5
17. (S)he often feels as if bursting with energy.	1	2	3	4	5
18. It takes a lot to make him/her mad.	1	2	3	4	5
19. (S)he has fewer fears than most people.	1	2	3	4	5
20. (S)he finds people more stimulating than anything else.	1	2	3	4	5

PART 6

1. How did you hear about this study? (please check one)
- (1) through Beginning Experience
 - (2) through Parents without Partners
 - (3) through a classified ad in the Free Press
 - (4) through an ad in the Sunday community insert in the Free Press
 - (5) through a classified ad in the Winnipeg Sun
 - (6) through a letter given to me by a friend
 - (7) through Community of Separated and Divorced
 - (8) through the Adventures newsletter
 - (9) through an ad in The Lance, The Metro I, The Times or The Harold
 - (10) through a letter sent directly to me by the researcher
 - (11) through some other source (please explain)
-

PLEASE GO ON TO THE LAST PAGE.

I am interested in any feedback you have for me about this survey and your reactions to taking part in it.

Please use the space below to make any comments.

REMINDER:

If you would like to receive a written summary of the study's results when it is finished, and/or if you are willing to allow me to contact you at some time in the future to see if you would be willing to be in a follow-up study, please call my answering service (_____) and leave your name, address, and telephone number along with a message telling me whether you want feedback, information about any follow up study, or both. If you DO NOT want information on the results of the study, and do not want to be contacted by the researcher in the future, simply do not provide me with your name and address.

PLEASE IMMEDIATELY SEAL YOUR COMPLETED SURVEY IN THE ENVELOPE MARKED "PARENT". DO NOT SHOW IT TO ANYONE. USE THE PRE-ADDRESSED, STAMPED RETURN ENVELOPE TO MAIL YOUR SURVEY AND YOUR CHILD'S SURVEY BACK TO THE RESEARCHER. THANK YOU.

Appendix G
ADOLESCENT SURVEY

ADOLESCENT QUESTIONNAIRE

Dear Adolescent Participant,

This survey will ask you questions about yourself, your family, and how you feel about your life right now. It will take you about 45 minutes to complete. Please find a quiet, private place where you will not be bothered by anyone. It is important that you fill out the whole survey at one time.

I am interested in your feelings and opinions. There are no right or wrong answers to any of the questions, so just give the answers that fit best for you. If you have any questions about anything on the survey, have any concerns about your being in this study, or how it makes you feel, or anything else about the study, please telephone me, Rebecca Broder, at 943-8641. This is a 24 hour, 7 day answering service. If you leave your name and phone number, I will return your call to answer your question as soon as I can. Do not ask your parent to answer your questions. Instead, please call me at the phone number listed above.

Your answers to this survey are to be private, so DO NOT SHOW ANYONE YOUR ANSWERS including your parent. Please seal your questionnaire in the privacy envelope marked "Teenager" AS SOON AS YOU HAVE FINISHED, without showing it to anyone. Please do not write your name anywhere on the questionnaire, or on the return envelope.

You are free to change your mind about taking part in this study at any time, and you do not have to complete this survey. If you find that you do not want to answer some of these questions, just leave those ones out.

Thank you for taking the time to be in this study.

PART 1

Please describe the following characteristics about yourself:

1. Gender (check one): _____ (1) Male _____ (2) Female
2. Age (please fill in): _____ years.
3. Date of birth (please fill in): Day _____ Month _____ Year _____
4. What was the last year of school you finished? (check one)

_____ (1) Less than Grade 7	_____ (2) Grade 7
_____ (3) Grade 8	_____ (4) Grade 9
_____ (5) Grade 10	_____ (6) Grade 11
_____ (7) Grade 12	_____ (8) First year of university or college
_____ (9) Other (Please explain) _____	
5. Are you a student at school this year? (check one)

_____ (1) Yes	_____ (2) No
---------------	--------------
6. If you are a student, what grade are you in this year? (check one)

_____ (1) Less than Grade 7	_____ (2) Grade 7
_____ (3) Grade 8	_____ (4) Grade 9
_____ (5) Grade 10	_____ (6) Grade 11
_____ (7) Grade 12	_____ (8) First year of university or college
_____ (9) Other (Please explain) _____	
7. What is your employment status? (check one)

_____ (1) Employed full-time	_____ (2) Employed part-time
_____ (3) Unemployed	_____ (4) Student
8. How many friends (not including members of your immediate family) would you say you have who truly love and value you, to whom you feel you could turn to for help if you needed to? (please fill in number)

_____ friends.

PART 2

Instructions: Below is a list of the ways you might have felt or acted. Please circle the number telling how often you have felt or acted this way during the PAST WEEK.

	Rarely or none of the time (less than 1 day)	Some or a little of the time (1 to 2 days)	Occasionally or a medium amount of the time (3 to 4 days)	Most or all of the time (5 to 7 days)
1. I was bothered by things that usually don't bother me.	0	1	2	3
2. I did not feel like eating; my appetite was poor.	0	1	2	3
3. I felt that I could not shake off the blues even with help from my family or friends.	0	1	2	3
4. I felt I was just as good as other people.	0	1	2	3

	Rarely or none of the time (less than 1 day)	Some or a little of the time (1 to 2 days)	Occasionally or a medium amount of the time (3 to 4 days)	Most or all of the time (5 to 7 days)
5. I had trouble keeping my mind on what I was doing.	0	1	2	3
6. I felt depressed.	0	1	2	3
7. I felt that everything I did was an effort.	0	1	2	3
8. I felt hopeful about the future.	0	1	2	3
9. I thought my life had been a failure.	0	1	2	3
10. I felt fearful.	0	1	2	3
11. My sleep was restless.	0	1	2	3
12. I was happy.	0	1	2	3
13. I talked less than usual.	0	1	2	3
14. I felt lonely.	0	1	2	3
15. People were unfriendly.	0	1	2	3
16. I enjoyed life.	0	1	2	3
17. I had crying spells.	0	1	2	3
18. I felt sad.	0	1	2	3
19. I felt that people dislike me.	0	1	2	3
20. I could not get "going".	0	1	2	3

PART 3

Directions: The statements which follow refer to feelings and experiences which occur to most people at one time or another in their relationships with friends. For each statement there are three possible answers: Yes, No, Don't know. Please circle the number above the answer you choose for each item.

- | | |
|----------------------------------|---|
| 1 2 3
Yes No Don't know | 1. My friends give me the moral support I need. |
| 1 2 3
Yes No Don't know | 2. Most other people are closer to their friends than I am. |
| 1 2 3
Yes No Don't know | 3. My friends enjoy hearing about what I think. |
| 1 2 3
Yes No Don't know | 4. Certain friends come to me when they have problems or need advice. |
| 1 2 3
Yes No Don't know | 5. I rely on my friends for emotional support. |
| 1 2 3
Yes No Don't know | 6. If I felt that one or more of my friends were upset with me, I'd just keep it to myself. |
| 1 2 3
Yes No Don't know | 7. I feel that I'm on the fringe in my circle of friends. |
| 1 2 3
Yes No Don't know | 8. There is a friend I could go to if I were just feeling down, without feeling funny about it later. |

- | | | | |
|-----|----|------------|---|
| 1 | 2 | 3 | |
| Yes | No | Don't know | 9. My friends and I are very open about what we think about things. |
| 1 | 2 | 3 | |
| Yes | No | Don't know | 10. My friends are sensitive to my personal needs. |
| 1 | 2 | 3 | |
| Yes | No | Don't know | 11. My friends come to me for emotional support. |
| 1 | 2 | 3 | |
| Yes | No | Don't know | 12. My friends are good at helping me to solve problems. |
| 1 | 2 | 3 | |
| Yes | No | Don't know | 13. I have a deep sharing relationship with a number of friends. |
| 1 | 2 | 3 | |
| Yes | No | Don't know | 14. My friends get good ideas about how to do things or make things from me. |
| 1 | 2 | 3 | |
| Yes | No | Don't know | 15. When I confide in friends, it makes me feel uncomfortable. |
| 1 | 2 | 3 | |
| Yes | No | Don't know | 16. My friends seek me out for companionship. |
| 1 | 2 | 3 | |
| Yes | No | Don't know | 17. I think that my friends feel that I'm good at helping them solve problems. |
| 1 | 2 | 3 | |
| Yes | No | Don't know | 18. I don't have a relationship with a friend that is as intimate as other people's relationships with friends. |
| 1 | 2 | 3 | |
| Yes | No | Don't know | 19. I've recently gotten a good idea about how to do something from a friend |
| 1 | 2 | 3 | |
| Yes | No | Don't know | 20. I wish my friends were much different. |

PART 4

This questionnaire consists of 21 groups of statements. After reading each group of statements carefully circle the number (0, 1, 2 or 3) next to the one statement in each group which best describes the way you have been feeling the past week, including today. If several statements within a group seem to apply equally well, circle each one. Be sure to read all the statements in each group before making your choice.

-
1. 0 I do not feel sad.
- 1 I feel sad.
- 2 I am sad all the time and I can't snap out of it.
- 3 I am so sad or unhappy that I can't stand it.
-
2. 0 I am not particularly discouraged about the future.
- 1 I feel discouraged about the future.
- 2 I feel I have nothing to look forward to.
- 3 I feel that the future is hopeless and that things cannot improve
-
3. 0 I do not feel like a failure.
- 1 I feel I have failed more than the average person.
- 2 As I look back on my life, all I can see is a lot of failures.
- 3 I feel I am a complete failure as a person.

4. 0 I get as much satisfaction out of things as I used to.
1 I don't enjoy things the way I used to.
2 I don't get real satisfaction out of anything anymore.
3 I am dissatisfied or bored with everything.
-
5. 0 I don't feel particularly guilty.
1 I feel guilty a good part of the time.
2 I feel quite guilty most of the time.
3 I feel guilty all of the time.
-
6. 0 I don't feel I am being punished.
1 I feel I may be punished.
2 I expect to be punished.
3 I feel I am being punished.
-
7. 0 I don't feel disappointed in myself.
1 I am disappointed in myself.
2 I am disgusted with myself.
3 I hate myself.
-
8. 0 I don't feel I am any worse than anybody else.
1 I am critical of myself for my weaknesses or mistakes.
2 I blame myself all the time for my faults.
3 I blame myself for everything bad that happens.
-
9. 0 I don't have any thoughts of killing myself.
1 I have thoughts of killing myself, but I would not carry them out.
2 I would like to kill myself.
3 I would kill myself if I had the chance.
-
10. 0 I don't cry any more than usual.
1 I cry more now than I used to.
2 I cry all the time now.
3 I used to be able to cry, but now I can't cry even though I want to.
-
11. 0 I am no more irritated now than I ever am.
1 I get annoyed or irritated more easily than I used to.
2 I feel irritated all the time now.
3 I don't get irritated at all by the things that used to irritate me.

12. 0 I have not lost interest in other people.

1 I am less interested in other people than I used to be.

2 I have lost most of my interest in other people.

3 I have lost all of my interest in other people.

13. 0 I make decisions about as well as I ever could.

1 I put off making decisions more than I used to.

2 I have greater difficulty in making decisions than before.

3 I can't make decisions at all anymore.

14. 0 I don't feel I look any worse than I used to.

1 I am worried that I am looking old or unattractive.

2 I feel that there are permanent changes in my appearance that make me look unattractive.

3 I believe that I look ugly.

15. 0 I can work about as well as before.

1 It takes an extra effort to get started at doing something.

2 I have to push myself very hard to do anything.

3 I can't do any work at all.

16. 0 I can sleep as well as usual.

1 I don't sleep as well as I used to.

2 I wake up 1-2 hours earlier than usual and find it hard to get back to sleep.

3 I wake up several hours earlier than I used to and cannot get back to sleep.

17. 0 I don't get more tired than usual.

1 I get tired more easily than I used to.

2 I get tired from doing almost anything.

3 I am too tired to do anything.

18. 0 My appetite is no worse than usual.

1 My appetite is not as good as it used to be.

2 My appetite is much worse now.

3 I have no appetite at all anymore.

19. 0 I haven't lost much weight, if any, lately.

1 I have lost more than 5 pounds.

2 I have lost more than 10 pounds.

3 I have lost more than 15 pounds.

I am purposely trying to lose weight by eating less. Yes ____ No ____

20. 0 I am no more worried about my health than usual.
- 1 I am worried about physical problems such as aches and pains; or upset stomach; or constipation.
 - 2 I am very worried about physical problems and it's hard to think of much else.
 - 3 I am so worried about my physical problems that I cannot think about anything else.

21. 0 I have not noticed any recent change in my interest in sex.
- 1 I am less interested in sex than I used to be.
 - 2 I am much less interested in sex now.
 - 3 I have lost interest in sex completely.

PART 5

Purpose To record what family life changes adolescent members experience. The following list of family life changes can happen in a family at any time. Because family members are connected to each other in some way, a life change for any one member affects all the other persons in the family to some degree.

"FAMILY" means a group of persons who are related to each other by marriage, blood, or adoption, who may or may not live with you. Family includes step-parents, step-brothers and step-sisters.

REMEMBER: Anytime the words "parent", "mother", "father", "brother", "sister" are used, they also mean "step-parent", "step-brother", etc.

Instructions "Did the Change Happen in Your Family?"

Please read each family life change and decide whether it happened to any member of your family -- including you.

* DURING THE LAST 12 MONTHS. First, decide if it happened any time during the last 12 months and circle YES or NO.

* BEFORE THE LAST 12 MONTHS. Second, for some family changes decide if it happened any time before the last 12 months and circle YES or NO. It is okay to circle YES twice if it happened both times before last year and during the past year.

Did the Change Happen
in Your Family?

	During Last 12 Months		Before Last 12 Months	
	Yes	No	Yes	No
I. TRANSITIONS				
1. Family member started new business (farm etc.)	Yes	No	Yes	No
2. Parent quit or lost a job	Yes	No	Yes	No
3. Parents separated or divorced	Yes	No	Yes	No
4. Parent remarried	Yes	No	Yes	No
5. Family member was found to have a learning disorder	Yes	No	Yes	No
6. Family member was married	Yes	No	Yes	No
7. Parents adopted a child	Yes	No	Yes	No
8. Member started junior high or high school	Yes	No	Yes	No

Did the Change Happen
in Your Family?

	During Last 12 Months		Before Last 12 Months	
	Yes	No	Yes	No
9. Child or teenage member transferred to a new school	Yes	No	Yes	No
10. Parent started school	Yes	No	Yes	No
11. Brother or sister moved away from home	Yes	No	Yes	No
12. Young adult member entered college, vocational training or armed forces	Yes	No	Yes	No
13. Parent(s) started or changed to a new job	Yes	No	Yes	No
14. Family moved to a new home	Yes	No	Yes	No
II. SEXUALITY				
15. Married family member became pregnant	Yes	No	Yes	No
16. Family member had an abortion	Yes	No	Yes	No
17. Birth of a brother or sister	Yes	No	Yes	No
18. Teenager began having sexual intercourse	Yes	No	Yes	No
III. LOSSES				
19. Family went on welfare	Yes	No	Yes	No
20. Damage or loss of family property due to burglary or other disaster	Yes	No	Yes	No
21. Brother or sister died	Yes	No	Yes	No
22. Parent died	Yes	No	Yes	No
23. Close family relative died	Yes	No	Yes	No
24. Death of a close friend or family member	Yes	No	Yes	No
25. Family member or close family friend attempted suicide	Yes	No	Yes	No
IV. RESPONSIBILITIES AND STRAINS				
26. Family member became seriously ill or injured (NOT hospitalized)	Yes	No	Yes	No
27. Family member was hospitalized	Yes	No	Yes	No
28. Family member became physically disabled or was found to have a long-term health problem (allergies, asthma, diabetes, etc.)	Yes	No	Yes	No
29. Family member has emotional problems	Yes	No	Yes	No
30. Grandparent(s) became seriously ill	Yes	No	Yes	No
31. Parent(s) have more responsibility to take care of grandparent(s)	Yes	No	Yes	No
32. Family member ran away	Yes	No	Yes	No

Did the Change Happen
in Your Family?

	During Last 12 Months		Before Last 12 Months	
	Yes	No	Yes	No
33. More financial debts due to use of credit cards or charges	Yes	No	Yes	No
34. Increased family living expenses for medical care, food, clothing, energy costs (gasoline, heating)	Yes	No		
35. Increase of parent's time away from family	Yes	No		
36. Child or teenage member resists doing things with family	Yes	No		
37. Increase in arguments between parents	Yes	No		
38. Children or teenagers have more arguments with one another	Yes	No		
39. Parents and teenagers have increased arguments (hassles) over use of car or hours to stay out	Yes	No		
40. Parent(s) and teenager(s) have increased arguments (hassles) over choice of friends and/or social life	Yes	No		
41. Parent(s) and teenager(s) have increased arguments (hassles) over attendance at religious activities	Yes	No		
42. Parent(s) and teenager(s) have increased arguments (hassles) over personal appearance (clothes, hair, etc.)	Yes	No		
43. Increased arguments about getting the jobs done at home	Yes	No		
44. Increased pressure for a member in school to get "good" grades or do well in sports or school activities	Yes	No		
<hr/>				
V. SUBSTANCE USE				
<hr/>				
45. Family member uses drugs (not given by doctor)	Yes	No	Yes	No
46. Family member drinks too much alcohol	Yes	No	Yes	No
47. Child or teenage member was suspended from school or dropped out of school	Yes	No	Yes	No
48. Parent(s) and teenager(s) have increased arguments (hassles) over use of cigarettes, alcohol or drugs	Yes	No	Yes	No
<hr/>				
VI. LEGAL CONFLICT				
<hr/>				
49. Family member went to jail, juvenile detention, or was placed on court probation	Yes	No	Yes	No
50. Family member was robbed or attacked (physically or sexually)	Yes	No	Yes	No

PART 6

This questionnaire is designed to measure the degree of contentment you have in your relationship with your mother. It is not a test, so there are no right or wrong answers. Answer each item as carefully and accurately as you can by circling a number underneath each one as follows:

- 1 = Rarely or none of the time
 2 = A little of the time
 3 = Some of the time
 4 = Good part of the time
 5 = Most of the time

1. My mother gets on my nerves.

Rarely or none of the time	A little of the time	Some of the time	Good part of the time	Most or all of the time
1	2	3	4	5

2. I get along well with my mother.

Rarely or none of the time	A little of the time	Some of the time	Good part of the time	Most or all of the time
1	2	3	4	5

3. I feel that I can really trust my mother.

Rarely or none of the time	A little of the time	Some of the time	Good part of the time	Most or all of the time
1	2	3	4	5

4. I dislike my mother.

Rarely or none of the time	A little of the time	Some of the time	Good part of the time	Most or all of the time
1	2	3	4	5

5. My mother's behavior embarrasses me.

Rarely or none of the time	A little of the time	Some of the time	Good part of the time	Most or all of the time
1	2	3	4	5

6. My mother is too demanding.

Rarely or none of the time	A little of the time	Some of the time	Good part of the time	Most or all of the time
1	2	3	4	5

7. I wish I had a different mother.

Rarely or none of the time	A little of the time	Some of the time	Good part of the time	Most or all of the time
1	2	3	4	5

8. I really enjoy my mother.

Rarely or none of the time	A little of the time	Some of the time	Good part of the time	Most or all of the time
1	2	3	4	5

9. My mother puts too many limits on me.

Rarely or none of the time	A little of the time	Some of the time	Good part of the time	Most or all of the time
1	2	3	4	5

10. My mother interferes with my activities.

Rarely or none of the time	A little of the time	Some of the time	Good part of the time	Most or all of the time
1	2	3	4	5

11. I resent my mother.

Rarely or none of the time 1	A little of the time 2	Some of the time 3	Good part of the time 4	Most or all of the time 5
------------------------------------	------------------------------	--------------------------	-------------------------------	---------------------------------

12. I think my mother is terrific.

Rarely or none of the time 1	A little of the time 2	Some of the time 3	Good part of the time 4	Most or all of the time 5
------------------------------------	------------------------------	--------------------------	-------------------------------	---------------------------------

13. I hate my mother.

Rarely or none of the time 1	A little of the time 2	Some of the time 3	Good part of the time 4	Most or all of the time 5
------------------------------------	------------------------------	--------------------------	-------------------------------	---------------------------------

14. My mother is very patient with me.

Rarely or none of the time 1	A little of the time 2	Some of the time 3	Good part of the time 4	Most or all of the time 5
------------------------------------	------------------------------	--------------------------	-------------------------------	---------------------------------

15. I really like my mother.

Rarely or none of the time 1	A little of the time 2	Some of the time 3	Good part of the time 4	Most or all of the time 5
------------------------------------	------------------------------	--------------------------	-------------------------------	---------------------------------

16. I like being with my mother.

Rarely or none of the time 1	A little of the time 2	Some of the time 3	Good part of the time 4	Most or all of the time 5
------------------------------------	------------------------------	--------------------------	-------------------------------	---------------------------------

17. I feel like I do not love my mother.

Rarely or none of the time 1	A little of the time 2	Some of the time 3	Good part of the time 4	Most or all of the time 5
------------------------------------	------------------------------	--------------------------	-------------------------------	---------------------------------

18. My mother is very irritating.

Rarely or none of the time 1	A little of the time 2	Some of the time 3	Good part of the time 4	Most or all of the time 5
------------------------------------	------------------------------	--------------------------	-------------------------------	---------------------------------

19. I feel very angry toward my mother.

Rarely or none of the time 1	A little of the time 2	Some of the time 3	Good part of the time 4	Most or all of the time 5
------------------------------------	------------------------------	--------------------------	-------------------------------	---------------------------------

20. I feel violent toward my mother.

Rarely or none of the time 1	A little of the time 2	Some of the time 3	Good part of the time 4	Most or all of the time 5
------------------------------------	------------------------------	--------------------------	-------------------------------	---------------------------------

21. I feel proud of my mother.

Rarely or none of the time 1	A little of the time 2	Some of the time 3	Good part of the time 4	Most or all of the time 5
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22. I wish my mother was more like others I know.

Rarely or none of the time 1	A little of the time 2	Some of the time 3	Good part of the time 4	Most or all of the time 5
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23. My mother does not understand me.

Rarely or none of the time	A little of the time	Some of the time	Good part of the time	Most or all of the time
1	2	3	4	5

24. I can really depend on my mother.

Rarely or none of the time	A little of the time	Some of the time	Good part of the time	Most or all of the time
1	2	3	4	5

25. I feel ashamed of my mother.

Rarely or none of the time	A little of the time	Some of the time	Good part of the time	Most or all of the time
1	2	3	4	5

PART 7

This questionnaire is designed to measure the degree of contentment you have in your relationship with your father. It is not a test, so there are no right or wrong answers. Answer each item as carefully and accurately as you can by circling a number underneath each one as follows:

1 = Rarely or none of the time
2 = A little of the time
3 = Some of the time
4 = Good part of the time
5 = Most of the time

1. My father gets on my nerves.

Rarely or none of the time	A little of the time	Some of the time	Good part of the time	Most or all of the time
1	2	3	4	5

2. I get along well with my father.

Rarely or none of the time	A little of the time	Some of the time	Good part of the time	Most or all of the time
1	2	3	4	5

3. I feel that I can really trust my father.

Rarely or none of the time	A little of the time	Some of the time	Good part of the time	Most or all of the time
1	2	3	4	5

4. I dislike my father.

Rarely or none of the time	A little of the time	Some of the time	Good part of the time	Most or all of the time
1	2	3	4	5

5. My father's behavior embarrasses me.

Rarely or none of the time	A little of the time	Some of the time	Good part of the time	Most or all of the time
1	2	3	4	5

6. My father is too demanding.

Rarely or none of the time	A little of the time	Some of the time	Good part of the time	Most or all of the time
1	2	3	4	5

7. I wish I had a different father.

Rarely or none of the time	A little of the time	Some of the time	Good part of the time	Most or all of the time
1	2	3	4	5

8. I really enjoy my father.

Rarely or none of the time 1	A little of the time 2	Some of the time 3	Good part of the time 4	Most or all of the time 5
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9. My father puts too many limits on me.

Rarely or none of the time 1	A little of the time 2	Some of the time 3	Good part of the time 4	Most or all of the time 5
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10. My father interferes with my activities.

Rarely or none of the time 1	A little of the time 2	Some of the time 3	Good part of the time 4	Most or all of the time 5
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11. I resent my father.

Rarely or none of the time 1	A little of the time 2	Some of the time 3	Good part of the time 4	Most or all of the time 5
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12. I think my father is terrific.

Rarely or none of the time 1	A little of the time 2	Some of the time 3	Good part of the time 4	Most or all of the time 5
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13. I hate my father.

Rarely or none of the time 1	A little of the time 2	Some of the time 3	Good part of the time 4	Most or all of the time 5
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14. My father is very patient with me.

Rarely or none of the time 1	A little of the time 2	Some of the time 3	Good part of the time 4	Most or all of the time 5
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15. I really like my father.

Rarely or none of the time 1	A little of the time 2	Some of the time 3	Good part of the time 4	Most or all of the time 5
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16. I like being with my father.

Rarely or none of the time 1	A little of the time 2	Some of the time 3	Good part of the time 4	Most or all of the time 5
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17. I feel like I do not love my father.

Rarely or none of the time 1	A little of the time 2	Some of the time 3	Good part of the time 4	Most or all of the time 5
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18. My father is very irritating.

Rarely or none of the time 1	A little of the time 2	Some of the time 3	Good part of the time 4	Most or all of the time 5
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19. I feel very angry toward my father.

Rarely or none of the time 1	A little of the time 2	Some of the time 3	Good part of the time 4	Most or all of the time 5
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20. I feel violent toward my father.

Rarely or none of the time 1	A little of the time 2	Some of the time 3	Good part of the time 4	Most or all of the time 5
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21. I feel proud of my father.

Rarely or none of the time 1	A little of the time 2	Some of the time 3	Good part of the time 4	Most or all of the time 5
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22. I wish my father was more like others I know.

Rarely or none of the time 1	A little of the time 2	Some of the time 3	Good part of the time 4	Most or all of the time 5
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23. My father does not understand me.

Rarely or none of the time 1	A little of the time 2	Some of the time 3	Good part of the time 4	Most or all of the time 5
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24. I can really depend on my father.

Rarely or none of the time 1	A little of the time 2	Some of the time 3	Good part of the time 4	Most or all of the time 5
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25. I feel ashamed of my father.

Rarely or none of the time 1	A little of the time 2	Some of the time 3	Good part of the time 4	Most or all of the time 5
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PART 8

On the following pages are some statements about children and their separated parents. Some of them are true about how you think and feel, so you will want to circle YES. Some are not true about how you think and feel, so you will want to circle NO. There are no right or wrong answers. Your answers will just tell me some of the things you are thinking now about your parents' separation/divorce.

- | | | |
|--|-----|----|
| 1. It would upset me if other kids asked a lot of questions about my parents | Yes | No |
| 2. It was usually my father's fault when my parents had a fight. | Yes | No |
| 3. I sometimes worry that both my parents will want to live without me. | Yes | No |
| 4. When my family was unhappy, it was usually because of my mother. | Yes | No |
| 5. My parents will always live apart. | Yes | No |
| 6. My parents often argue with each other after I misbehave. | Yes | No |
| 7. I like talking to my friends as much now as I used to. | Yes | No |
| 8. My father is usually a nice person. | Yes | No |
| 9. It's possible that both my parents will never want to see me again. | Yes | No |
| 10. My mother is usually a nice person. | Yes | No |
| 11. If I behave better, I might be able to bring my family back together. | Yes | No |
| 12. My parents would probably be happier if I were never born. | Yes | No |
| 13. I like playing with my friends as much now as I used to. | Yes | No |
| 14. When my family was unhappy, it was usually because of something my father said or did. | Yes | No |

15. I sometimes worry that I'll be left all alone.	Yes	No
16. Often I have a bad time when I'm with my mother.	Yes	No
17. My family will probably do things together just like before.	Yes	No
18. My parents probably argue more when I'm with them than when I'm gone.	Yes	No
19. I'd rather be alone than play with other kids.	Yes	No
20. My father caused most of the trouble in my family.	Yes	No
21. I feel that my parents still love me.	Yes	No
22. My mother caused most of the trouble in my family.	Yes	No
23. My parents will probably see that they have made a mistake and get back together again.	Yes	No
24. My parents are happier when I'm with them than when I'm not.	Yes	No
25. My friends and I do many things together.	Yes	No
26. There are a lot of things about my father I like.	Yes	No
27. I sometimes think that one day I may have to go live with a friend or relative.	Yes	No
28. My mother is more good than bad.	Yes	No
29. I sometimes think that my parents will one day live together again.	Yes	No
30. I can make my parents unhappy with each other by what I say or do.	Yes	No
31. My friends understand how I feel about my parents.	Yes	No
32. My father is more good than bad.	Yes	No
33. I feel my parents still like me.	Yes	No
34. There are a lot of things about my mother I like.	Yes	No
35. I sometimes think that once my parents realize how much I want them to, they'll live together again.	Yes	No
36. My parents would probably still be living together if it weren't for me.	Yes	No

PART 9

Rate each of the items below on a scale of 1 (not characteristic or typical of yourself) to 5 (very characteristic or typical of yourself)

	Not typical				Very typical
1. I like to be with people.	1	2	3	4	5
2. I usually seem to be in a hurry.	1	2	3	4	5
3. I am easily frightened.	1	2	3	4	5
4. I frequently get distressed.	1	2	3	4	5
5. When displeased, I let people know right away.	1	2	3	4	5
6. I am something of a loner.	1	2	3	4	5
7. I like to keep busy all the time.	1	2	3	4	5
8. I am known as hotblooded and quick-tempered.	1	2	3	4	5
9. I often feel frustrated.	1	2	3	4	5

	Not typical				Very typical
10. My life is fast paced.	1	2	3	4	5
11. Everyday events make me troubled and fretful.	1	2	3	4	5
12. I often feel insecure.	1	2	3	4	5
13. There are many things that annoy me.	1	2	3	4	5
14. When I get scared I panic.	1	2	3	4	5
15. I prefer working with others rather than alone.	1	2	3	4	5
16. I get emotionally upset easily.	1	2	3	4	5
17. I often feel as if bursting with energy	1	2	3	4	5
18. It takes a lot to make me mad.	1	2	3	4	5
19. I have fewer fears than most people.	1	2	3	4	5
20. I find people more stimulating than anything else.	1	2	3	4	5

PART 10

Section A

During the past year, how many times have you done each of the following? (Circle one number for each row.)

None	Once	2-3 times	4-5 times	6-9 times	10 or more times	
1	2	3	4	5	6	Smoked without your parent's permission.
1	2	3	4	5	6	Taken little things that don't belong to you.
1	2	3	4	5	6	Gone to a movie the night before a test.
1	2	3	4	5	6	Caused a disturbance in a movie theater even after having been asked to stop.
1	2	3	4	5	6	Skipped school without a legitimate excuse.
1	2	3	4	5	6	Broken into a place that is locked just to look around.
1	2	3	4	5	6	Damaged public or private property that does not belong to you just for fun.
1	2	3	4	5	6	Lied to your parents about where you have been or whom you were with.
1	2	3	4	5	6	Beat up another kid without much reason.
1	2	3	4	5	6	Stayed out all night without your parents' permission.
1	2	3	4	5	6	Taken something of value from a store without paying for it.
1	2	3	4	5	6	Damaged school property on purpose - like library books, or musical instruments, or gym equipment.
1	2	3	4	5	6	Deliberately ruined something your parents value after having an argument with them.

Section B

During the past year, how many times have each of the following happened to you?
(Circle one number for each row.)

None	Once	2-3 times	4-5 times	6-9 times	10 or more times	
1	2	3	4	5	6	You've gotten drunk.
1	2	3	4	5	6	You've gotten into trouble with your teachers or principal because of your drinking.
1	2	3	4	5	6	You've gotten into difficulties of any kind with your friends because of your drinking.
1	2	3	4	5	6	You've driven when you've had a good bit to drink.
1	2	3	4	5	6	You've been criticized by someone you were dating because of your drinking.
1	2	3	4	5	6	You've gotten into trouble with the police because of your drinking.

Section C

1. Have you ever tried marijuana (pot, grass, Mary Jane, weed, reefers, hash)? (check one)
 (1) Yes (2) No
2. Have you ever been high or stoned on marijuana to the point where you were pretty sure that you experienced the drug effect? (check one)
 (1) Yes (2) No
3. Do you or someone very close to you usually keep a supply of marijuana so that it's available when you want to use it? (check one)
 (1) Yes (2) No
4. Do you use marijuana a couple of times a week or more when it's available? (check one)
 (1) Yes (2) No
5. Have you ever engaged in sexual intercourse with someone of the opposite sex? (check one)
 (1) Yes (2) No
6. Have you taken part in militant political activism or peaceful political demonstrations in the last year? (check one)
 (1) Yes (2) No

PLEASE GO ON TO THE LAST PAGE.

I am interested in any feedback you have for me about this survey and your reactions to taking part in it.

Please use the space below to make any comments.

PLEASE IMMEDIATELY SEAL YOUR COMPLETED QUESTIONNAIRE IN THE ENVELOPE MARKED "TEENAGER". DO NOT SHOW IT TO ANYONE. USE THE PRE-ADDRESSED, STAMPED RETURN ENVELOPE TO MAIL YOUR SURVEY AND YOUR PARENT'S BACK TO ME. THANK YOU.