



African American caregivers' resources for support: Implications for children's perceived support from their caregiver

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ABSTRACT

School-aged children often turn to their primary caregiver, such as a mother, father, or other close relative, for support in dealing with difficult situations. This cross-sectional, school-based study examined whether urban, lower-income African American caregivers' stressful life events, affective symptoms, and perceived support from their social network were associated with their children's perceptions of support from and conflict with the caregiver. Forty-six African American children aged 8–12 years and a primary caregiver were recruited from a partnering Midwestern United States elementary school and separately interviewed. Results showed that caregivers' report of greater support from their social network across a variety of domains was associated with children's report of greater instrumental support from their caregiver. Caregivers' report of greater attachment to members of their social network was associated with children's report of greater emotional support from their caregiver. Implications of findings for mental health promotion among children and families are discussed.

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1. Introduction

This cross-sectional, school-based study examines whether African American caregivers' stressful life events, affective symptoms, and perceived support from their social network are associated with children's perceptions of support from and conflict with their caregiver. In the United States, African American families are disproportionately exposed to adversities such as discrimination, joblessness, and poverty, which are directly linked to disparities in health and educational attainment for their children (e.g., Hurd, Sánchez, Zimmerman, & Caldwell, 2012; McLoyd, 1990; Pascoe & Richaman, 2009). African American children who experience feelings of oppression are more likely to experience difficulty with emotions, concentration and behavior, be diagnosed with Attention Deficit Hyperactivity Disorder (ADHD), and report their health as not excellent or very good when compared to non-Hispanic Whites (Flores & Tomany-Korman, 2008). A lower income level can exacerbate this situation by contributing to children's depressive symptoms and problem behaviors such as delinquency and aggression (Bogart et al., 2013). Additionally, African American children who experience a higher number of stressors (e.g., discrimination, poverty) experience achievement gaps in mathematics and reading when compared to non-Hispanic Whites, and attain significantly lower levels of earnings

and assets during young adulthood (Fantuzzo, LeBoeuf, Rouse, & Chen, 2012; Wickrama, Simons, & Baltimore, 2012).

To ensure that African American youth achieve optimal mental health and realize their full educational potential, it is important to examine mechanisms by which their resilience can be fostered. One such mechanism is social support from primary caregivers, which has been positively linked to the well-being of children and adolescents (Borawski, levers-Landis, Lovegreen, & Trapl, 2003; Chu, Saucier, & Hafner, 2010; Li, Feigelman, & Stanton, 2000; Sroufe, Egeland, Carlson, & Collins, 2005). Two types of support from caregivers are especially protective for the child — emotional and instrumental support (Brody & Flor, 1998; McMahon, Felix, & Nagarajan, 2011; Wills & Cleary, 1996). Emotional support involves accepting and valuing another person through expressions of trustworthiness, empathy, and love, while instrumental support involves providing tangible aid, such as assistance with tasks (Cohen & Wills, 1985; Wills, Vaccaro, & McNamara, 1992).

2. Conceptual framework

Heaney and Israel's (2008) model of social networks and social support can be applied to relationships between children and their caregivers, as well as relationships between caregivers and members of their extended social network. In this model, social support is both directly linked to mental health and physical health, and indirectly linked to health outcomes through the development of resources for resilience to stress, such as coping skills. The model suggests that an individual's ability to provide support to others is impacted by the community in

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which an individual is embedded, as well as the individual's own health status.

Consistent with Heaney and Israel's (2008) conceptual model, children who perceive greater support from their caregivers experience fewer mental health problems and exhibit fewer health risk behaviors (e.g., Resnick et al., 1997; Rueger & Malecki, 2011). Applying Heaney and Israel's model to caregiving, one can infer that caregivers' ability to provide support to their children is impacted by larger social–ecological factors, such as stressors. In the span of their child's development, caregivers may encounter a variety of stressful life events in different domains. Social ecological stressors may lead to affective symptoms, unhealthy forms of coping, and strained parenting among caregivers, which in turn can interfere with a caregivers' ability to provide adequate support to their children (Tein, Sandler, & Zautra, 2000). For example, work-related events ranging from racial discrimination to scheduling conflicts are associated with feelings of stress, anxiety, anger, and guilt among African American mothers, as well as perceived interference with family responsibilities (Cole & Secret, 2012; Gipson-Jones, 2009). Law-related events such as incarceration of a primary caregiver are associated with unstable childcare arrangements and strained parenting (Murray, Farrington, & Sekol, 2012). Health-related events can also impact caregivers' ability to support their children (e.g., Davey, Nino, Kissil, & Ingram, 2012). In addition to stressors, experiencing high levels of affective symptoms such as depression, anxiety, stress, and anger can interfere with parenting behavior and various aspects of parent–child interaction (Compas & Williams, 1990). In turn, children may perceive less support from their caregivers (Deater-Deckard, 2004). For example, higher levels of parent depression, anxiety, and anger among African American parents have been associated with parental report of less positive parent–adolescent interactions (Gutman, McLoyd, & Tokoyawa, 2005). In one study, African American fathers with moderate or severe depressive symptoms reported less contact with, lower closeness to, lower monitoring of, and greater conflict with their preteen sons (Davis, Caldwell, Clark, & Davis, 2009).

Caregivers' resources for social support may offset the negative impact of stressors and affective symptoms. A large body of literature demonstrates that support from family, friends, and community networks is related to less risk-taking, better physical health, and fewer psychological symptoms among adults (e.g., Bowleg et al., 2013; Lincoln, Chatters, & Taylor, 2003; Warren-Findlow, Laditka, Thompson, & Laditka, 2013). Caregivers who experience higher levels of support from their social network may be better able to provide support to their children despite stressful life circumstances and affective symptoms (Shook, Jones, Forehand, Dorsey, & Brody, 2010). In a study of African American youth from single-mother homes, mothers' report of higher levels of support from a co-parent (e.g., biological father, grandmother) was associated with greater child cognitive competence (e.g., very good at schoolwork) (Shook et al., 2010). In another study of predominantly White children, higher levels of social support from caregivers moderated the relationship between children's stressful life events and their behavior problems, such that children's stressors were only linked to behavior problems when the availability of social support from caregivers was low (Dubow & Tisak, 1989). Parenting interventions also highlight the importance of providing support to parents in order to positively impact child outcomes. Stewart-Brown and Schrader-Mcmillan (2011) qualitatively synthesized 53 systematic reviews identifying effective interventions to support parents, parenting, and the parent–child relationship from the ante-natal period to adolescence. They found that programs yielding the most positive outcomes (e.g., decreases in children's externalizing behaviors) focused on the parent–child relationship, specifically, teaching emotion communication skills and ways of fostering more positive parent–child interaction. Surprisingly, the effectiveness of programs did not improve with the addition of components such as teaching parents problem-solving techniques, developing children's academic, cognitive, and social skills, or providing additional services. What did influence program success

was whether the program facilitators offered non-judgmental, strengths-based support to validate parents' needs to be recognized and respected, and whether facilitators encouraged the development of support networks among participating parents (Stewart-Brown & Schrader-Mcmillan, 2011).

If caregivers are well-supported, children may perceive greater support from caregivers, which in turn may prevent or ameliorate children's mental health symptoms. Perceptions of received support are particularly important to assess because they are associated with an individual's wellbeing more strongly than are objective ratings of interactions between people (Chu et al., 2010; Wethington & Kessler, 1986). Previous studies have examined African American parents' perceived support from their social network (e.g., kin) in relation to different child outcomes, including parent/child communication and children's affective symptoms (e.g., Hoagwood et al., 2010; Taylor, Seaton, & Dominguez, 2008), as well as children's social and cognitive development (e.g., Burchinal, Follmer, & Bryant, 1996). Studies have also examined children's perceived support from primary caregivers in relation to perceived parental warmth and father involvement (e.g., McCabe & Clark, 1999), as well as children's social behavior (e.g., Anan & Barnett, 1999). However, previous literature has not examined the association between caregivers' perceived support from their social network and children's perceived support from their primary caregiver. Children's perceived support from caregivers may be the mechanism by which programs to enhance caregivers' support have a positive impact on children's outcomes. A better understanding of the association between caregivers' perceived support from their social network and children's perceived support from their primary caregiver can have practical implications for strengthening children's mental health and educational outcomes (Hoagwood et al., 2010). To the extent that children's perceived support from caregivers is a function of caregivers' perceived support from their network, interventions should target the enhancement of caregivers' support networks. The present study therefore aims to examine whether African American caregivers' stressful life events, affective symptoms, and perceived support from their social network are associated with children's perceptions of support from and conflict with their caregiver. The following research questions are examined:

- Is caregivers' stressor exposure associated with their affective symptoms?
- Is caregivers' stressor exposure associated with their perceived social support?
- Is caregivers' perceived social support associated with their affective symptoms?
- Is caregivers' stressor exposure associated with children's perceived social support from caregivers?
- Is caregivers' perceived social support from others associated with children's perceived social support from caregivers?
- Are caregivers' affective symptoms associated with children's perceived social support from caregivers?

3. Methods

3.1. Research site

This research is part of a community and academic collaboration involving the Minnesota Association of Black Psychologists, a non-profit organization focused on enhancing the well-being of African Americans through social change programs and positive approaches to research (Brady, Winston, & Gockley, 2014). The school from which caregivers and their children were recruited for this study serves a predominantly lower-income, ethnic minority community in the Midwestern United States. When data were collected, over 85% of enrolled students received free or reduced price lunch.

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