

THE EFFECTS OF MATERNAL AGE ON
PARENTAL MATURITY, PARENTING
STYLE, AND THE CHILD'S
DEVELOPMENT OF
SOCIAL SKILLS

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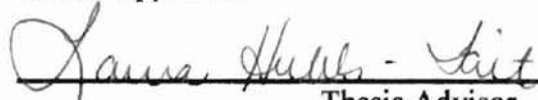
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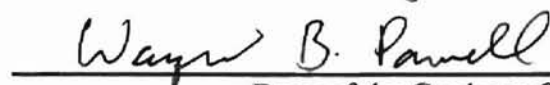
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CHAPTER ONE

INTRODUCTION

Freedom of choice and independence are cherished characteristics of the American society. There are no laws that govern items of personal choice, such as when and whether one may bear children, how many children one may have, or the type of family in which these children must be raised. There also seems to be no restraint on the age of the mother at conception. Young girls who have barely entered puberty may choose to carry a pregnancy to term and to keep the child. Advances in infertility treatments make multiple births and births to older (even post-menopausal) women possible as well. Even if it is not a problem for the parent, does parental age affect the quality of a child's life?

Maturity is a precursor of the ability to be sensitive to the needs of another above the needs of self. Although advances in age do not guarantee advances in maturity, developmental theory would lead one to expect a positive relationship between the two—at least until middle age. At that point, some adults tend to focus on completing unmet personal goals, which may or may not include being an available parent to a young child (Erikson, 1963). For those women whose own needs have consistently gone unmet, there may be no understanding of the individuality and needs of a dependent child. These children may be perceived more as costly objects that threaten to deprive the mother of scarce resources.

Problem Statement and Purpose

Minimal empirical research has been done to date on the effect of delayed childbearing on parenting style and the subsequent effect on the child's social development. One might ask whether these children are affected by their parents' increased age, in what manner, and to what extent. In contrast, the children born to teen parents have been studied to some extent with regard to their development of social skills. The purpose of this correlational study is to compare the psychological maturity and parenting styles of teen mothers, "on-time" mothers, and older mothers. The ability of their children to relate well with their peers will be compared as an outcome of the maternal measures. These samples will be selected from a group of rural, lower income participants involved in an ongoing longitudinal study of families whose children were enrolled in one of eight Head Start program sites (1995-96 or 1996-1997).

Conceptual Definitions

For the purpose of this study, a *teen parent* is one who was under nineteen at the time of her child's birth. An *on-time (or average-aged) mother* is one who was aged twenty-one to thirty-three at the time of her child's birth. A *delayed parent (or mother)* is one who was thirty-five or older at the time of her child's birth. Elder defines the *social timing* of lives as the "initiation of and departure from social roles, the duration and sequence of social roles, and the relevant age expectations and beliefs" (Elder, 1996, p. 38).

Social competence is defined as the ability of the child to interact well with peers. *Externalizing (undercontrolled) behavior problems* refers to other-directed displays of child anger, hostility, or aggression. *Internalizing behavior problems* are disturbances in the child's inner thought processes. Overcontrol results in these manifestations of inner-directed negativity that tend to produce anxiety, hesitation in relating with peers, and poor self-concept (Mash & Barkley, 1996).

For the purposes of this study, *parental maturity* refers to the ability of the parent to place the needs and wishes of the child above his/her own personal goals or needs.

Nurturant parenting refers to behaviors exhibited by the parent that demonstrate sensitivity, positive attention, involvement, warmth, and non-punitive discipline. *Corporal punishment*, or physical punishment, is interpreted as a means of power assertion or aggression. Those parents who choose to become hostile or to ignore or reject their child's bids for comfort when distressed were classified as *rejecting or neglecting parents*. *Inconsistent parenting* refers to the mixture of power-assertion, neglect, and permissiveness that some parents exhibit in response to their child's actions.

Bribing parents are those who used manipulative methods to encourage behavior modification in their children, such as offering candy as a reward for good behavior. For the purpose of this study, *effective parenting* and *positive parenting style* are interchangeable with nurturant parenting, while *ineffective parenting* refers to the other types.

CHAPTER TWO

LITERATURE REVIEW

According to Life Course perspective, the timing of human lives is ordered in response to socially constructed behavioral norms (Elder, 1996; Thompson, 1988). “Individuals assign social meanings to life course events (especially marriage and parenthood) concerning whether such transitions are on time, early, or late (Bengston & Allen, 1993, pp.477). These norms are developed within and in response to the time, place, and persons of a particular society (Bronfenbrenner, 1995; Santrock, 1995; Wright & Herrin, 1988). Expectations for the developmental progression toward psychosocial maturity influence the formation of these behavioral norms (Erikson, 1963; Miller, 1993). There is an ever-present risk of consequences for those whose lives are asynchronous with the socially prescribed norms.

Family theorists believe that off-time transitions within the family career are related to one of the following (1) an unusual sequence of events (2) premature truncation or (3) timing that is “off-schedule” (Mattessich & Hill, 1987). The Hill ABCX Crisis Model lists the birth of a child as one of a family’s major stressors, along with dismemberment, desertion, and destruction of morale (McCubbin & Patterson, 1983). It would seem that the social sanctions imposed against those who are “off-time” could

serve to increase the impact and intensity of stress during these transitional events (Gage & Christensen, 1991).

In the late 1800's, when the wagon trains crossed the prairies and life spans were much shorter, teen pregnancies were not considered abnormal or detrimental (Brooks-Gunn & Chase-Landale, 1994). Women married at a younger age and were expected to bear several children to furnish a labor base for the family's existence. Now, teen pregnancy is viewed as a potentially traumatic, off-time challenge. In our post-agrarian, post-industrial society, young teens are expected to pursue more advanced educational and career goals, to limit reproduction, and to accept personal responsibility at a later age. (There is some variation in timing norms with regard to ethnicity, geographic locale, and socio-economics (Brooks-Gunn & Chase-Landale, 1994).) Some current literature describes American teens as egocentric, immature, financially and emotionally insecure while their offspring are viewed as being at high risk for academic, social, health, and developmental problems (Clewell, Brooks-Gunn, & Benasich, 1989; Stockman & Budd, 1997).

Yet, statistics show that first-time births to teens, aged 15-19, rose slightly from 338 births per 1000 in 1990 to 397 per 1000 in 1994. At the same time, another somewhat "off-time" group of older parents (women, aged 35-44), showed an increased birth rate. Births to mothers, aged 35-39, in 1990 were 377 per 1000 while in 1994 they rose to 399 per 1000. Births to women, aged 40-44, rose from 77/1000 in 1990 to 95/1000 in 1994 (Statistical Abstract of the United States, 1997).

A rising trend toward delayed parenthood followed the rapid influx of American women into the labor force in the 1970's (Daniels & Weingarten, 1982). Among the more

frequently cited reasons for this pattern of deferment are “educational attainment, economic stability, and careers, particularly for women” (Garrison, Blalock, Zarski, & Merritt, 1997, p. 281). Advances in infertility treatments made later childbearing more feasible, including the 1997 live birth to a 63 year-old California woman (Golombek, Cook, Bish, & Murray, 1995; Miller-Rubin & Kotulak, 1997; Van Balen, 1996). One might ask whether there is no longer a physical limit to the age of conception.

Parenting practices are a product of the people within a culture at a specified time (Bronfenbrenner, 1995). Fortunately, “the Stubborn Child Act of 1654 which permitted a parent to put ‘stubborn’ children to death for noncompliance” in colonial America (Mash & Barkley, 1996, p.7) has long since been repealed. The concept of absolute parental ownership has diminished with the progression of time. No longer are children mere objects that are to be “seen and not heard”. A competent parent is currently defined as one who is “child-centered, able to express warmth and affection, to reason and communicate openly, to establish and enforce consistent rules and boundaries, and to avoid the use of arbitrary, restrictive, or overly punitive methods” (Woodward, Taylor, & Dowdney, 1998, p. 162). Satisfaction with the parental role is thought to enhance the sensitivity shown by parents to their children (Isabella, 1994). “Emotionally stable, physically and mentally healthy, and happy mothers raise mature children” (Heath, 1977, p. 268).

Along the continuum of demandingness and responsiveness, four distinct styles of parenting were described by Baumrind (Paulson & Sputa, 1996; Shaffer, 1994). Authoritative parents are warm and responsive, set firm limits, but are also democratic in their communication and disciplinary styles, and are sensitive to the needs of each child

(Smetana, 1995). According to Paulson & Sputa (1996), parents who are authoritative are more psychosocially mature. Those parents who are authoritarian place high demands on their children and are more punitive, but are not as responsive to the needs of the children for expression and warmth (Santrock, 1995). In contrast, permissive parents set very few limits, make few demands, and are warm and responsive (Shaffer, 1994). Those parents who are classified as neglecting-rejecting offer little direction, limitation, or encouragement for the child (Shaffer, 1994; Smetana, 1995).

The ability of the child to form effective peer relationships is “the key index of children’s social competence” (Hinshaw, Zupan, Simmel, Nigg, & Melnick, 1997, p. 880). Parents are implicated in the child’s social development due to their parenting styles and practices (Hinshaw, et al., 1997; Ketssetzes, Ryan, & Adams, 1998; Smetana, 1995). Children whose parents are overly directive or restrictive (intrusive, authoritarian) are thought to be less socially adept than those children whose parents are warmly involved but not overly coercive or restrictive (authoritative) (East & Felice, 1990; MacKinnon-Lewis, Starnes, Volling, & Johnson, 1997; Shaffer, 1994; Smetana, 1995; Strand & Wahler, 1996; Uno, Florsheim, & Uchino, 1998). Intrusive parenting is blamed for limiting the child’s ability to learn self-regulation of his/her arousal level which makes it more difficult for the child to function well in a social setting (Hooper, Burchinal, Roberts, Zeisel & Neebe, 1998; Miller, 1995; Silverman & Ragusa, 1992). However, it must also be noted that research has shown permissive-indulgent parenting promotes aggression and difficulties for the child in a rule-governed school setting (Rubin, Hastings, Cheu, Stewart, & McNichol, 1998). “Both permissive and power-assertive parenting styles have been linked to children’s aggression....to the extent that

children carry their experiences with their parents into their interactions with their peers, then, either of these styles of parenting might lead to emotionally dysregulated children being particularly at risk for engaging in socially maladaptive behaviors” (Rubin, et al., 1998, p.1616).

The parent’s level of maturity and other-directedness affects the ability to sensitively respond to the needs of the child. The child’s later ability to relate well with peers has also been linked indirectly to the type of attachment made by the infant with the primary caregiver (Ainsworth & Marvin, 1995; Fagot, 1997). The security of the attachment is positively correlated with the mother’s sensitivity to the needs of the infant (Ainsworth & Marvin, 1995). However, a stable social context is a prerequisite for continuity in attachment security over time (De Wolff & van Ilzendoorn, 1997).

According to Budd and Holdsworth (1996, p.8), “naivete about child development, unrealistic expectations of children, and stress or unhappiness about the parenting role have been associated in research with parenting problems”. Teen mothers often must confront their own issues of identity and autonomy, poverty, single parenthood, and the multitude of needs of their infant simultaneously (Barratt, Roach, & Colbert, 1991;Brooks-Gunn & Furstenberg, 1986; Hubbs-Tait et al., 1994; Parke & Buriel, 1998). Research has shown that teen mothers (more so than older mothers) are less knowledgeable about childcare, more punitively oriented, and more depressed and unrealistic in the expectations they have of their child’s development (Benasich & Brooks-Gunn, 1996; Bronstein, Duncan, Clauson, Abrams, Yannett, Ginsburg, & Milne, 1998; Hubbs-Tait, et al., 1994; Parke & Buriel, 1998; Reis, 1988). Teen moms also tend to have more children, closely spaced, than older mothers. Larger families tend to

function in a less democratic manner than those that have fewer children (Fallon & Bowles, 1997.) Marital instability, personal insecurity, and dissatisfaction with the responsibilities of parenting make this group at risk for greater stress (Lyons-Ruth & Zeanah, 1993). It is thought that these factors combined make them less able to feel emotionally close to their children (East & Felice, 1990) and to “provide the attention and support that young children need” (Reis, 1988, p. 148). Pregnant adolescents have been reported to have higher levels of identity diffusion and lower levels of trust than non-pregnant teens (Osofsky, Hann, & Peebles, 1993).

Erikson lists becoming a parent as one of three fundamental tasks of adulthood (Garrison, Blalock, Zarski, & Merritt, 1997). Even when delayed parenthood fulfills this task well, there are other considerations. Middle age has its own developmental agenda, which for some women includes the development and pursuit of personal and professional interests that have been delayed (Harris, Ellicott, & Holmes, 1986). Depression (and an accompanying decrease in parenting sensitivity) may result if the pregnancy is unplanned or unsupported (Zarling, Hirsch, & Landry 1988; Hoffman & Youngblade, 1998). Off-time childbearing may result in decreased social support (Gage & Christensen, 1991) which in turn leads one to expect a “curvilinear relationship between maternal age and satisfaction with parenting” (Ragozin, Basham, Crnic, Greenberg, & Robinson, 1982, p. 628). Older parents are more hesitant or unwilling to engage in the physically demanding co-play enjoyed by children (Parke & Buriel, 1998) which could be misconstrued by the child as a lack of involvement. They also “tend to score higher on the right wing authoritarianism scale than young adults” (Pratt, Hunsberger, Pancer, Roth, & Santolupo, 1993, p.592).

Peer acceptance is a function of social skill development. Research has shown that children who are shy, withdrawn, or have a negative self-concept tend to be neglected by their peers. Those children who are aggressive, demonstrate attention-getting mechanisms, or are lacking in prosocial behaviors tend to be rejected or regarded as controversial by their peers (Denham & Holt, 1993; George & Hartmann, 1996; Hatzichristou & Hopf, 1996). Children who are fearful, feel inferior, or act impulsively also tend to have difficulty relating well with peers (Brendgen, Vitaro, & Bukowski, 1998; Parke & Buriel, 1998). Research has shown that parental control, negativity, and directiveness are positively correlated with a child's aggressive and antisocial behaviors (Dishion, 1990). Neglected, rejected, and controversial children tend to be more at risk for delinquency and drug abuse as adolescents (Brown, Mounts, Lamborn, & Steinberg, 1993).

For the majority of individuals, a greater percentage of their lifetimes will be spent in the company of their peers. The facilitation of social skill development of young children by their parents would therefore appear to be of critical importance in preparing the children for life. Previous research has demonstrated that parenting styles affect the way in which children view themselves and their ability to relate with others. The most desirable results tend to result from consistent, warm, sensitive parenting. This type of parenting requires a high level of psychosocial maturity, evidenced by empathy, sensitivity, and the ability to respond responsibly to the needs of another, even when those needs are in conflict with one's own. Adolescence and middle age are periods of time within which personal identity is normally redefined. Therefore, one might assume that the more optimal parenting practices (and child social skill outcomes) would be

found within the group of “on-time” mothers and that the extremes of either of the other age groupings would reflect less desirable parenting practices.

Theoretical Models

Attachment Theory

Attachment is a “distinct but interlocking behavioral system” (Hazan & Shaver, 1994, p.1) that develops in response to the social-emotional bond that forms between an infant and his/her primary caretaker (usually the mother) (Ainsworth & Marvin, 1995). Bowlby, an ethologist, first explored this bond within the context of innate infant survival responses (Ainsworth & Bowlby, 1991). Erikson, and other developmental psychologists, believed that the development of this bond is a crucial determinant of the child’s future capacity for social development, including the ability to achieve positive peer relationships (Santrock, 1995; Sroufe, Egeland, & Kreutzer, 1990; Strage, 1998; Thompson, 1988).

The three basic types of attachments are secure, avoidant, and insecure/ambivalent (Levy, Blatt, & Shaver, 1998). Securely attached infants have parents who are sensitive, available, and responsive to the needs of the infant (Ainsworth & Bowlby, 1991). As a consequence of this warm, nurturant parenting, the following results may be expected: (1) a strong sense of agency, (2) a secure attachment, and (3) a positive working model of self and the caregiver (Bretherton, 1993; DeWolff & Ilzendoorn, 1997; Hubbs-Tait, Osofsky, Hann, & Culp, 1994; Miller, 1993; Shaffer, 1994). An internal working model (IWM) of the self is defined as “mental representations of the attachment figures, the self, and the relationship” (Miller, 1993, p. 313). A positive

internal working model of the self allows the child to explore his environment (including other people) more freely (Hazan & Shaver, 1994; Vandell, Owen, Wilson, & Henderson, 1988). In contrast to those of securely attached infants, “parents of avoidant children are often rejecting, aloof, or uncomfortable with bodily contact” (Levy, Blatt, & Shaver, 1998). Anxious children have parents who are more egocentric, intrusive, and inconsistent. Those infants whose attachment is marked by rejection or ambivalence tend to display overt anger in response to maternal inconsistencies (Davies & Cummings, 1994; Pederson & Moran, 1996). Parental abuse, depression, or instability is reflected in a pattern known as disorganized attachment (Dolz, Corezo, & Milner, 1997; Levy, Blatt, & Shaver, 1998). If the parental care given to the infant is insensitive, inattentive, or neglectful, then the child’s later ability to relate well with others is thought to be impaired (Bretherton, 1993; Cassidy & Berlin, 1994; Oliver & Paull, 1995). In adulthood, attachment style is related to parental maturity, satisfaction with parenting, and commitment (Levy, Blatt, & Shaver, 1998).

For men and women alike, middle age may be accompanied by the demands of a high level career or the wish to pursue one. For infants whose mothers remain highly integrated in their careers, the result may entail a pattern of insecure attachment that predicts future difficulties with peer interactions (Belsky & Rovine, 1988). Adults who are avoidant may prefer to remain absorbed in the activity of work rather than to invest in human interaction. (Hazan & Shaver, 1990). The opinion reflected in Dr. Ainsworth’s 1994 interview tends to support the notion that the quality of time prevails over the quantity of time spent in mother-infant interaction. When the child’s “relationship with the parents was essentially insecure” but a significant other adult had “functioned to

make up for the life of insecurity with the parents” a positive outcome was also possible (Ainsworth & Marvin, 1995).

Challenges to teen mothers in forming attachments with their infants originate within the developmental levels of the parents and their environments. A teenaged mother is expected to complete her education, which requires time and energy away from her infant. Living with her family may be supportive when she is younger, but at around age 16 the issues of autonomy make living in her parent’s home much more difficult for the young mother (Parke & Buriel, 1998). Since she is often single and unsupported by the child’s father, the resultant financial insecurity may force her to remain in a confusing and uncomfortable situation (Garcia Coll, Hoffman, & Oh, 1987). The infants of some very young, impoverished mothers may literally find themselves not knowing where they will be or with whom from day to day or hour to hour (Halperin, 1993). Poverty also tends to increase the instability of interactional quality, with infants being alternately “enjoyed or ignored, depending on what else was preoccupying adult caretakers at any particular moment” (Halperin, 1993, p.79).

Although it is not measured in this study, attachment quality is an indirect indicator of parental maturity. One must be mature enough to be sensitive to the needs of the child, rather than remaining preoccupied with the needs of self, in order for a secure attachment to be formed. Nurturance or sensitivity to the needs of the child, which is measured in this study, is also a key quality of authoritative parenting. One might question whether age and parental maturity are positively correlated with regard to positive parenting, secure attachment, and positive social skill formation for the children. Or, is there a curvilinear relationship? Is there an age at which parents again begin to turn

inward and thus are less sensitive to the needs of their children than they would have been at an earlier age? Both teen parents and older parents reportedly have scored higher on the measures of authoritarian parenting, which is less sensitive and warmly responsive to the needs of the child (Pratt, Hunsberger, Pancer, Roth, & Santoloupo, 1993). The construct of the internal working model (IWM) suggests that children tend to expect what they have already experienced. The IWM would further imply that children tend to become what they have experienced. If they are exposed to aggression, they tend to react aggressively. If they are shown sensitivity and kindness, they develop empathy for others. When exposed to a consistently empathetic environment, they learn to trust and to explore their social environment. Thus, the most positive peer interaction skills would be predicted to exist within those children whose parents are the most consistent, sensitive, and nurturant in their parenting style.

Life Course Theory

The timing of human lives is ordered by socially driven constructs that are shared by members of a particular group or society (Cooney, et al., 1993). Individuals assign the labels of on-time, early, or late to the timing of certain life course events (like marriage or parenthood). Although the timing of childbearing does appear to coincide with biological timing, the pressures to conform are strongly social in nature and tend to vary somewhat between cultures (Bengston & Allen, 1993; Levinson, 1986). “The social meanings of age give structure to the life course through age norms and sanctions, social timetables for the occurrence and order of events and generalized age grades” (Elder, 1996, p. 38).

The mother's own stage in life has relevance to the meaning of a child's birth (Elder, 1996).

Parenting style reportedly suffers as a result of immaturity and inexperience (Furstenburg, Brooks-Gunn, & Chase-Landale, 1989). Teen mothers typically have unrealistic developmental expectations of their children, attributed by different sources to lack of knowledge, egocentrism, and their culture of competition (Higginson, 1998; Osofsky, Hann, & Peebles, 1993; Stoiber & Houghton, 1993). Coupled with chaotic child-care arrangements, limited finances, and developmental demands of her own, these factors can present a real challenge for teen mothers and their children. Their children are also at risk because teen mothers are more likely to have large numbers of closely spaced children. Previous studies have shown that maternal involvement is lessened and more punitive in nature as the number of children increases (Barratt, 1991; Manlove, 1997). In addition, teen mothers are at risk for dissatisfaction with parenthood and depression (Brooks-Gunn & Furstenberg, 1986).

At the opposite end of the spectrum, delayed parents would be "expected to adapt to parenthood with greater difficulty than those parents who have their first child while in their twenties" (Garrison, et al., 1997, p. 282). Their off-time transitions are often unexpected, but even when they are eagerly anticipated, they are not accompanied by the same level of social support given to on-time peers (Cooney, et al., 1993; Schlesinger & Schlesinger, 1989). Some life course theorists would even label this group as dysfunctional due to their recalcitrance in meeting age-related tasks (Mattessich & Hill, 1987). However, there is also the viewpoint that the life cycle is changing to allow for an

additional phase of preparation for childbearing, which would make this group of parents fall closer to the “norm” (Roosa, 1988; Schlesinger & Schlesinger, 1989).

One of the concerns of the child, with regard to being off-time with his peers, includes the increased possibility that he will have to deal with parental decline and demise at a much earlier age than that of his peers (Morris, 1988). It is also likely that he will be given less social support by his peers during these times due to their own lack of personal experience (Yarrow, 1991). Children of older parents also tend to have fewer extended family members with whom to maintain close relationships, i.e., grandparents and same-aged cousins (Morris, 1988; Yarrow, 1991).

Another potential problem for these children lies in their sense of being “different” in some way from their peers. Children prefer to blend in with their peers. Having a gray-haired mother at the child’s kindergarten enrollment may not pose much of a problem, but by middle school, the parent’s age difference may cause some real embarrassment for that child (Hurlock, 1973). Historical timing also serves as a source of potential communication conflict in these families because the values and norms of the older parents may be significantly different from those of the younger parents (Hurlock, 1973). Behavioral and social expectations for the children of these two groups of parents may be affected as a result of these differences (Bronfenbrenner, 1995).

Erikson’s Theory of Psychosocial Development

Erikson believed that psychosocial development is cumulative over the individual’s life span. Because the lives of parents and children are usually closely

enmeshed, a brief synopsis of the pertinent stages is needed in order to understand how the development of one influences the other at a certain point. It is also important to remember that the parenting experienced by the parent at various stages will normally impact the care given later to their own children. In this review, only those stages that are related to the age periods pertinent to the current study will be discussed.

The first stage, trust versus mistrust, is the hallmark of infancy. It is during this time that the sensitivity of the primary caregiver has a lasting impact upon the child's capacity for trust and his/her subsequent ability to view human social interactions without fear or mistrust (Erikson, 1963; Miller, 1993; Santrock, 1995). If these initial interactions are neglectful or intimidating, the child's interest in learning to relate to others socially may be less than optimal.

From the ages of one to three years, the child faces the challenge of developing autonomy as opposed to shame and doubt (Santrock, 1995). Harsh discipline discourages exploration and autonomy while creating shame and doubt. Over-protection also tends to make the child fearful and less likely to explore and assert his/her independence (Erikson, 1963). During this period, "ideally, parents create a supportive atmosphere in which the child can develop a sense of self-control without a loss of self-esteem" (Miller, 1993, pp. 162).

Stage three occurs from the ages of three to six years. This period deals with issues of initiative and guilt (Erikson, 1963; Santrock, 1995). During this period, the child tries to decide what kind of person he wishes to become. Normally, the parents serve as the model of perfection to which the child aspires (Miller, 1993). If that model is extremely successful, demanding, or perfectionistic, it may be much harder for the child

to feel successful. In describing this stage, Miller states that “in addition to guilt, another danger is that the child may forever feel that he must always be doing something, always competing, always ‘making’ in order to have any worth as a person” (Miller, 1993, pp. 164). Previous research has shown that children who are hesitant, shy or insecure are less adept at relating with their peers.

By the time a child enters kindergarten, much of his social script has been written. Internal working models have been formed. The child has come to regard himself as worthy (or unworthy) of consistent, loving care. Trust in others has been established or negated. At this age, children have learned compensatory behaviors as well. Those children whose environments have not been conducive to the development of initiative will be shy, hesitant, and anxious. Some may become aggressive and rebellious. None of these behaviors are conducive to the formation of successful peer relationships. For some children, the developmental issues of the mother compound their own developmental needs. (The issues of the mothers are detailed in the following summaries.)

Erikson’s fifth stage deals with adolescents, ages twelve to twenty years. During this stage, the individual must confront issues of identity and role diffusion. The hormonal imbalances of puberty combine with a rapidly altered physical image and produce a self-reflective period of confusion and change. The individual must leave the comforts and confines of childhood, adjust to major physical and psychological changes and enter the adult world intact (Erikson, 1963; Mattessich & Hill, 1987; Santrock, 1995). “For the younger mothers, the task of self-discovery may take precedence over parenting” (Barratt, Roach, & Colbert, 1991, p. 448).

Young adulthood, from the ages of twenty to forty years, contains many challenges as well. At this stage, the individual is expected to form intimate relationships with friends and a lover. If unable to do so, a feeling of psychosocial isolation prevails (Santrock, 1995; Shaffer, 1994). It is during this stage that most women will bear their children (Statistical Abstract of the United States, 1997). Toward the end of this stage, the biological clock may combine with feelings of longing and loneliness to increase the need for previously childless women to bear children.

Erikson calls stage seven “generativity versus stagnation” (Shaffer, 1994). Middle-aged adults, aged forty to sixty-five years, are challenged to provide for the well-being of the next generation, either through raising children or other creative, productive endeavors. If an individual chooses instead to retreat and become self-centered and bored, he/she is considered emotionally stagnant (Miller, 1993). It is at this point that delayed desires may prove tempting to parents and challenge their ability to ignore their own interests in the best interest of their children. Time no longer seems to be a boundless commodity.

In accordance with the combination of these theories, one might expect that the relationship between maternal age and the child’s development of social skills with his/her peers to be curvilinear in nature. The developmental issues of adolescence and middle age may tend to lessen the ability of the mothers to be sensitive to the needs of their children. Parental maturity will also tend to exhibit this curvilinear tendency. Those children whose mothers are most sensitive, warm, nurturant, and consistent are expected to exhibit better peer relationships than those children whose mothers are controlling, insensitive, inconsistent, rejecting or neglecting.

Hypotheses

Based on the preceding literature review, the following hypotheses will be tested:

- (1) Mothers in each of three maternal age groups (14-18, 21-33, and 35 and above) will differ in parental maturity with those in the two extreme groups scoring lower on maturity.
- (2) When the children from each of these three maternal age groups are compared, the frequency of teacher rated internalizing and externalizing behavior problems will be greater in those children whose mothers are at either extreme of the age continuum.
- (3) Scores on measures of positive parenting practices will be greater (and scores on negative parenting practices will be lower) for those mothers in the 21-33 year old group than for mothers in the younger and older groups.
- (4) As levels of parental maturity increase, positive parenting practices will increase.
- (5) The more positive the parenting, the fewer teacher reported child behavior problems.

CHAPTER THREE

RESEARCH DESIGN AND METHODS

Overview

This correlational study was designed to explore the relationship between maternal age, maternal maturity, parenting practices, and the child's ability to relate well with peers. Maternal age was the independent variable in this study. Two potential intervening variables, maternal maturity and parenting practices, were also evaluated. The dependent variable measured was the child's ability to relate well with peers.

Operationalization

Maternal age was addressed by conceptually dividing mothers into three groups on the basis of age. The group identified as "teen mothers" were those who gave birth while under the age of nineteen. Those mothers who were classified as "on-time" were between the ages of twenty-one and thirty-three years when their children were born. Those mothers who gave birth at age thirty-five or older were classified as "older moms". This information was obtained from the Demographic Questionnaire.

The identity and intimacy subscales of the Erikson Psychosocial Stage Inventory (EPSI, Arehart & Smith, 1990) were utilized to evaluate parental maturity. The capacity for intimacy is operationalized as maternal maturity while struggles with identity were

operationalized as maternal immaturity. High scores on each of the two subscales were interpreted as evidence of maternal maturity.

Parenting practices were measured by subscales of the Adult-Adolescent Parenting Inventory (AAPI) and higher order factors of the Computer Presented Parenting Dilemmas (CPPD). The empathy subscale of the AAPI measured the mother's ability to respond sensitively to the needs of the child. Those mothers who responded very positively to the belief in corporal punishment were not perceived as being warm and responsive to the needs of the child, but rather power assertive in their parenting behavior. Parent-child role reversal was interpreted as a sign of poor emotional maturity of the parent while inappropriate developmental expectations about child development were viewed as an indication of a possible lack of information (Bavolek, 1989).

Parenting behaviors measured by the CPPD include five higher order factors: inconsistent or rejecting, bribing, nurturant, power assertion, and the use of time out. Inconsistency includes a mixture of hostile and permissive behaviors in response to children's aggression. When a child is in distress, a rejecting parent will ignore, yell or spank the child. Bribing includes bribing children with treats when they are distressed or non-compliant. Power assertive parents respond to their children's non-compliance with coercion, by ignoring them, or by using parental power (including physical punishment). Nurturant parents display warmth, enthusiastic involvement, non-punitive reasoning, positive reinforcement, and more attention to their children. The use of time out as a disciplinary measure included situations in which the child was either upset or non-compliant (Hubbs-Tait, Culp, Culp, Steele & Fore, 1998).

Children's social skills and behavior patterns were measured by several teacher rating scales. Subscales of the Preschool Behavior Questionnaire (PBQ, Behar & Stringfield, 1977) measure hostile/aggressive, hyperactive/distractive, and anxious/withdrawn behaviors that relate to difficulty with peer relations. Subscales of Howes' Rating Scale of Social Competence with Peers (RSSCP, Howes, 1988) measure hesitant, difficult, and sociable behaviors in children. Sharing and peer involvement were measured by the California Preschool Social Competency Scale (CPSCS, Levine, Elzey, & Lewis, 1969).

Subjects

This study has the mother-child dyad as the unit of study. All data were previously collected (as part of a larger research project) on mothers and children who participated in a longitudinal study of rural, lower income families. Children who participated were solicited from a list of those students enrolled in one of eight Head Start programs in 1995-1996 or 1996-1997. The current report is based on data collected in the Fall and Spring of the child's pre-kindergarten year in Head Start. Data collected from families with non-maternal caregivers was not included in this study. Mothers (n=157) who completed questionnaires in the Fall constitute the sample from which hypotheses concerning relationships among age, maturity, and parenting practices were examined. The mothers (N=122) who continued in the Spring constitute the sample on which hypotheses concerning relationships of childn's outcomes to parenting practices, age, and maturity were evaluated. Mothers were separated into three groups according to age at the time of the children's births: teen moms (14-18), "on-time" moms (21-33), and older moms (35 and older). (Refer to Tables 1-3 for demographic characteristics by group.)

Instruments:

Demographic Questionnaire. In the Fall of the child's pre-kindergarten Head Start year, each mother (n=157) completed a demographic information questionnaire. Information regarding marital status, ethnicity, and maternal age were obtained.

Computer-Presented Parenting Dilemmas. This modification of Holden's Computer Presented Social Situations (Holden & Ritchie, 1991) assesses parenting practices in response to various situations: child non-compliance, child distress, and peer interaction. inconsistency, rejection, bribing, nurturance, and power assertion. Previous research (Hubbs-Tait, Culp, Culp, Steele, & Fore, 1998) identified 17 parenting practice factors with alphas ranging from .50 to .84. These 17 factors were reduced to 5 higher-order parenting practices factors by means of principal components analysis. Internal consistency alphas for those five factors for the 122 mothers in the Spring sample were as follows: inconsistent/rejecting (.91), use of time out (.66), nurturance (.80), power assertion (.87), and bribing (.76).

Adult-Adolescent Parenting Inventory (AAPI). This 32-item instrument was completed by the mother in the Fall of the child's pre-kindergarten year. It was designed to assess parenting with regard to the following four dimensions: lack of empathy toward the needs of child, parent-child role reversal, belief in the use of corporal punishment, and inappropriate developmental expectations of children. The reading level permits completion by individuals who are as young as twelve. Construct validity (.70-.86) and test-retest reliability (.76) have been demonstrated in previous research (Bavolek, 1989; Fischer & Corcoran, 1994). Internal consistencies (standardized item alphas) for the four

subscales for the sample of 157 mothers in the Fall sample were as follows: role reversal (.87), physical punishment (.80), inappropriate expectations (.75), and lack of empathy (.85).

Erikson Psychosocial Stage Inventory (EPSI) In the Fall of the children's pre-kindergarten year of Head Start, mothers completed questions from two of the six subscales (intimacy and identity) of the EPSI. Previous research has documented internal consistency and construct validity (Arehart & Smith, 1990). The internal consistency of the two subscales for the sample of 157 mothers was .89 for identity and .74 for intimacy.

Preschool Behavior Questionnaire (PBQ), Behar & Stringfield, 1977). The PBQ was completed by the target child's Head Start teacher. This scale allows teachers to rate behavior problems in children from ages three to six with regard to the following subscales: hostile-aggressive, anxious-fearful, and hyperactive-distractible. Previous studies have documented the concurrent validity and internal consistency of this measure (Rubin & Clark, 1983). Internal consistencies of the three subscales for the sample of 122 children were as follows: hostile/aggressive (.93), anxious/fearful (.77), and hyperactive/distractible (.88).

California Preschool Social Competency Scale (CPSCS). The CPSCS is a standardized 30-item instrument designed to measure the social competence of preschool children from the ages of 2 ½ to 5 ½. A sample of 800 children, with equal gender distribution, was initially used to standardize this test. Half of those children were from families of "low occupational level" (Levine, Elzey, & Lewis, 1969). Sharing, and peer involvement are two of the factors analyzed by this instrument (Ladd & Price, 1987). The latter two are conceptually related to peer adjustment. Internal consistencies for these

subscales for the sample of 122 children were .90 for sharing and .84 for peer involvement.

Howes' Rating Scale for Social Competence with Peers (RSSCP). The RSSCP (Howes, 1988) is an 18-item rating scale designed for teachers to use in rating a child's ability to function well socially with peers. This scale consists of three subscales—two of which measure behavior problems (hesitant, difficult) and one that measures social competence (sociable). Internal consistencies for the three subscales on the sample of 122 children were as follows: hesitant (.79), sociable (.82), and difficult (.88).

Data Collection

The Administration on Children, Youth and Families (ACYF) and the National Institute of Mental Health (NIMH) provided funding for the larger research project from which these data were obtained.

Demographic information questionnaires, permission slips, the EPSI, and the AAPI were completed by the mothers in the presence of a research assistant in the Fall. These contacts were with the mother's consent and at her convenience. Monetary compensation was given for participation. In the Spring, teachers (at their convenience) completed the PBQ, the CPSCS, and the RSSC and were compensated monetarily for their participation. Mothers were compensated for completing the CPPD in the presence of a research assistant in the Spring.

Data Reduction

Maternal Age. Non-maternal caregivers were excluded from the data set prior to the division of groups by age. This resulted in a total of 209 mother-child dyads in the

Fall data set and 157 in the Spring data set. These totals were then categorized by maternal age at the time of the child's birth within the following three groups: teen mothers (14-18), "on-time" mothers (21-33), and older mothers (35 and older). The resulting sample size was 157 in the Fall and 122 in the Spring (see tables 1, 2, and 3).

Parenting Practices. Correlations among the four AAPI subscales ranged from .45 to .63. Thus all four subscales were combined into a total AAPI score. Items were reverse coded in order to allow a higher total score to reflect a higher level of negative parenting practices. The 17 factors of the CPPD were reduced by a principal component analysis to five higher order factors: power assertion, nurturant, bribing, inconsistent/rejecting, and use of time out. High scores on the total AAPI score, power assertion, bribing, and inconsistency/rejection were interpreted as being measures of negative parenting practices (and low scores on nurturance and the use of time out). High scores on nurturance and the use of time out were interpreted as measures of positive parenting practice (as well as low scores on the following: total AAPI, power assertion, bribing, and inconsistency/rejection).

Child Behaviors. A principal components analysis with varimax rotation was conducted on the two behavior subscales of the CPSCS (sharing and peer involvement), three subscales from the RSSCP (hesitant, difficult, and sociable), and the three subscales of the PBQ (hostile/aggressive, anxious/fearful, and hyperactive/distractible). As a result, two major factors were identified: teacher rated externalizing child behavior problems and teacher rated internalizing child behavior problems. The standardized item alphas were .96 for externalizing and .86 for internalizing behaviors. Factor loadings for the externalizing factor were as follows: aggressive (.93), difficult (.89), hyperactive (.87),

and shares (-.85). Subscales included in the internalizing group included sociable (-.70), hesitant (.78), anxious (.48), and peer involvement (-.84).

Operationalization of Hypotheses

Hypothesis 1

The mothers at either extreme of the age continuum will have lower scores on the EPSI subscale ratings of intimacy and identity.

Hypothesis 2

Mothers in the “on-time” (21-33) age group will have children who rate lower on the following measures than mothers in the other two groups:

- 1) Combined teacher ratings of externalizing child behaviors
- 2) Combined teacher ratings of internalizing child behaviors

Hypothesis 3

Mothers in the “on-time” group will score higher on measures of positive parenting practices (CPPD nurturance, use of time out) and lower on measures of negative parenting practices (CPPD inconsistency, rejection, power assertion, bribing, and AAPI total score) than the mothers in the younger and older groups.

Hypothesis 4

If there is no relationship demonstrated between maternal age and parenting practices, then measures of parenting practices and maternal maturity will be compared. As maternal intimacy and identity scores (measures of maturity) increase, maternal scores on measures of positive parenting practices will increase and those of negative parenting practices will decrease.

Hypothesis 5

As maternal scores on measures of positive parenting increase, the frequency of teacher reported internalizing and externalizing child behaviors will decrease. As maternal scores on measures of negative parenting decrease, the frequency of teacher reported internalizing and externalizing child behaviors will decrease.

CHAPTER FOUR

RESULTS

Hypothesis 1

This hypothesis explored the possibility of a relationship between maternal age and parental maturity. ANOVA's of the intimacy and identity subscales of the EPSI were grouped according to the mother's age group with maternal education and income as covariates. Results were not significant with regard to maternal age grouping for either subscale (see Table 4). The effect of one covariate, household income, was significant in the analysis of identity. The higher the income, the higher the identity score. The adjusted means (and standard deviations) for the older, on-time, and adolescent mothers for identity were as follows: 47.36 (-1.57), 48.40 (.47), and 47.00 (-1.94). The adjusted means (and standard deviations) for the older, on-time, and adolescent mothers for intimacy were as follows: 44.44 (-1.92), 46.70 (.35), and 45.33 (-1.03).

Hypothesis 2

This hypothesis proposed that children of older and younger mothers differ from children of on-time mothers on internalizing and externalizing behavior problems. Due to inadequate sample size for older mothers (n=7), the Spring data for older mothers and their children could not be included in this analysis. The covariates in this analysis were the same as for hypothesis 1, with the addition of child gender (see Table 5). Males were rated higher on both externalizing (\underline{m} =29.74 vs. 18.54; \underline{sd} =2.64 vs. 5.65) and

internalizing problems ($m=31.24$ vs. 25.91 ; $sd= 2.64$ vs. 2.69) than females. The effect of maternal age was not significant.

Hypothesis 3

Hypothesis 3 proposed that positive and negative parenting practices are related to maternal age. For the Fall sample of 157 mothers, this hypothesis was tested with the four AAPI parenting practices. For the Spring sample of 122 mothers, this hypothesis was tested only for the on-time and younger mothers, with the five higher order CPPD parenting practices factors. Results of the ANOVAs are reported in Table 6. The only parenting practice even marginally related to maternal age was the use of time out. On-time mothers reported the use of time out as a disciplinary measure more often than the teen mothers (adjusted means were 11.70 and 9.62, respectively). Increased maternal education reflected a lower total AAPI score, which indicates that as education increases, negative parenting practices decrease. There was a marginally positive relationship between household income and the CPPD bribing subscale; as income increases bribing decreases.

Hypothesis 4

Hypothesis 4 proposes that parenting practices are linearly related to parental maturity. Thus, the six parenting practices discussed in hypothesis 3 were treated as outcomes in regressions in which mothers' scores on intimacy and identity were the predictors. If the mother is struggling with issues of her own identity (i.e., low scores on identity), she tends to be less consistent, more rejecting, and more power assertive in her parenting practices. Measures of intimacy were not significantly related to any of the

parenting practice measures except bribing. As the level of intimacy increased the reported use of bribing decreased slightly.

Increased maternal education correlated with lower scores on the total AAPI parenting factors (a high AAPI total score indicates negative parenting practices). In addition, there was a weak tendency for bribing practices to decrease with increased household income.

Hypothesis 5

The final hypothesis asks whether there is a linear relationship between parenting practices and child behavior problems. In this analysis, the teacher ratings of externalizing and internalizing behavior problems were treated as outcomes while the parenting practice subscales of the CPPD and the total AAPI score were the predictors (see Table 8). Although there was no significant relationship between parenting practices and child outcomes, there was a strong association between child gender and teacher reported behavior problems. Male children were rated much higher on both internalizing and externalizing problems. There was a weak negative association between maternal education and internalizing problems.

CHAPTER FIVE

DISCUSSION

Hypotheses 1

Maternal maturity, as measured by the intimacy and identity subscales of the EPSI, was not significantly related to maternal age. This finding is in contrast to the literature reviewed. Lower scores on the identity subscale were expected for the youngest teens due to the turmoil associated with adolescent psychosocial development (Arehart & Smith, 1990; Santrock, 1995). Women entering the mid-life period were expected to score lower on identity since this period often serves as a time of redefinition of self (Levinson, 1986). The ability to relate intimately with another individual was expected to exhibit a pattern of lower scores within the two extremes of the age groups. However, these data did not support this prediction.

The covariate, monthly household income, was significantly related to the mother's score on the identity subscale (the better the income, the higher the score). This finding suggests that improved finances are more conducive to the development of this measure of personal maturity. Although it is not clear why this relationship exists, one might wonder if it exists because a woman has more time and energy to explore her own identity when she is more financially secure.

Hypothesis 2

Review of the literature would suggest that those children who were rated (by teachers) highly on externalizing and/or internalizing behavior problems would have greater difficulties in relating socially with their peers. It was predicted that the children whose mothers were at either extreme on the age continuum would have the highest scores on one or both of these scales. However, there was no significant relationship between maternal age and child behavior problems for the teen and “on-time” groups. The analysis of Spring data for the older group was eliminated due to sample size (n=7).

Male children were rated higher than females on both internalizing and externalizing behavior problems. One might question whether this perception by teachers is a result of the lower socio-economic status of the children (McLoyd, 1998). A comparison of gender and income within the sample studied showed that there were more female children who were living in the households that reported the lowest income levels. Those homes with the highest income levels in the sample had more male than female children, ruling out the possibility that lower household income explained the worse teacher ratings of boys than girls.

Male children in this society are socialized to have a higher level of physical activity and aggressive play than females (Fagot & Leinbach, 1993). This increased activity may not be much of a problem on the playground, but it may pose as a real irritant to the teacher in the classroom and account for the gender differences in behavior problems reported by teachers in this study..

Hypothesis 3

This hypothesis predicted that mothers in the “on-time” group would score higher on measures of positive parenting and lower on measures related to negative parenting practices than the mothers in either of the two other age groups. Much of the literature reviewed suggests that adolescent mothers and older mothers tend to be more authoritarian (more controlling, less nurturant) than their “on-time” counterparts (Brooks-Gunn & Furstenberg, 1986; Pratt, et al., 1993). With the exception of the use of time out, this data set did not support this hypothesis (on-time mothers used time out more than teen moms). Maternal education level did have an impact on parenting practice measures. As education increased, total AAPI scores decreased (measures of negative parenting) and the use of time out increased. Consistent with previous studies (Santrock, 1995), measures of authoritarian parenting were higher in those families with lower socio-economic status.

Hypothesis 4

Previous research suggests that increased parental maturity is expected to be related to increased positive (and decreased negative) parenting practices (Benasich & Brooks-Gunn, 1996; Bronstein, et al., 1988; Reis, 1988). A tendency to be more rejecting and inconsistent in parenting style was related to lower maternal identity scores. Thus, one might conclude that those mothers who were struggling with their own issues of identity did exhibit more negative parenting practices. Attachment theory literature reviewed would lead one to believe that a high capacity for intimacy would be required for sensitivity, empathy, and positive parenting. However, in the current study, the

mother's reported increased capacity for intimacy related only to the decline in the use of bribing techniques.

As household income improved, the tendency to use bribing techniques slightly decreased. The mother's level of education also significantly influenced parenting practices. As education increased, the mother's scores on the total AAPI (negative practices) decreased. This would lead one to assume that it is in the best interest of the children for society to provide mothers with the opportunity for a better income and more education.

Hypothesis 5

Studies by Baumrind and others indicate the probability of a relationship between parenting style and child behavior problems (East & Felice, 1990; Hinshaw, et al., 1997; Ketssetzes, Ryan, & Adams, 1998; Smetana, 1995). However, in this study, teachers consistently reported higher scores for males (rather than females) on measures of externalizing and internalizing behavior problems. Parenting practice subscales did not demonstrate a significant relationship to child outcomes. As was the case with hypothesis 2, these findings lead to questions regarding the origin of teacher rating differences with regard to child gender within this sample.

A slight decline in the number of child internalizing behavior problems accompanied an increased level of maternal education. This finding is also consistent with the recommendation that these children may benefit from the increased educational opportunities afforded to their mothers. Perhaps increased education makes it easier for the mother to understand her child's development. Or, the increased earning power that accompanies the increased education may give the mother access to less physically

demanding and more rewarding types of work. As a result, the child may experience more positive parenting from a mother who is less frustrated and exhausted than received by children of mothers who are less advantaged.

Conclusion

Due to the limited number of older mothers ($n=11, 7$) in this sample, no definite conclusions may be drawn with regard to the effect of advanced maternal age on parenting practices or child behavior outcomes. However, in light of the lack of significant results in the comparison of adolescent and on-time mothers, it is possible that maternal age is not related to either of the above.

Prior research tends to implicate parenting practices with regard to child behavior problems. However, this was not true in this study. One might question if parenting practices are truly unrelated, what does alter the child's outcome? Comparison studies of parenting practices, child temperament, and child behavior problems might better answer this question. At any rate, one must question why this particular study did not follow the common trend. This difference in findings may be a result of this sample being drawn from a population of essentially lower income families, rather than from a more socio-economically diverse group. Relationships between parenting and child outcomes were less apparent.

According to Kerbo (1996), one might assume that the children of lower class families would be socialized to be more conforming to external rules. If this is truly the case, one might expect these children to perform well in the rule-governed school environment. However, most of the teachers in those schools are middle class females whose own children are socialized to be more self-reliant, assertive, and inquisitive. Is it

possible that the behavior of the lower income children is more annoying to their teachers simply because it differs from the teachers' own personal norms?

Parent and child educators need to maintain an awareness of the effect of child gender-related biases on their assessment and delivery of information. Males and females are socialized and perceived differently in this society (Fagot & Leinbach, 1993). Heightened awareness of these differences in perceptions might increase the capacity for tolerance. An increase in the number of active learning sessions may better accommodate the needs of the more physically active students (typically male).

Improvements in the levels of maternal education and income are related to improved parenting practices. There are lower levels of internalizing behavior problems in those children whose mothers are more educated. The mothers tend to have an increased sense of identity with increased education. These factors would indicate that investing in improved opportunities for these mothers is beneficial. Welfare to work programs should be encouraged to offer increased educational benefits for their clients. This would provide the mothers the opportunity to avoid the restrictions of minimum wage jobs that are physically demanding and provide few monetary or psychosocial rewards (Brody & Flor, 1998). Welfare-to-work programs may need further evaluation in light of the impact of minimum wage employment on parenting practices (Kalil & Eccles, 1998).

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Table 1
Demographic Characteristics of Three Age Groups of Mothers

Characteristics	Adolescent		"On-time"		Older	
	Fall n=21	Spring n= 17	Fall n=125	Spring n=98	Fall n=11	Spring n=7
Birth Age						
Mean	16.82	16.79	25.36	25.35	41.98	37.92
Standard deviation	1.00	1.09	3.22	3.22	1.78	2.12
Household Income (monthly, freq.)						
\$0-100	0	0	1	1	1	0
\$100-499	4	2	16	13	2	1
\$500-999	5	4	21	12	1	1
\$1000-1499	7	6	33	28	3	2
\$1500-1999	3	3	32	28	4	3
\$2000-2499	1	1	12	8	0	0
\$2500-2999	1	0	7	6	0	0
\$3500-3999	0	0	1	1	0	0
\$4000+	0	0	1	1	0	0
missing data	0	0	1	0	0	0
Mother's Education (freq.)						
grade 5	0	0	1	0	0	0
7	1	1	0	0	0	0
8	1	1	1	1	0	0
9	4	3	4	4	1	1
10	3	3	10	5	3	0
11	0	0	6	5	0	1
12	3	2	41	30	3	3
some vo-tech.	3	3	8	8	0	0
some college	5	3	35	30	2	2
vo-tech. graduate	1	1	15	11	2	0
college graduate	0	0	4	4	0	0

Table 2

Additional Demographic Characteristics of Three Age Groups of Mothers

Characteristics	Adolescent		"On-time"		Older	
	<u>Fall</u> n=21	<u>Spring</u> n=17	<u>Fall</u> n=125	<u>Spring</u> n=98	<u>Fall</u> n=11	<u>Spring</u> n=7
Mother's Ethnicity (freq.)						
Native American	2	2	19	17	1	1
African American	0	0	4	3	2	2
Hispanic	0	0	6	4	0	0
Caucasian	19	15	95	73	8	4
Multi-ethnic	0	0	1	1	0	0
Marital Status (freq.)						
Married	8	8	63	51	2	2
Never Married	3	2	10	7	0	0
Separated	4	3	3	3	1	1
Divorced	6	4	19	12	4	2
Remarried	0	0	27	22	3	1
Widowed	0	0	3	3	1	1

Table 3
Demographic Characteristics of Children of Three Maternal Age Groups

Characteristics	Adolescents		"On-time"		Older	
	Fall n=21	Spring n=17	Fall n=125	Spring n=98	Fall n=11	Spring n=7
Child Gender (freq.)						
Males	10	8	64	50	5	3
Females	11	9	61	48	6	4
Child Ethnicity (freq.)						
Native American	6	4	33	29	2	2
African American	1	1	9	7	2	2
Hispanic	0	0	8	6	0	0
Caucasian	14	12	73	54	7	3
Multi-ethnic	0	0	2	2	0	0

Table 4

Analysis of Variance: Intimacy and Identity for Three Age Groups

Source	df	Intimacy	F	Identity
COVARIATES				
Income	1	2.43		9.01**
Education	1	1.69		.65
AGE GROUP	2	.86		.88
Residual	150			

+ p < .10 * p < .05 **p < .01

Table 5

Analysis of Variance: Child Behavior Problems for Two Age Groups

Source	df	Externalizing	F	Internalizing
COVARIATES				
Income	1	.82		.05
Education	1	1.69		.65
Child Gender	1	23.07**		10.57**
AGE GROUP	1	.23		.01
Residual	110			

Note: Older mother group excluded due to sample size (n=7)

+ $p < .10$ * $p < .05$ ** $p < .01$

Table 6

Analysis of Variance: Parenting Practices for Maternal Age Groups

Source	df	AAPI Total	CPPD INC/R	F			
				CPPD PA	CPPD NUR	CPPD TO	CPPD BRB
COVARIATES							
Income	1	.86	.24	.43	.65	.81	3.34+
Education	1	17.30**	.24	.92	.16	2.76	.88
Child Gender	1		.00	.96	.16	2.04	.96
AGE GROUP	2 ^A	.44	.06	.42	.23	3.63+	.43
Residual	1 ^B 114 ^A 107 ^B						

+ p < .10 * p < .05 ** p < .01

^A refers to data collected on three mother groups

^B refers to data collected on teen and on-time mothers, older group excluded (n=7)

CPPD Parenting Factor Abbreviations:

INC/R—inconsistent, rejecting

PA----power assertion

NUR--nurturant

TO—use of time out

BRB--bribing

Table 7

Relationship of Demographics and Maternal Maturity to Parenting Practices

Parenting Practices	Block	Predictors	ΔR^2	F	df	beta
INCONSISTENT REJECTING	1	Child Gender Education Income	.01	.43	3,113	.02 -.07 -.06
	2	Intimacy Identity	.12	7.41**	2,111	-.15 -.24*
POWER ASSERTION	1	Child Gender Education Income	.03	.96	3,108	-.07 -.12 -.07
	2	Intimacy Identity	.06	3.63*	2,106	-.04 -.23*
NURTURANT	1	Child Gender Education Income	.02	.62	3,110	.05 .05 .10
	2	Intimacy Identity	.07	4.17*	2,108	.19 .12
TIME OUT USE	1	Child Gender Education Income	.02	.84	3,107	.10 -.12 .05
	2	Intimacy Identity	.02	.95	2,105	-.12 -.02

Table 7 continued to next page

Table 7 continued

Relationship of Demographics and Maternal Maturity to Parenting Practices

Parenting Practice	Block	Predictor	ΔR^2	F	df	beta
BRIBING	1	Child Gender	.06	2.26+	3,110	-.05
		Education				-.13
		Income				-.18+
	2	Intimacy	.05	2.98+	2,108	-.21+
		Identity				-.02
AAPI TOTAL	1	Child Gender	.13	6.03***	3,117	-.03
		Education				-.34***
		Income				-.07
	2	Intimacy	.05	3.63*	2,115	-.12
		Identity				-.14

+ $p < .10$ * $p \leq .05$ ** $p < .01$ *** $p < .001$

Table 8

Relationship of Demographics and Parenting Practices to Child Behavior Problems

Child Behaviors	Block	Predictors	ΔR^2	F	df	beta
EXTERNALIZING	1	Child Gender ^a	.09 ^a	3.98 ^a	3,112 ^a	-.31***
		Income ^a				-.06
		Education ^a				.04
	2	Inconsistent	-.02 ^a	1.16 ^a	1,111 ^a	-.10
		Power Assert				.10
		Nurturant				-.02
Time Out					-.02	
		Bribing			-.10	
		AAPI total			.00	
INTERNALIZING	1	Child Gender ^a	.00 ^a	3.98 ^a	3,112	-.24*
		Income ^a				.05
		Education ^a				-.18+
	2	Inconsistent	.00 ^a	.38 ^a	1,110 ^a	.06
		Power Assert				.00
		Nurturant				.05
Time Out					-.03	
		Bribing			.09	
		AAPI total			.07	

+ $p < .10$ * $p < .05$ ** $p < .01$ *** $p < .001$

^a=Averages across all six factors.

APPENDIX

**OKLAHOMA STATE UNIVERSITY
INSTITUTIONAL REVIEW BOARD**

Date: March 22, 1999 IRB #: HE-99084
Proposal Title: "EFFECTS OF MATERNAL AGE ON PARENTAL MATURITY,
PARENTING STYLE, AND THE CHILD'S SUBSEQUENT DEVELOPMENT
OF SOCIAL SKILLS"
Principal Investigator(s): Dr. Laura Hubbs-Tait
Josephine Spears
Reviewed and Processed as: Pending Revision
Approval Status Recommended by Reviewer(s): Approved

Signature:

Carol Olson

Carol Olson, Director of University Research Compliance

March 22 1999

Date

Approvals are valid for one calendar year, after which time a request for continuation must be submitted. Any modification to the research project approved by the IRB must be submitted for approval. Approved projects are subject to monitoring by the IRB. Expedited and exempt projects may be reviewed by the full Institutional Review Board.

VITA

Josephine E. Spears

Candidate for the Degree of

Master of Science

Thesis: THE EFFECTS OF MATERNAL AGE ON PARENTAL MATURITY,
PARENTING STYLE, AND THE CHILD'S DEVELOPMENT OF
SOCIAL SKILLS

Major Field: Family Relations and Child Development

Biographical:

Education: Graduated from Pawnee (OK) High School in May 1970; received Diploma in Nursing (RN) from Hillcrest Medical Center School of Nursing, Tulsa, Oklahoma, in May, 1973 and a Bachelor of Science degree in Applied Sociology from Oklahoma State University, Stillwater, Oklahoma, in May, 1997, respectively. Completed the requirements for the Master of Science degree with a major in Family Relations and Child Development at Oklahoma State University in May, 1999. Current Oklahoma RN licensure.

Experience:

Pawnee Municipal Hospital: Charge and team nurse, all areas . Night supervisor, all areas (ER, OB, Nursery, Med.-Surg., ICU, OR, RR) 4 ½ years, OB and Nursery Supervisor, 2 years. Developed site specific OB and Nursery Manuals.
Tulsa Regional Medical Center: Team RN, NICU, 2 years
Stillwater Medical Center: Staff RN, medical-surgical unit, 1yr.
Cushing Regional Medical Center: Circulating RN, OR. 1 year
Oklahoma State University: graduate research assistant, ACYF grant, data collection, child testing (McCarthy, PPVT, and Harter), ECERS testing, 1 ½ yrs.

Professional Memberships:

Oklahoma Institute for Child Advocacy
Oklahoma Kid's Count Leadership Class 1998
Oklahoma Commission on Children and Youth