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Effects of Parents' Perceptions of the Adolescent Experience on Future Parent-Adolescent Relationships

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EFFECTS OF PARENTS' PERCEPTIONS OF THE ADOLESCENT EXPERIENCE
ON FUTURE PARENT-ADOLESCENT RELATIONSHIPS

by
TRACEY HOLLANDER

A Thesis Submitted to the Faculty of the Graduate School of
Loyola University of Chicago in Partial Fulfillment of the
Requirements for the Degree of
Masters of Arts

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1992

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ABSTRACT

Although research has shown that adolescence is not universally a time of extreme "storm and stress" (Montemayor, 1983; Hill & Holmbeck, 1987), many people in society still uphold the stereotypical notions regarding adolescence as a developmental phase. It was suggested in this study that if parents had stereotypical beliefs about adolescence they would interpret their children's behavior in terms of these notions and adapt their own behavior in order to prevent the storm and stress behaviors from occurring. The purpose of the longitudinal study conducted in this project was to examine the effects that mothers' beliefs about adolescence have upon: (1) changes in the level of parent-child conflict that is exhibited, (2) changes in parenting style, and (3) changes in the level of internalizing and externalizing symptoms as the child enters adolescence. It was found that there did not seem to be a relationship between beliefs and the variables assessed in this study. The findings were discussed in terms of the relevant literature and future areas of research were explored.

EFFECTS OF PARENTS' PERCEPTIONS OF THE ADOLESCENT EXPERIENCE
ON FUTURE PARENT-ADOLESCENT RELATIONSHIPS

Adolescence is a developmental period that seems to evoke a sense of mystery and fascination in adults. Adelson (1964, as cited in Rutter, 1976) describes the "mystique" of adolescence in terms of two stereotypes : (a) the 'visionary victim', a noble idealist betrayed, exploited or neglected by the adult world; and (b) the 'victimizer', as leather jacketed, cruel, sinister and amoral (p.36). He argues that the former refers to the type of client upon which psychoanalytic theorists have based their theories of adolescent development and the latter image is based on the delinquents who appear in news headlines and the latest made-for-tv-movie. The media as well as many psychoanalytic theorists portray adolescence as period in life when emotions become overwhelming and relationships with family members become strained and ridden with conflict. Although these stereotypes seem to pervade the media (Falchikov, 1986) and psychoanalytic writings (Blos, 1962; Freud, 1958), research has failed to support the notion that all children experience an extreme degree of turmoil and conflict with their family members as they enter adolescence (Montemayor, 1983; Hill & Holmbeck, 1987).

Currently, researchers describe adolescence as a period of transition that is marked by both continuity and changes in familial relationships. As Collins (1990) states, "the evidence of both continuity and change in research findings implies that family relationships undergo an adaptation or transformation rather than the disjunction that is often implied by stereotypes of the transition to adolescence. A pressing need is a better understanding of the nature and determinants of change processes in the relationships between parents and children during this period" (p.91). Although there seems to have been a major change in the way in which psychologists understand and describe the transitions that occur in families when a child enters adolescence, (Offer & Offer, 1975, Montemayor, 1983, 1986, Rutter et al., 1986) it is believed that the public may still endorse the stereotypical storm and stress view of adolescent development (Holmbeck & Hill, 1988; C. Miller et al., 1987).

Parents' beliefs about adolescence may play an integral role in the change process and may serve as a factor that guides the way in which parents react and adapt to their child's behavior. Researchers within both developmental and social psychology have shown that adults' beliefs have profound effects on the way in which they interact with others. For example, if a mother views adolescence as a time marked by rebellion and conflict, she may interpret her child's behavior in terms of these beliefs (C. Miller et al.,

1987). As the child enters adolescence, the slightest act of disagreement may be perceived by the parent as a manifestation of this presumed rebellion and as a result the parent may tend to over react and conflict may escalate. Thus, the parents' preconceived beliefs about adolescent development may lead them to create a self-fulfilling prophecy. The effects of parents' beliefs on their relationship with their child as she/he enters adolescence is the focus of this paper. In this paper, the research on adults' beliefs about adolescent development will be reviewed first. Second, the relevant literature pertaining to the way in which these beliefs may influence both the parents as well as the adolescent offsprings' behavior will be explored. Finally, the literature pertaining to the parent-child relationship variables that will be examined in the proposed study will be reviewed. The purpose of this longitudinal study is to explore the effects that parental beliefs about adolescence have upon: (1) changes in the level of parent-child conflict that is exhibited, (2) changes in parenting style, and (3) changes in the level of internalizing and externalizing symptoms as the child enters adolescence.

Beliefs About Adolescent Development

Although researchers have generally found that family relationships are not severely disrupted by the child's transition into adolescence (Montemayor, 1982; Kandel & Lesser, 1972; Offer & Offer, 1975; Hill & Holmbeck, 1986), it is generally understood that the public's beliefs are still in accordance with the stereotypical storm and stress view of adolescence. This contradiction has been described as resulting from the persistence of the stereotypical portrayal of adolescents by the media and by psychoanalytic theorists (Holmbeck & Hill, 1988). Researchers have shown that prevailing cultural ideas have a major impact on the formation of parental beliefs (Goodnow et al., 1985). As S. Miller (1988) states in his review of this research "many parental beliefs are less personal constructions than 'ready-made schemas'- ideas that are incorporated full blown from the surrounding culture." (p. 281). Thus, parents with pre-adolescent children may be particularly interested in learning about what the future holds in store for them as their child enters adolescence. Since the resources in our culture (television, newspapers etc.) seem to adhere to the storm and stress view of adolescence, it follows that parents general beliefs about adolescence may reflect these stereotypical notions. However, there have been few attempts to empirically investigate what the public actually believes about adolescent development.

Most of the studies that have attempted to address adults' beliefs have utilized samples consisting of health professionals and undergraduate and graduate students. These studies have generally shown that health professionals adhere to the stereotypical view of adolescence as a period of storm and stress. Offer, Ostrov & Howard (1981), found that mental health professionals tend to endorse a more negative view of normal adolescents than normal adolescents report about themselves. Furthermore, these mental health professionals predicted that "normal" adolescents would have more problems in mood, social, and family relationships than delinquent and neurotic adolescents reported about themselves (Offer et al., 1981). Similarly, medical personnel are more likely to attribute the presence of problems during adolescence to that particular developmental stage than is the case during other stages of development (Beck, Adler & Irwin, 1985).

Undergraduate college students tend to believe in the storm and stress notions of adolescence; however, as Holmbeck & Hill (1988) point out, the students in their study tended to endorse the less severe storm and stress items. These researchers found that although the students viewed adolescence as a time in which parent-child conflict escalates and the influence of friends is more intense, they did not find that adolescents are overtly oppositional or that adolescents are rejected by their parents. Thus, most students believed that adolescence is characterized by a

disruption in parent-child relationships rather than a complete dissolution of the relationship (Holmbeck & Hill, 1988).

In preparing for the literature review for this paper only two research projects that address parental beliefs regarding adolescent development could be located (C. Miller et al., 1987; Schoenleber & Collins, 1988). Although these two research projects attempted to assess parents' beliefs about adolescent development, their approaches, identified target, and interpretation of the beliefs were different. Schoenleber and Collins (1988) focused on parents' perceptions of their **own** child's actual behavior during adolescence as well as the behavioral style that they considered to be "ideal" for this developmental stage. In particular, they focused on parents' beliefs regarding changes that should occur in their relationship with their child during adolescence.

Schoenleber and Collins (1988) assessed parents' perceptions of behaviors that are commonly thought to change between the ages of 11-16. They found that parents generally perceived their children's behaviors in a positive fashion. These perceptions tended to change as the children moved from one grade to another. However, mothers and fathers differed in their perceptions of which category tended to change. Mothers of eighth graders perceived less communicativeness and less compliance in their own children than did mothers of

fifth and eleventh graders. The fathers' perceptions of communication for these same children did not vary as a function of the children's grade level. Both mothers and fathers more strongly perceived that their child was capable of performing particular tasks in an independent fashion in eleventh grade than at eighth and at eighth grade than at fifth grade. The parents' perceived their child's behavior as more positive than the typical child of the same age and gender at grades five and eleven, but not in grade eight. Furthermore, these researchers found that mothers expected that their children would more likely violate what they believed to be "ideal" behavior in adolescence than in preadolescence. These findings indicate that parents expect that their child will behave in a less than ideal fashion during adolescence and that the transitional period of early adolescence may be particularly difficult.

C. Miller et al. (1987) attempted to assess parents' beliefs regarding adolescent development and the extent to which parents believed that they could affect their child's progression through adolescence. They were also concerned with examining the effects that experience with previous adolescent offspring had upon these beliefs. These researchers distinguished between parents categorical*-(general developmental period of adolescence) based beliefs

* Through out this paper we will utilize the terms categorical beliefs and general beliefs interchangeably.

and target-(specific individual; their own child) based beliefs about adolescents. The parents with more experience had less stereotyped target beliefs than parents with less experience; however, the amount of experience was not related to the nature of the parents' general categorical beliefs. This finding suggests that parents' target beliefs may be more amenable to environmental influences than general beliefs. Although parents may have had personal experiences during their own or with another adolescent offspring's development that deviated from the stereotypical storm and stress view, they may view their own development as well as their other child's as an exception to the general rule. Thus, the target-based beliefs would be affected by this prior experience, but the general categorical belief would remain unaffected. Furthermore, these researchers found that, in general, parents tended to believe that adolescence is a difficult developmental period and they attributed the difficulties to hormonal changes (Miller et al., 1987). However, parents tended to endorse items which reflected the belief that it is possible for adults to influence development and thereby make a difference in the child's adolescence.

Although parents still tend to believe in the storm and stress view of adolescence, they were also relatively optimistic in their view of the possible impact that they could have on their adolescent offspring's development.

These findings suggest that parents may attempt to adapt their behavior in order to assist their child during this difficult developmental phase. Although the notion of parents adapting their behavior to assist their child during adolescence suggests that there would be a positive change in their parenting style, it may also result in a negative change. That is, the way in which parents adjust their behavior may depend upon their beliefs about adolescent development. For example, if parents view adolescence as a time marked by conflict and rebelliousness they may adapt their disciplinary style in order to prohibit their children from manifesting these behaviors. As the children enter adolescence the parents may become more rigid and attempt to overly restrict their offspring's actions. However, although parents may be attempting to protect their children from "the dangers of adolescence", this over-controlling behavior may have a negative influence on the children's behavior. They may view these restrictions as a message that their parents do not trust them and still think of them as a young children. In order to prove their independence and exercise their new burgeoning sense of self, they may fail to adhere to the rules and act out in a variety of ways.

Thus far in this paper, the literature regarding beliefs about adolescence has been reviewed and it seems that most parents continue to adhere to the storm and stress view. However, parents also seem to believe that they are able to

influence their children during this stage. It is the premise of this paper that parents' stereotypical beliefs about adolescent development may play an integral role in the way in which parents' attempt to influence their adolescent offspring.

Beliefs and Their Effects

As stated previously, the purpose of this paper is to determine how parental stereotypical beliefs about adolescence may relate to changes in the parent-child relationship during this developmental phase. Thus, a major issue that needs to be addressed is how parents' stereotypical beliefs may serve to affect both their own and their children's behavior as they enter adolescence. There are two areas of research that seem relevant in addressing this complex question. First, there is a small, but growing body of research that suggests that parents' beliefs regarding child development have an impact on the way in which they interpret and thereby react to their children's behaviors. The few studies that have been conducted in this area focus on parental beliefs regarding gender appropriate behaviors and academic abilities. These studies address the effects that these parental beliefs have upon their behavior as well as their offsprings' behavior and level of achievement during early and middle childhood. In his review of the literature regarding parent's beliefs about cognitive

development, S. Miller (1988) concludes that "the evidence indicates that there is a relation between what parents believe about children and how they behave toward children...the relations, moreover, are in the expected direction" (p.277). The effects that parental stereotypical beliefs have upon the parent-child relationship is the primary concern of this paper. Thus, the discussion will be limited to studies that examine the effects that parental sex-linked beliefs have upon their behavior and their child's development.

Brooks-Gunn (1985) assessed the effects that parental beliefs regarding gender appropriate behavior have upon the way in which they interact with their offspring. She directly observed and assessed parent-child interactions and found that mothers' general beliefs regarding gender-appropriate behavior was associated with the manner in which they interact with their children (Brooks-Gunn, 1985). Specifically, mothers' who had traditional sex-typed beliefs about appropriate behavior were more likely to play with their children in a fashion that conforms to these stereotypes than mothers who did not possess these beliefs. Furthermore, Brooks-Gunn found that the children of mothers who endorsed low sex typed beliefs had higher intelligence test scores when they were two years old than the children with mothers' who had strong sex typed beliefs. In summary, these findings indicate that mothers' stereotypical beliefs

are related to both their behavior towards their children and also the level of intelligence that their children exhibit. These researchers concluded their paper by emphasizing the importance of including maternal beliefs about child behavior in the study of parental effects on children's behavior.

The second study that will be discussed focuses on the effects that parent's attitudes about their children's mathematical ability have upon their children's self-perceptions and performance in math (Eccles-Parsons, Adler & Kaczala, 1982). These researchers did not directly observe and assess parents' behavior; instead they were more concerned with assessing the link between parental beliefs and their child's self development and achievement. Eccles-Parsons et al. (1982) found that parents' sex--linked beliefs about mathematical abilities influences their children's achievement and self-concept in a subtle, yet complicated fashion. These researchers found that although parents of daughters did not rate their children's math abilities as lower than parents of sons, parents of daughters believed that math was difficult for their child and that they had to work harder to excel in this area. The parents' beliefs appeared to be more directly related to the children's self concept and achievement in math classes at school, than their actual history of past performance in math. These researchers explained this relationship as resulting from the way in which the parent interpreted reality for their

children. Since parent's seem to have sex-linked beliefs regarding the level of difficulty in achieving good grades in math and how hard one must work in order to excel in this area, it seems probable that parents may make different attributions for success depending upon the gender of their child. A parent may attribute their daughters "A" on a math test to her hard work rather than her intelligence and ability, whereas a son who achieves the same grade would receive praise for his abilities. Thus, the results of this study suggest that parent's stereotypical beliefs seem to have a pervasive and complex effect on the way in which they interact with their children.

The remaining area of research that seems relevant in studying the effects of parents' beliefs about child development and their associated expectations on childrens behavior is in the realm of social psychology. The study of how attitudes affect behavior has been a long standing issue for social psychologists. Recently, researchers have argued for the necessity of incorporating social psychological findings and theory into the study of the links between parents' beliefs and their behavior (S.Miller, 1988; Sigel, 1986). The research which addresses the effects of stereotypical beliefs on behavior seems particularly relevant to this paper. In their review of the stereotype literature, McCauley, Stitt and Segal (1980) refer to a study by Snyder, Tanke & Berscheid (1977) that assess the possibility that

stereotypes may result in self-fulfilling prophecies. In this study Snyder et al. (1977) examined the relationship between experimental confederates' preset beliefs regarding the attractiveness of a subject and their resulting behavior during a short conversation on a telephone. These researchers were also concerned with assessing the subjects' behavior during this conversation. These researchers found that the confederates who believed that the subjects were attractive tended to respond to the subjects in a more sociable, outgoing, and friendly fashion, than the confederates in the unattractive condition. Moreover, the subjects who were perceived to be physically attractive also behaved in a more friendly, likeable, and sociable manner in comparison to targets whose perceiver regarded them as unattractive. In these studies the beliefs of experimental confederates seem to have a strong impact on their behavior toward their subjects. The confederates' stereotypical beliefs about attractiveness appeared to influence their style of interacting in a manner which was consistent with those beliefs. In turn, the confederates style of interacting seemed to elicit a complimentary response from the subjects. As Snyder et al. (1977) state "These differences in (confederates') self-presentation and interaction style, in turn, elicited and nurtured behaviors of the target that were consistent with the perceivers'

initial stereotypes.....the stereotype had truly functioned as a self-fulfilling prophecy". (p.663).

A similar process may occur in the interactions between parents and their adolescent offspring. Perhaps, if parents believe in the stereotypical storm and stress view of adolescent development they may create self-fulfilling prophesies for their children as they enter adolescence. Those parents who believe that adolescence is an extremely difficult time marked by rebellion and parent-adolescent conflict may inadvertently induce this behavior in their children. In order to maintain control, these parents may attempt to overly restrict their childrens' behavior and perhaps lead them to overreact to any sign of "adolescent rebellion." The adolescent may view the parent's overprotective behavior as a threat to their developing sense of self and as a hindrance to their relationships with their friends. Thus, the adolescent may indeed act out and rebel against their parent's overly restrictive rules.

The prevalence of stereotypical beliefs about adolescents and research on the effects of stereotypes on behavior, suggest that parents' beliefs regarding adolescent development may have a profound effect on their own as well as their children's behavior as they enter adolescence. Furthermore, researchers have found that adolescents are more accurate in predicting parent beliefs than are preadolescents (Alessandri & Wozniak, 1987,1988). This finding suggests

that as children enter adolescence they may become more aware of their parents' beliefs. Thus, adolescents may be more aware of their parents' associated expectations than are younger children which further emphasizes the importance of studying parental beliefs about adolescence. In particular, there are three aspects of the parent-child relationship that may be influenced by the parent's beliefs during this transitional period: level of parent-child conflict, parenting style, and the parent's report of their child's symptom development.

Parent-Adolescent Conflict

The prevailing stereotypes portray adolescence as a time in which children rebel and attempt to distance themselves from their family members. However, the empirical findings indicate that the transition from childhood to adolescence is characterized by only a minor increase in conflicts with parents for the majority of adolescents (Hill & Holmbeck, 1987; Montemayor, 1983) and that the topics which are addressed are related to school and chore issues, rather than values or controversial topics (Smetana, 1989; Montemayor, 1986). As Montemayor (1983) states in his review of the literature "after 60 years of research empiricists have been unable to document the existence of universal distress among samples of non-clinic families with adolescents" (p.15). However, he qualifies this statement by pointing out that the

degree of interpersonal discord in parent-adolescent relations is variable and that in a small percentage of families more disruptive interactions between parents and adolescents are common (Montemayor, 1983). According to Montemayor (1986), researchers must attempt to go beyond the fundamental question regarding the degree of turmoil in parent-adolescent relationships and attempt to identify factors that account for the variations of conflict that seem to exist between families. Perhaps parental beliefs about adolescent development may be one of these factors. If parents believe that adolescence will be a time in which parent child conflict escalates, they may be overly concerned with the slightest disagreement between themselves and their adolescent offspring. Thereby, any sign of disagreement on the part of their adolescent offspring would be viewed as an indication of the oncoming conflict. Thus, the adolescents' "normal" disagreeable responses to everyday family issues such as chores or schoolwork (Montemayor, 1982; Hill & Holmbeck, 1987), may be perceived by their parents as the first signs of the expected rebellious attitude. The parent may attempt to extinguish the adolescent's "back talk" by either ignoring their complaints or by utilizing threats. Either approach would probably serve to frustrate the adolescent which in turn may lead them to rebel against her parents.

Parents' Report of Symptoms

Along with the notion of stressful parent-child relationships, the prevailing stereotypical views of adolescence tend to include the manifestation of severe psychopathology. Theorists have viewed adolescence as a time in which symptom formation is a natural, "normal" sign of development. As Anna Freud (1985) states "Adolescence is by its nature an interruption of peaceful growth, and ...the upholding of a steady equilibrium during the adolescent process is in itself abnormal...The adolescent manifestations come close to symptom formation of the neurotic, psychotic or dissocial disorder and merge...into..almost all mental illnesses" (p.250). Research has not supported the notion that all adolescents exhibit symptoms or that there is a major increase in symptom formation during adolescence (Rutter et al.1976). Many adolescent psychiatric problems seem to first arise in early childhood. However, researchers have found that most adolescents do experience what they refer to as "inner turmoil" (Rutter et al.1976). This psychological state is represented by "feelings of misery, self-deprecation and ideas of reference." It is often undetected by adults but seems to cause appreciable personal suffering for the adolescent.

The way in which parents interpret this "inner turmoil" may depend upon their beliefs about adolescent development. A parent who views adolescence as a difficult stage, but not

traumatic and disruptive may perceive the child's turmoil as developmentally appropriate. These parents may believe that their adolescent offspring will "grow out" of the turmoil and thereby, would most likely not report that their child is exhibiting symptoms. However, a parent who adheres to the stereotypical storm and stress notion of adolescence may be hypervigilant in noting the symptoms that their child exhibits. They may be more prone to notice any signs of turmoil in their adolescent offspring. These parents may view these signs as the beginning of the "adolescent crisis" and, as a result, report them as symptoms. Thus, parents' beliefs about adolescent development may determine the way in which they interpret the emotional changes that their offspring experience during adolescence.

Parenting Style

As stated previously in this paper, adolescence is currently viewed as a time in which family relationships undergo adaptations and transitions. An important dimension in which parents' behavior is assumed to change is the way in which they discipline their adolescent offspring.

Researchers have found that parenting styles tend to change over time in accordance with the developmental needs of the child (Schaeffer & Bayley, 1963; Roberts, Block, & Block, 1984). Adolescence is a time in which individuation and the formation of an identity apart from the family are assumed to

be paramount issues (Erickson, 1968; Hill, 1980). Thus, during adolescence, it is assumed that parents tend to grant more autonomy and freedom to their offspring than in the past. At this point during the life cycle parents may become less controlling and involved in their children's life than they had been in previous years. Problems may develop when parents are unable to adjust their parenting style to the changing needs of their adolescent offspring. As Carter and McGoldrick (1980) state "families with adolescents must establish qualitatively different boundaries than families with younger children.....Parents can no longer maintain complete authority. Families that become derailed at this stage ...are frequently stuck in an earlier view of their children. They may try to control every aspect of their lives at a time when developmentally this is impossible to do successfully" (p.18). Perhaps stereotypical beliefs about adolescent development may be a factor that leads parents to fail to adapt their parenting style to their adolescent offsprings' changing needs. However, before it is possible to discuss further the mechanisms that would enable this to occur, it is necessary to describe the categorization of parenting styles that will be utilized in this paper.

Researchers have discussed variations in parenting in terms of a variety of dimensions. A survey of these dimensions and their effects on child development exceeds the scope of this paper (Macoby & Martin, 1983 for a recent

review). However, in order to clarify the aspects of parenting that are relevant to this paper, the parenting styles delineated by Baumrind in her research on family interaction and cognitive competence will be discussed. Baumrind (1978) postulated three types of parenting styles; authoritarian, authoritative, and permissive. The parenting styles range in the degree of control that parents aspire to yield and the degree of demandingness that they exhibit. The authoritarian style of parenting is characterized by a high degree of control by the parent and a corresponding lack of give and take between parents and children. Parents lay down the rules and demand that their offspring abide by them. When children fail to follow the rules, severe punishment may be instituted. Parents who are permissive in parenting style tend to be tolerant and accepting of their children's impulsivity and immature behavior. These parents tend to use as little punishment as possible and make few if any demands. They allow children to regulate their own behavior and avoid asserting their own authority. The authoritative pattern consist of a more reciprocal approach to parenting. These parents tend to expect that their children will follow a clear set of rules; however, they also are cognizant and sensitive to their children's desires. Since this style entails a give and take type of relating, some researchers refer to this pattern as "reciprocal" parenting.

In view of the issues that adolescents must negotiate, it seems most likely that parents who are cognizant of their offspring's developmental needs would adapt their parenting style to a less controlling more independent approach. When children are younger it is expected that they would require more structure and firmer guidelines; however, as they enter adolescence a more reciprocal, democratic type of parenting would probably best aide them in negotiating the necessary developmental tasks. The most ideal parenting style for adolescent offspring would most likely be an authoritative pattern. Researchers have shown that adolescents who grow up in a family in which parents are authoritative score higher on measures of psychological development and mental health (Macoby & Martin, 1983 for a review). Thus, ideally we would expect that parenting styles would tend to change toward a more authoritative approach during adolescence. Although a large percentage of parents tend to adjust their parenting style in this direction (Roberts, Block & Block, 1984), many fail to make this adaptation.

Parents' stereotypical beliefs about adolescence may be one factor that influences the way in which parents adapt their parenting style as their child enters adolescence. Instead of granting the child more independence, parents who view adolescence as a time in which children become extremely rebellious and disruptive may attempt to tighten the control in order to prohibit the acting-out behavior. Adolescents

may, in turn, react to the parents' tightening of control in an acting-out rebellious fashion. Thus, parents stereotypical beliefs about adolescence may lead them to create a self-fulfilling prophecy.

Given the preceding literature review, the hypotheses for the current study are as follows:

Beliefs

(1) Mother's categorical-based beliefs will be more stereotypical in nature than their target-based beliefs.

(2) There will be a greater degree of change in mother's target-based beliefs compared to their categorical-based beliefs from Time 1 to Time 2. It is expected that the effects will be stronger for the early adolescent dyads (10-13 years) than the middle adolescent dyads (14-18 years).

Conflict

(3) There will be a relationship between the mothers' tendency to endorse the storm and stress notions of adolescence at T1 and their report of an increase in conflict from T1 to T2. These effects are expected to be stronger for target-based beliefs than categorical-based beliefs.

Furthermore, it is expected that the effects will be stronger for the early adolescent dyads (10-13 years) than the middle adolescent dyads (14-18 years).

(4) There will be a relationship between the mothers' tendency to endorse the storm and stress notions of adolescence at T1 and their childrens' report of an increase in conflict from T1 to T2 and from T1 to T3. These effects are expected to be stronger for target-based beliefs than categorical-based beliefs. Furthermore, it is expected that the effects will be stronger for the early adolescent dyads (10-13 years) than the middle adolescent dyads (14-18 years).

Symptoms

(5) There will be a relationship between the mothers' tendency to endorse the storm and stress notions of adolescence at T1 and their report of an increase in symptoms that their child exhibits from T1 to T2. These effects are expected to be stronger for target-based beliefs than categorical-based beliefs. Furthermore, it is expected that the effects will be stronger for early adolescent dyads (10-13 years) than for middle adolescent dyads (14-18 years).

Parenting Style

(6) There will be a relationship between the mothers' tendency to endorse the storm and stress notions of adolescence at T1 and their report of an increase in parental control from T1 to T2. These effects are expected to be stronger for target-based beliefs than categorical-based beliefs. Furthermore, it is expected that the effects will

be stronger for the early adolescent dyads (10-13 years) than for the middle adolescent dyads (14-18 years).

(7) There will be a relationship between the mothers' tendency to endorse the storm and stress notions of adolescence at T1 and their childrens' report of an increase in parental control from T1 to T2 and from T1 to T3. These effects are expected to be stronger for target-based beliefs than categorical-based beliefs. Furthermore, it is expected that the effects will be stronger for the early adolescent dyads (10-13 years) than the middle adolescent dyads (14-18 years).

Method

Subjects

Subjects were 83 mother-adolescent dyads (23% from one parent families; 36 males and 47 females). The childrens' ages ranged from 10-18 with a mean age of 13.22 (SD 2.60). Subjects were recruited from 5 inner-city Catholic schools in a large east coast city. These five schools were selected from a list of 12 catholic schools given to the primary investigator by a psychological services agency affiliated with the Catholic school system. The principles of five of these schools agreed to participate in this study.

Parental occupation scores ranged from 6 to 77 on the Duncan Socio-Economic Index (SEI; Duncan, 1977; possible range 5-95), an instrument designed to measure social class information in a continuous rather than a categorical fashion. The scores on this scale were based upon the occupation of the father and in cases in which this information was unavailable, maternal occupation was utilized. Higher scores on this scale reflect higher social status. In this sample 40% of the subjects scored below 30, 35% scored between 31 and 50, and 25% scored between 51 and 77. Thus, this sample had representatives from the entire range of social classes (excluding the upper class). Although the schools utilized in this study were composed of students with a variety of social and religious backgrounds, they were not racially integrated. The students that

attended three of the schools included in this sample were primarily black and the students in the other two schools were primarily white. In the entire sample 40% of the subjects were white and 60% were black.

Procedure

In May of 1988 (Time 1), 60% of the students contacted received parental permission to participate in this study. Approximately half of the mothers of these students also agreed to participate. The participants filled out a battery of measures regarding adolescent development and family functioning (see Table 1 for clarification of times, subjects and measures). Adolescents filled out the questionnaires in their classroom setting (for grades 5-8, questionnaires were read aloud) and parents completed the questionnaires at home. After returning the questionnaires to the investigators via mail, mothers received \$10.00. In November, 1988, 83 of the original 99 (87% return rate) adolescent mother dyads agreed to complete the same battery of questionnaires a second time. There were no significant differences ($p > .05$) on SEI scores, age, or any of the variables being examined in the current study between those mothers who agreed to participate and those who chose not to participate. Finally, one year after Time 1 the same 83 of the original 99 adolescent (not the mothers) subjects completed the same battery of questionnaires for a third time (T3).

Table 1

A Description of Measures Filled out by Mothers and Children
at T1, T2, and T3:

TIME 1

MOM _____ CHILD

Storm and Stress Scale	Issues Checklist
Issues Checklist	Decision Making Questionnaire
Achenbach Child Behavior Checklist	
Decision Making Questionnaire	

TIME 2

MOM _____ CHILD

Storm and Stress Scale	Issues Checklist
Issues Checklist	Decision Making Questionnaire
Achenbach Child Behavior Checklist	
Decision Making Questionnaire	

TIME 3

MOM _____ CHILD

No measures at T3	Issues Checklist
	Decision Making Questionnaire

Measures

Storm and Stress Scale (SSS). At Time 1 and Time 2 mothers filled out the *Storm and Stress Scale*. (refer to Appendix a) This instrument served to measure the independent variable in this study: parents' beliefs about adolescent development. The SSS was developed by Holmbeck and Hill (1988), and it contains nine items that are rated on a 7-point Likert scale ranging from *never or almost never true* of the typical adolescent (with a scale value of 1) to *always or almost always true* (with a scale value of 7). Most of the items in this scale refer to beliefs about parent-adolescent relations; however, the scale also includes items that tap peer and identity issues as well as two items regarding general storm and stress issues such as rebelliousness. For example, the following items are included in the SSS, "adolescents fight a lot with their parents" and "adolescents prefer to talk to their peers instead of their parents." There are two forms of this questionnaire (i.e., target, categorical). The items on the forms are identical, but the source of the beliefs are different. One form asks the parent to focus on their own adolescent (target beliefs) and the other form refers to adolescents in general (general beliefs). The scale was tested for internal consistency and the resulting Cronbach alpha was .75. Furthermore, Holmbeck and Hill (1988) showed that college students' scores changed on the SSS in the

direction expected after participating in a class on adolescent development. That is, after taking the class, college students tended to endorse fewer and less extreme storm and stress items on the SSS for the typical adolescent.

ISSUES CHECKLIST (IC). Both mothers and adolescents completed the *Issues Checklist (IC)* at Time 1 and at Time 2 (refer to Appendix a) and the adolescents filled out this measure for a third time (T3). This instrument was utilized to measure one of the dependent variables namely, conflict. The IC is a self-report measure designed to assess the frequency of disputes between parents and teenagers as well as the intensity of these disputes (Prinz, Foster, Kent, & O'Leary, 1979). It consists of a list of 17 issues which may result in disagreements between parents and adolescents. The types of issues included are curfew, chores, friends, and homework (e.g., "Which friends I spend time with" and "how I spend time after school"). For each item, the respondent indicates whether the topic was discussed in the last two weeks and reports "how hot" the discussion was on a scale ranging from calm to angry. Thus, for each subject the scale results in two scores, (1) The frequency of issues discussed between parents and adolescents, and (2) a weighted average that indicates the mean level of anger across discussions. Since this study was intending to assess the increase in conflict in terms of quantity rather than intensity only the

first score regarding the frequency of conflicts was utilized. Enyart (1984) found that the test-retest reliability in a non-clinic sample for adolescent report ranged from .49 - .80. In two studies that utilized a waiting-list group for their sample found that test-retest reliability of parent respondents range from .55 to .65 for the frequency of issues, and .40 to .90 for the weighted frequency by anger-intensity scores. The agreement reliability between mothers and adolescents averaged 68% (range= 38%-to 86%).

ACHENBACH CHILD BEHAVIOR CHECKLIST. The mothers completed the *Achenbach Child Behavior Checklist* (CBCL, Achenbach & Edelbrock, 1983) at both Time 1 and Time 2 (refer to Appendix a). The CBCL is a parent-report measure of childhood externalizing and internalizing symptomatology which contains 118 items, including, for example, "acts too young for his/her age" and "worrying". Since the symptoms that make up the internalizing and externalizing factors differ depending on the gender and age of the subject, the raw scores were transformed into standard T-scores. The use of T-scores makes it possible to make comparisons across all subjects. The score of the total number of symptoms reported by the mother was utilized. The alphas for the internalizing and externalizing scales were .85 and .87 respectively. Achenbach and Edelbrock (1983) found that the test-retest

reliability of this measure ranged from .61 to .98 over a 1 week interval and .78 over a 3 month interval. Furthermore, these researchers demonstrated that the CBCL scores accurately discriminated between referred and non-referred children and correlated significantly with other symptom checklists and questionnaires.

DECISION -MAKING QUESTIONNAIRE. Finally, mothers (at T1 and T2) and adolescents (at T1, T2 and T3) completed the Decision-Making Questionnaire (DMQ, Dornbusch, et al., 1985; Steinberg, 1987b). This measure was utilized to assess the pattern of maternal authority. This checklist addresses 17 areas of decision-making which are relevant to the age range studied. The items cover issues that pertain to a variety of dimensions such as how the adolescent spends her time and with whom she spends her time. For example, the following are two items from this measure: "How much time she has to spend on her homework" and "What friends she spends time with." For each item, the subject indicates whether the parents dictate how to behave, whether the parents ask the adolescent's opinion in forming a decision, or whether the parents leave the decision entirely up to the adolescent. All items were scored in the authoritarian direction. The internal consistency of this measure determined by Cronbach alpha is .78 for mothers and .76 for adolescents.

Results

The means and standard deviations for each variable at T1, T2 and at T3 for the children's report were calculated (see Table 2) in order to determine whether or not ceiling effects may have occurred. The findings indicate that ceiling effects for any of the variables.

Table 2

Means and standard deviations for the variables at T1, T2 and T3:

<u>Variable</u>	<u>REPORTER</u>	<u>MEAN</u>	<u>STANDARD DEVIATION</u>
TIME 1			
Beliefs (Categorical)	Mothers	36.22	9.12
Beliefs (Target)	Mothers	21.97	8.17
Conflict	Mothers	6.68	3.93
Conflict	Adolescents	6.64	3.73
Symptoms	Mothers	54.25	10.52
Control	Mothers	31.26	5.30
Control	Adolescents	36.32	5.84
TIME 2			
Beliefs (Categorical)	Mothers	37.01	9.20
Beliefs (Target)	Mothers	21.32	8.21
Conflict	Mothers	5.75	3.82
Conflict	Adolescents	5.20	3.08
Symptoms	Mothers	52.20	10.73
Control	Mothers	32.54	6.61
Control	Adolescent	36.95	7.09
TIME 3			
Conflict	Adolescent	4.21	3.43
Control	Adolescent	38.19	6.70

In order to test the first hypothesis a T-test was conducted. As predicted mothers' categorical-based beliefs ($M=36.22$) were significantly more stereotypical in nature than their target-based beliefs ($M=21.97$), $t(82) = 14.21$, $p<.001$. However, the analyses for the remaining hypotheses resulted in nonsignificant findings. A T-test was conducted comparing the change scores for the second hypothesis. The change in mothers' categorical-based beliefs ($M=0.23$) was not significantly different than the mean of the change of their target-based beliefs ($M=.63$), $t(82) = -0.87$, $p=.389$. This finding indicates that there was not a significantly greater degree of change in mothers' target-based beliefs compared to their categorical based beliefs from Time 1 (T1) to Time (T2).

In order to test hypotheses three through seven, multiple regression analyses were utilized. For all of the regression analyses the scores on the DV at T1 were entered first and the scores on variable being predicted were entered second. By entering the reporters score on the DV at T1 in the first step of the equation, it was possible to control for the variability in scores at T1. Thereby the relationship between mothers' beliefs at T1 and the change in the DV over time were directly assessed.

In terms of Hypotheses 3 and 4 the only variables that were significantly predictive of Mothers' report of conflict at T2 ($F(2, 80) = 27.641$, $p<.001$) (see Table 3) and

childrens' report of conflict at T2 ($F(2, 80) = 21.024$, $p < .001$) and T3 ($F(2, 80) = 12.201$, $p = .001$) (see Table 4) were the subjects scores on the DV at T1. Target-based beliefs at T1 were not significantly predictive of change in maternal ($F(2, 80) = .142$, $p = .707$) or adolescent ($F(2, 80) = .984$, $p = .324$) report of conflict from T1 to T2. These findings indicate that mothers' target-based beliefs about adolescence at T1 were not predictive of a change in either their (see Table 3) or their children's report (see Table 4) of mother-adolescent conflict from T1 to T2. Mothers' categorical-based beliefs at T1 were not significantly predictive of change in maternal ($F(2, 80) = .3.04$, $p = .085$) or adolescent ($F(2, 80) = .165$, $p = .686$) report of conflict from T1 to T2. These results show that level of conflict reported at T1 was the only variable that was predictive of level of conflict reported at T2 and T3. The proposed hypotheses regarding the relationships between mothers' categorical-based and target-based beliefs about adolescence and a change in both mothers and adolescents report of conflict over time were not supported. When these analyses were run separately for early and middle adolescents and for a change in adolescent report of conflict from T1 to T3 the results were nonsignificant as well. Thus, mothers' categorical and target based beliefs were not related to increases in mother or adolescent reported conflict.

Table 3

Multiple Regression Results for Mothers' Target (T) and Categorical (C) Beliefs About Adolescence and Change in Mothers' Report of Level of Conflict From T1 to T2:

Step	Var	Mult R	Beta	R2 Change
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Mother' Report of Conflict at T2

1	Frequency of Conflicts at T1	.50	.50	.25***
2	Mothers' T Beliefs	.51	-.04	.00
1	Frequency of Conflicts at T1	.50	.50	.25***
2	Mothers' C Beliefs	.53	-.17	.03

Mothers' Report of Conflict at T2 For Early Adolescents

1	Frequency of Conflicts at T1	.43	.43	.18***
2	Mothers' T Beliefs	.43	.05	.00
1	Frequency of Conflicts at T1	.43	.43	.18***
2	Mothers' C Beliefs	.43	-.05	.00

Mothers' Report of Conflict at T2 For Middle Adolescents

1	Frequency of Conflicts at T1	.55	.55	.30***
2	Mothers' T Beliefs	.56	-.11	.01
1	Frequency of Conflicts at T1	.55	.55	.30***
2	Mothers' C Beliefs	.61	-.27	.07

Note. For early adolescents, ages were 14-18 years (N=32) and for middle adolescents, ages were 10-14 years (N=51).

Mothers did not fill out the measures At T3.

*p< .05,

**p<.01,

***p<.001.

Table 4

Multiple Regression Results for Mothers' Target (T) and Categorical (C) Beliefs About Adolescence and Change in Adolescents' Report of Level of Conflict From T1 to T2 and From T2 to T3:

Step	Var	Mult R	Beta	R2 Change
Adolescent's Report of Conflict at T2				
1	Frequency of Conflicts at T1	.45	.45	.21***
2	Mothers' T Beliefs	.46	-.10	.01
1	Frequency of Conflicts at T1	.45	.45	.21***
2	Mothers' C Beliefs	.46	-.04	.00
Adolescents' Report of Conflict at T3				
1	Frequency of Conflicts at T1	.36	.36	.13***
2	Mothers' T Beliefs	.37	-.09	.00
1	Frequency of Conflicts at T1	.36	.36	.13***
2	Mothers' C Beliefs	.37	-.09	.00
Early Adolescents' Report of Conflict at T2				
1	Frequency of Conflicts at T1	.57	.57	.33***
2	Mothers' T Beliefs	.58	-.08	.00
1	Frequency of Conflicts at T1	.57	.57	.33***
2	Mothers' C Beliefs	.57	.03	.00
Early Adolescents' Report of Conflict at T3				
1	Frequency of Conflicts at T1	.51	.51	.26***
2	Mothers' T Beliefs	.52	-.12	.01
1	Frequency of Conflicts at T1	.51	.51	.26***
2	Mothers' C Beliefs	.52	-.12	.02

Step	Var	Mult R	Beta	R2 Change
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Middle Adolescents' Report of Conflict at T2

1	Frequency of Conflict at T1	.55	.55	.30***
2	Mothers' T Beliefs	.56	-.11	.01
1	Frequency of Conflict at T1	.55	.55	.30***
2	Mothers' C Beliefs	.61	-.27	.07

Middle Adolescents' Report of Conflict at T3.

1	Frequency of Conflict at T1	.06	.06	.00
2	Mothers' T Beliefs	.08	-.05	.00
1	Frequency of Conflict at T1	.06	.06	.00
2	Mothers' C Beliefs	.07	-.03	.00

Note. For early adolescents, ages were 14-18 years (N=32) and for middle adolescents, ages were 10-14 years (N=51).

Mothers did not fill out the measures At T3.

*p< .05,

**p<.01,

***p<.001.

As for the fifth hypothesis, mothers' report of symptoms at T1 was entered in the first step of the multiple regression analysis in order to control for the variability in the scores at T1. However, once again the only variable which was predictive of mothers' report of symptoms at T2 was the mother's report at T1 on the same measure ($F(2, 80) = 87.69$, $p < .001$, see Table 5). Mothers' target-based beliefs ($F(2, 80) = .524$, $p = .471$) and their categorical-based beliefs ($F(2, 80) = .001$, $p = .973$) were not significantly predictive of change in mothers' report of symptoms exhibited by their children from T1 to T2 (see Table 5). These findings indicate that a relationship was not found between mothers' target-based beliefs and categorical-based beliefs about adolescence at T1 and a change in the maternal report of symptoms that their child exhibits from T1 to T2 (see Table 5). The only variable which was predictive of maternal symptom report at T2 was symptom report at T1. Furthermore, when these analyses were run separately for early and middle adolescents, the results were nonsignificant as well. Thus, mothers categorical and target-based beliefs were not related to an increase in mother report of symptoms, but once again report on the measure at T1 was highly predictive of report on the same measure at T2.

Table 5

Multiple Regression Results for Mothers Target (T) and Categorical (C) Beliefs About Adolescence and Change in Mothers' Report of Level of Symptoms, From T1 to T2:

Step	Var	Mult R	Beta	R2 Change
Mothers' Report of Symptoms at T2				
1	CBCL-at T1	.72	.72	.52***
2	Mothers' T. Beliefs	.72	.06	.34
1	CBCL-at T1	.72	.72	.52***
2	Mothers' C Beliefs	.72	-.00	.00
Mothers' Report of Symptoms at T2 For Early Adolescents				
1	CBCL-at T1	.67	.67	.45***
2	Mothers' T Beliefs	.67	-.06	.00
1	CBCL-at T1	.67	.67	.45***
2	Mothers' C Beliefs	.67	.00	.00
Mothers' Report of Symptoms at T2 For Middle Adolescents				
1	CBCL-at T1	.87	.87	.76***
2	Mothers' T Beliefs	.88	.14	.02
1	CBCL-at T1	.87	.87	.76***
2	Mothers' C Beliefs	.87	-.04	.00

Note. For early adolescents, ages were 14-18 years (N=32) and for middle adolescents, ages were 10-14 years (N=51).

Adolescents did not fill out the CBCL measure. Mothers did not fill out the measures At T3.

* $p < .05$

** $p < .01$

*** $p < .001$

In order to test the final two hypotheses regarding change in report of adolescent control multiple regressions were utilized. As in the other analyses in this study, for hypothesis #7 mother's report at T1 on the DV was entered first into the equation in order to control for variability at T1. The same procedure regarding adolescents report at T1 was also conducted for hypothesis #8. Once again it was determined that the only variable that was predictive of mothers' report of adolescent control at T2 was mothers' report of adolescent control at T1 ($F(2, 80) = 65.72, p < .00$) control from T1 to T2. Mothers' target-based beliefs ($F(2, 80) = .1.57, p = .215$) and their categorical-based beliefs ($F(2, 80) = .010, p = .922$) were not significantly predictive of change in maternal report of adolescent control from T1 to T2. When these analyses were run separately for mothers of early and middle adolescent the results regarding the relationship between beliefs and change in control were also non-significant. Similar results were found for adolescents' report of control (See Table 7). Adolescents' report of adolescent control at T1 was predictive of their report at T2 ($F(2, 80) = 61.43, p < .00$) and at T3 ($F(2, 80) = 69.27, p < .00$). Mothers categorical-based beliefs ($F(2, 80) = 1.00, p = .320$) and their target-based beliefs ($F(2, 80) = .1.32, p = .255$) were not predictive of a change in adolescent report of adolescent control from T1 to T2. Nor was a significant relationship found between categorical-based and target-based

beliefs and change in adolescent report from T1 to T3 (see Table 7). These results show that once again report on the dependent variable at T1 was predictive of the subjects report at T2 and T3 and that the proposed relationship was not exhibited between mothers' beliefs and a change in their childrens' as well as their own report of adolescent control.

Table 7

Multiple Regression Results for Mothers Target (T) and Categorical (C) Beliefs About Adolescence and Change in Adolescents' Report of Level of Adolescent Control From T1 to T2 and T1 to T3:

Step	Var	Mult R	Beta	R2 Change
Adolescents' Report of Control at T2				
1	Degree of Control at T1	.66	.66	.43***
2	Mothers' T Beliefs	.66	.08	.44
1	Degree of Control at T1	.66	.66	.43***
2	Mothers' C Beliefs	.66	.10	.01
Adolescents' Report of Control at T3				
1	Degree of Control at T1	.68	.68	.46***
2	Mothers' T Beliefs	.68	.03	.00
1	Degree of Control at T1	.68	.68	.46***
2	Mothers' C Beliefs	.68	.05	.00
Early Adolescents' Report of Control at T2				
1	Degree of Control at T1	.48	.48	.23***
2	Mothers' T Beliefs	.50	.13	.02
1	Degree of Control at T1	.48	.48	.23***
2	Mothers' C Beliefs	.49	.11	.01
Early Adolescents' Report of Control at T3				
1	Degree of Control at T1	.62	.62	.38***
2	Mothers' T Beliefs	.64	.16	.02
1	Degree of Control at T1	.62	.62	.38***
2	Mothers' C Beliefs	.63	.14	.02
Middle Adolescents' Report of Control at T2				
1	Degree of Control at T1	.72	.72	.52***
2	Mothers' T Beliefs	.72	.04	.00
1	Degree of Control at T1	.72	.72	.52***
2	Mothers' C Beliefs	.73	.06	.00

Step	Var	Mult R	Beta	R2 Change
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Middle Adolescents' Report of Control at T3

1	Degree of Control at T1	.60	.60	.36***
2	Mothers' T Beliefs	.62	-.16	.03
1	Degree of Control at T1	.60	.60	.36***
2	Mothers' C Beliefs	.61	-.09	.01

Note. For early adolescents, ages were 14-18 years (N=32) and for middle adolescents, ages were 10-14 years (N=51).

Mothers did not fill out the measures At T3.

* $p < .05$,

** $p < .01$,

*** $p < .001$.

In order to explain the lack of significant findings in this study, the notion that the expected change in the mother-adolescent relationship may have already taken place before T1 will be explored in the discussion section in this paper. In order to support this notion an analysis was conducted to explore the relationship between the variables at T1, T2 and T3. Correlational matrices were conducted for all the variables at T1, T2 and T3 (see Table 8, 9 & 10). In terms of significant findings at T1 which are relevant for the discussion, Mothers' categorical-based beliefs were highly correlated with Mothers' report of symptoms ($r=.26$, $p<.01$) and a significant relationship was found between mothers' Target-based beliefs and Mothers' report of conflict ($r=.25$, $p<.01$) and symptoms ($r=.40$, $p<.001$). Furthermore, there seems to be high correlations on some of the measures filled out by the same reporter at each time period.

Table 8

Correlation Matrix for All of the Variables at T1:

	<u>CBeliefs</u>	<u>TBeliefs</u>	<u>IC(A)</u>	<u>(M)</u>	<u>DMO (A)</u>	<u>(M)</u>	<u>CBCL</u>
<u>CBeliefs</u>	1.00						
<u>TBeliefs</u>	.45***	1.00					
<u>IC (A)</u>	.08	-.13	1.00				
<u>IC (M)</u>	.07	.25**	-.09	1.00			
<u>DMO (A)</u>	-.06	.16	-.47***	.08	1.00		
<u>DMO (M)</u>	.02	.14	-.20*	-.04	.41***	1.00	
<u>CBCL</u>	.26**	.40***	.19*	.23**	-.14	-1.57	1.00

Note. In this table IC is the conflict measure, DMO is the measure of control and CBCL is the symptom measure. The symbol (A) represents adolescent report and (M) stands for mothers report.

* $p < .05$,

** $p < .01$,

*** $p < .001$.

Table 9

Correlation Matrix for All of the Variables at T2:

	IC (A)	(M)	DMO (A)	(M)	CBCL
<u>IC (A)</u>	1.00	.15	-.35**	-.29**	.06
<u>IC (M)</u>	.15	1.00	-.01	-.00	.09
<u>DMO (A)</u>	-.35**	-.01	1.00	.55***	.01
<u>DMO (M)</u>	.29**	-.00	.55***	1.00	-.03
<u>CBCL</u>	.06	.09	.01	-.03	1.00

Note. In this table IC is the conflict measure, DMQ is the measure of control and CBCL is the symptom measure. The symbol (A) represents adolescent report and (M) stands for mothers report.

* $p < .05$,

** $p < .01$,

*** $p < .001$.

Table 10

Correlation Matrix for the Variables at T3:

	<u>Conflict</u>	<u>Adolescent control</u>
<u>Conflict</u>	1.00	-.43***
<u>Adolescent control</u>	-.43***	1.00

Note. Only adolescents filled out the measures at T3

* $p < .05$,

** $p < .01$,

*** $p < .001$.

Discussion

In this study, the relationship between maternal beliefs about adolescence and change over time in the report of parent-adolescent conflict, symptom development and parenting style was examined. The findings of the study were generally inconsistent with the proposed hypotheses. The only hypothesis that was confirmed was that mothers' categorical beliefs were more stereotypical in nature than their target-based beliefs. The remaining hypotheses addressing the relationship between maternal beliefs and change in level of conflict, symptoms, and parenting style were not confirmed. The variable which consistently predicted the DV at T2 and T3 was the subjects report on the same measure at T1. Thus, for each variable addressed in the study the only factor that was predictive of the subjects report at T2 and at T3 was the subjects report at T1. In view of the means and standard deviations (see Table 2) of the dependent variables at T1, T2 and T3, ceiling effects do not seem to be a factor in terms of the lack of change across time.

C. Miller et al. (1986) found that parents level of experience with adolescents influenced their target-based beliefs and not their categorical based-beliefs. The finding that mothers' categorical-based beliefs tended to be more stereotypical in nature than their target based beliefs in the present study, further supports the notion that mothers' target-based beliefs may be more amenable to change than

categorical-based beliefs. Mothers seem to believe that their child's adolescence is characterized by less storm and stress notions than the "typical" adolescent. A mother's experience with her own adolescent child appears to influence her beliefs about her child's adolescence; however, the experience with her child does not seem to generalize to the mother's view of adolescence as a developmental stage. Thus, although an offspring of a particular mother may not be exhibiting the signs and symptoms of the "typical adolescent" the same mother may still tend to view adolescence in general as a developmental stage characterized by "storm and stress". As stated previously in this paper, categorical-based beliefs tend to be influenced greatly by the media. Since the media continues to portray adolescence as a period of storm and stress (Falchikov, 1986), it follows that mother's beliefs about adolescence in general will continue to be stereotypical in nature. Perhaps, in time, if articles are written for the popular journals describing "normal" adolescence and adolescent characters on TV are portrayed in a less stereotypical fashion, categorical-based beliefs may eventually become less stereotypical as well.

The effects of these beliefs on the adolescent-parent relationship still remains unclear. It is possible to conclude from the findings in this study that maternal beliefs do not effect the variables addressed and that the only variable which seems to predict behavior at a later date

is earlier report of behavior. The longitudinal hypotheses regarding an increase in conflict, symptoms, and the adolescent control from T1 to T2 were not confirmed. However, in a post hoc assessment it was determined that mothers' categorical-based beliefs were positively correlated with their report of symptoms at T1 and their target-based beliefs were positively correlated with their report of symptoms and conflict at T1. Thus, mothers' who tended to believe that adolescence in general, was a period of "storm and stress" and/or who held a storm and stress view of their own child's adolescence also reported a significant number of symptoms and a significant amount of conflict. These findings indicate that there is a relationship between maternal beliefs and two of the variables assessed in this study. The nonsignificant results of the longitudinal analyses in the current study do not enable us to clarify this relationship. The question that needs to be addressed at this point, pertains to the possible factors inherent in the current study that may serve to explain the nonsignificant results.

It seems probable that the design of the study may have contributed greatly to the nonsignificant findings. Since the same reporter filled out the measures in the same format (written) the notion of common method variance may serve as an alternate explanation for the high correlations found between the measures at T1 and T2. The common method

variance may also explain in part, the high regression coefficient found between T1 and T2 on the dependent variables. Since the dependent variables were assessed in the same fashion by the same person at T1 and T2, the high proportion of the variance accounted for at T2 by T1 could be due to the fact that the same reporter filled out the same measure at both times. However, since correlations were not found between all of the maternal measures or all of the adolescent measures, common method can not fully explain the high regression coefficients or the correlations. Thus, although common method variance does seem to be a confound in this study, it can't fully explain the correlations found between the variables.

Another aspect inherent in the study that may explain the non-significant findings is the span of time it covered. In order to test the proposed hypotheses regarding a change over time, the design of this study was longitudinal. Longitudinal studies spanning a long period of time are extremely costly and difficult to conduct. Due to practical considerations and the length of time in which pubertal changes are expected to occur, assessment periods of six months and one year were utilized. Since this study is assessing change that is expected to occur during the transition into adolescence, it would have been ideal to conduct the T1 assessments when all of the offspring were pre-pubescent. However, due to logistics and practical

considerations the subjects at T1 were extremely close to adolescence and in some cases they were already in that developmental stage (mean age=13 years). Thus, the hypothesized changes in the parent-adolescent relationship that were expected to be associated with maternal beliefs may have already taken place before the first assessment period.

As stated previously, mothers at T1 who tended to believe in the storm and stress notion of adolescence also reported a significant amount of symptoms and parent-adolescent conflict at time 1. Since this finding is correlational, the direction of the relationship between the two variables remains unclear. It may be that parents' beliefs were affected by their experience with their adolescent offspring and thus, they tended to endorse more stereotypical items or it may be that the parents' stereotypical beliefs about adolescence influenced their report of conflict and symptoms. If we interpret the finding in terms of the latter view then it may suggest that mother's beliefs have already affected the mothers' behavior and their relationship with their child before the first assessment period. Thus, mothers with "storm and stress" beliefs may have already "tightened the reins", before the first assessment period and thereby the associated changes in the parent-adolescent relationship may have occurred before T1. Perhaps the "self fulfilling prophesy" may have been enacted before T1 and thus after this point the mothers and children

would continue to report a high level of symptoms, conflict and degree of control. The time period assessed in this study may have coincided with a leveling off of the change in degree of adolescent control, level of conflict and symptoms. However, it's important to keep in mind both that the finding was correlational which means that the direction of the relationship is unclear and that common method variance may also partially explain the findings. Thus, the statements made based on the finding are highly speculative.

In terms of future research, the question regarding how parents' beliefs about adolescence affects their relationship with their offspring still remains. Parents beliefs do seem to be associated with report of conflict and symptoms. However, in order to truly understand the nature of this relationship it is important to conduct a longitudinal study spanning a longer period of time than the one conducted in the present investigation. The subjects should be followed from middle childhood to early adulthood with dependent variables being assessed during middle childhood, before adolescence, soon after adolescence, and finally when they reach early adulthood. The parents beliefs about adolescence should be assessed during their offsprings' middle childhood years. This approach would enable investigators to look at parents' preconceived beliefs about adolescence and the resulting effects that they may have on the level of conflict, symptoms and style of parenting over time and

specifically during and after the transition into adolescence. It may be possible to address the same question by utilizing both observational and self report measures to assess the dependent variables. By including observational measures the researcher could directly observe change in the variables over time, and thereby would not have to rely solely upon subjects' report. Utilizing observational measures would also prohibit common method variance from confounding the study. In terms of the types of observational measures to use in assessing the dependent variables in this study, it would make sense to use a structured interview to assess symptoms and perhaps a decision making family task to assess conflict and adolescent control. The family task could be video taped and coded in terms of level of conflict and degree of adolescent control.

The conclusions that follow from the present investigation are limited by the lack of significant findings. However, in view of the correlational findings and past research on the effects of beliefs on behavior it seems clear that there is a relationship between mothers' beliefs about adolescence and the level of conflict and symptoms that they report. Since parents tend to believe that they are capable of having an impact on their child's adolescence (C. Miller et al., 1987), it seems important to continue to investigate the effect of parents' beliefs about adolescence on their child's transition into adolescence.

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