

PREDICTORS OF GENERATIONAL BOUNDARY DISSOLUTION IN SINGLE  
PARENT FAMILIES AND THE EFFECTS ON CHILD ADJUSTMENT

by

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## Abstract

This study investigated the relationships among maternal stress, depression, social support and generational boundary dissolution in a sample of 84 single mothers and their 7 to 11 year old eldest child. In addition, the mediational and moderational effects of boundary dissolution on the relationship between maternal distress and child adjustment were examined. The Parent-Child Boundaries Scale was used to assess generational boundary dissolution between mothers and their children. Both maternal stress and depression were significantly correlated with boundary dissolution. Boundary dissolution was significantly correlated with children's self-reported anxiety and with mothers' reports of children's internalizing and externalizing behavior problems. Mother-child boundaries were found to mediate the relationships between maternal stress and depression and children's self-reported anxiety. Gender differences were found in some of the mediational and moderational effects of specific subtypes of boundaries. These findings contribute to an understanding of the effects of systemic family processes on children's development in families at risk.

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Predictors of Generational Boundary Dissolution in Single Parent Families  
and the Effects on Child Adjustment

In the last couple of decades, there has been a substantial rise in the number of single-parent families (Scott, 1993). Empirical research has reported some significant disadvantages for children who grow up in divorced and/or single-parent families (Amato & Keith, 1991; Garfinkel & McLanahan, 1986; Hetherington, Stanley-Hagan, & Anderson, 1989; Walker & Hennig, 1997; White, 1994). Specifically, studies have found that single-parent families are faced with a variety of stressors including financial hardship, inadequate social support, and parental unavailability due to mothers having to return to work full-time (Gelles, 1989; Hao, 1995; McLanahan & Sandefur, 1994). The presence of these factors contributes to increased levels of maternal stress and depression which, in turn, negatively affect child adjustment (Cummings & Davies, 1994; Gelles, 1989; Pianta & Egeland, 1994).

In addition, several studies have reported difficulties in parent-child relationships in single-parent and divorced families (Hagan, Hollier, O'Connor, & Eisenberg, 1992; Hetherington & Clingempeel, 1992; Smetana, Yau, Restrepo, & Braeges, 1991). Parent-child relationships in single-parent families are characterized by increased intensity in both the levels of intimacy and conflict expressed (Hagan et al., 1992; Hetherington & Clingempeel, 1992; Walker & Hennig, 1997). While this may be a direct result of the increased stress with which single mothers are attempting to cope, the intensity in parent-child relationships may also be associated with the maintenance or dissolution of emotional boundaries in families undergoing stress and transition.

Therefore, the purpose of the present study was to examine the factors which may

predict boundary dissolution in mother-child relationships and to test mediational and moderational models of the relationships between these emotional boundaries and children's adjustment. In order to understand the process of boundary dissolution and the unique factors affecting boundaries in single parent families, three areas of literature will be reviewed: boundaries in parent-child relationships, parent-child relationships in single-parent families, and maternal distress in single-parent families.

### Boundaries in the Parent-Child Relationship

According to family systems theory, members of the family unit form several relationship subsystems which are interrelated, yet separated by emotional boundaries. The emotional boundaries of the various subsystems "are the rules defining who participates, and how" (Minuchin, 1974, p. 53). Ideally, family members follow the "rules" of their subsystem and avoid interfering in other subsystems. For example, adults' needs for physical and emotional intimacy are met by other adults in the system, children's needs for nurturance are met by their parents, and the parents take on the leadership roles in the family (Hiester, 1995; Minuchin, 1974). In this way, clear boundaries are established which ensure that the developmental needs of family members are met (Sroufe & Fleeson, 1988). In families where there is generational boundary dissolution, children's own developmental needs may not be met, for example, when they have to provide emotional support to a parent (Howes & Cicchetti, 1993; Minuchin, 1974). This can result in long-term adjustment difficulties for children (Fullinwider-Bush & Jacobvitz, 1993; Hiester, 1995; Jacobvitz & Bush, 1996).

The presence of clear emotional boundaries between mothers and their children has a significant impact on children's psychosocial development (Minuchin, 1974). Recently,

researchers in the area of developmental psychopathology have emphasized the importance of studying the child in the context of the family system (Howes & Cicchetti, 1993) and have begun to document the negative effects of inappropriate boundaries on children's adjustment (Fish, Belsky, & Youngblade, 1991; Fullinwider-Bush & Jacobvitz, 1993; Hiester, 1995; Jacobvitz & Bush, 1996; Jacobvitz & Sroufe, 1987; Kerig, 1995; Olver, Aries, & Batgos, 1989).

To date, the construct of boundary dissolution has been defined and operationalized in various ways throughout the empirical literature. One form of boundary dissolution, termed spousification (Hiester, 1995), or spill-over (Engfer, 1988; Kerig, Cowan, & Cowan, 1993), describes a process in which maritally unhappy parents transfer negative feelings towards their partners onto their children. In contrast, some parents may form an overly-close bond in which they seek emotional support and nurturance from their children, termed role-reversal (Jacobvitz, Morgan, Kretchmar, & Morgan, 1991), parentification (Mika, Bergner, & Baum, 1987; Sroufe, Jacobvitz, Magelsdorf, DeAngelo, & Ward, 1985; Valleau, Bergner, & Horton, 1995), or the child-like parent (Hiester, 1995). Some studies have focused on the concept of maternal intrusiveness (Egeland, Pianta, & O'Brien, 1993; Olver et al., 1989) or over-protectiveness (Thomasgard, Metz, Edelbrock, & Shonkoff, 1995). An extreme form of boundary dissolution may occur in which parents form an enmeshed relationship with their children, characterized by a lack of separation and individuation (Fullinwider-Bush & Jacobvitz, 1993; Olver et al., 1989). In enmeshed relationships, there is a lack of acknowledgment of boundaries between self and other and so parents form an extremely close relationship with their children which restricts the children's independence and

identity formation (Fullinwider-Bush & Jacobvitz, 1993). Lastly, parents may provide protection from spill-over by clearly delineating the boundaries between parental issues and parent-child relationships (Kerig, 1995). Thus, parents may actively protect their children from the stress they are going through and avoid discussing adult-oriented personal matters with their children.

When the marital subsystem is distressed, there is an increased risk for inappropriate boundaries between parents and their children (Fish et al., 1991; Hiester, 1995; Kerig, 1995). Parents who are unable to receive adequate support or emotional satisfaction from their partners may be more likely to seek support from their children or become increasingly overprotective or involved with their children (Howes & Cicchetti, 1993; Osofsky, 1995). On the positive side, the maintenance of appropriate emotional boundaries can protect children from these kinds of family stress. Parents who maintain clear boundaries between themselves and their children provide for their children's emotional needs, but also allow their children adequate independence for personal development (Minuchin, 1974). For example, appropriate boundaries have been identified as a potential buffer against the negative effects of interparental discord on children (Kerig, 1995).

While the relationship between marital conflict and boundary maintenance has been investigated in two-parent families, there is a lack of information regarding the impact of these issues in single-parent families. Even though disturbances in parent-child roles and boundaries have been suggested as important concerns in single parent families (Walker & Hennig, 1997), empirical research has just begun to address these issues with this population (Brown, Kerig, & Scharfenberg, 1997; Scharfenberg, Kerig, Lim, & Brown,

1997). For example, single mothers may be experiencing high levels of distress and receiving little, if any, support from previous partners. Given the absence of a spousal system, single mothers may rely on their children for emotional support, increasing the level of intimacy and intensity in the parent-child relationship. This process would result in increased boundary dissolution in the parent-child relationship.

### Parent-Child Relationships in Single-Parent Families

There are some unique qualities of parent-child relationships in single-parent families which seem to be related to processes of boundary dissolution. There is some evidence that single parent families are less hierarchical and more egalitarian, resulting in a blurring of the roles of parents and children (Hanson, 1988; Hetherington & Clingempeel, 1992). Children in single-parent families may have to take on more responsibility for the well-being of other family members, resulting in a weakening of generational boundaries (Walker & Hennig, 1997).

Secondly, parent-child relationships in single-mother families tend to be "affectively charged" (Walker & Hennig, 1997, p. 3), including both high levels of affection and high levels of conflict and negativity (Amato & Keith, 1991; Cohen, 1994; Smetana et al., 1991; Walker & Hennig, 1997). For example, Walker and Hennig (1997) found that children and parents in single-parent families demonstrated poorer control over their emotions in verbal discussions than did children and parents in two-parent families. Although single parents and their children engage in more conflict and disagreement, they also share their thoughts and feelings and provide greater mutual support in their relationships than parents and children in two-parent families.

Both the blurring of roles and the intensifying of emotions in parent-child

relationships can be understood as part of a process of increased generational boundary dissolution. Mothers coping with the stresses of single parenthood may rely more on their children to provide them with emotional and instrumental support, resulting in increased boundary dissolution between themselves and their children.

It is important to note, however, that not all research demonstrates consistently negative findings related to child adjustment and parent-child relationships when comparing single-parent to two-parent families. For example, Ricciuti and Snow (1997) did not find any risk for children's school readiness and achievement in single-parent families. In addition, Walker and Hennig (1997) did not find that all single-parent families in their study engaged in less hierarchical and intimate parent-child relationships. In addition, it should be highlighted that although Walker and Hennig (1997) found that single parents and their children demonstrated more hostility and conflict, they also demonstrated increased nurturance and mutual support. Hagan, Hollier, O'Connor, and Eisenberg (1992) have also noted that despite their general findings of increased difficulties in parent-child relationships in single-parent and divorced families, there was considerable diversity in the adjustment of families to marital transitions. Therefore, it is important to investigate the specific qualities of parent-child relationships, such as boundary maintenance, which may account for some of these differences in adjustment found in families dealing with stressful events and transitions.

#### Maternal Distress: Risk factors in Single-Parent Families

Single parents may be dealing with a variety of psychosocial stressors which would increase the potential for boundary dissolution in the parent-child relationship, and consequently, place children at increased risk for adjustment difficulties.



Maternal Stress. As noted above, empirical research on single-parent families has reported that these families experience more stressful life events than do two-parent families (Forgatch, Patterson, & Skinner, 1988; McLanahan & Sandefur, 1994). Maternal stress has an important impact on children's development and has been found to be related to children's behavior problems (Pianta, Egeland, & Sroufe, 1990) and poorer overall adjustment (Garmezy, Masten, & Tellegan, 1984). Parental stress negatively affects child adjustment through increasing parent-child conflict (Forgatch et al., 1988) and decreasing parental availability and warmth (Belsky, 1984; Klebanov, Brooks-Gunn, & Duncan, 1994).

Maternal stress has been related to an increase in intrusive parenting behaviors (Egeland, Pianta, & O'Brien, 1993) and child maltreatment (Gelles, 1989; Pianta, Egeland, & Erikson, 1989). In addition, mothers reporting higher levels of stress and anxiety were found to attribute more responsibility for caregiving difficulties to their children. These mothers also expressed a desire for children to be more independent and self-reliant, in order to decrease their own parental responsibilities (Wefel, Frye, & Adam, 1997). These maternal responses to stress describe a process of boundary dissolution where mothers may be more intrusive with their children and may rely more on their children to meet their own needs.

Maternal Depression. Single parenthood not only increases life stress, but is also related to increases in maternal depressive symptoms (Hall & Sachs, 1993; Siegel, 1995). Research has found that children of depressed parents are at an increased risk for the development of psychopathology (Beardslee, Bemporad, Keller & Klerman, 1983; for a review, see Cummings & Davies, 1994). Maternal depression can negatively affect

children by exposing them to depressive behavior and by changing the quality of parent-child interactions (Cummings, 1995; Cummings & Davies, 1994; Teti, Gelford, Messinger, & Isabella, 1995). Research has shown, for example, that depressed parents tend to be less psychologically available and more detached from their children or more intrusive and overinvolved with their children (Biringen & Robinson, 1991; Gordon et al., 1989).

Recent theoretical developments in the area of parental depression have focused on the effects of maternal depression on children's emotional security (Cummings, 1995; Cummings & Cicchetti, 1990). Cummings (1995) hypothesizes that children's emotional insecurity will increase their motivation to support their parents or attempt to regulate their parents' emotional state and behavior (Cummings, 1995). As with the effects associated with maternal stress, these processes all have implications for the dissolution of boundaries in the mother-child relationship. For example, an increase in parents' intrusiveness with their children will result in less clear boundaries between mothers and children, and children's active involvement in regulating their parents' behavior may place them in a parenting role.

Maternal Social Support. Maternal social support is a third important factor affecting parent and child functioning in single-parent families. Several studies have reported that single mothers receive less social support than mothers in two-parent families (Klebanov et al., 1994; Nelson, 1995), which may result in these mothers relying on their children to meet their emotional needs. Research has found that single mothers who received instrumental support from work or school associates and emotional support in personal relationships were at a lower risk for abusing their children (Moncher, 1995) and were more emotionally available to their children (Taylor & Chesler, 1993). In their

study of boundary violations in two-parent families. Fish et al. (1991) found that wives who received low levels of social support were more likely to have mother-child relationships characterized by increased boundary dissolution.

Although maternal stress, depression, and social support have been investigated as independent constructs, research has also shown that these factors are interrelated with each other (Pianta & Egeland, 1994; Simons, Lorenz, Conger, & Wu, 1992; Simons, Lorenz, Wu, & Conger, 1993). For example, Simons et al. (1992; 1993) found that lack of spousal support was related to parental depression and that financial stress was related to both parental depression and lack of spousal support. In addition, a study by Pianta and Egeland (1994) on the links between stress and depression supported the bidirectional relationship between maternal stress and maternal depression. Therefore, maternal stress, depression, and social support may co-occur in single parent families, having a combined effect on the process of generational boundary dissolution.

#### Moderating Effects of Generational Boundaries on Child Adjustment

As outlined above, maternal stress, depression, and lack of social support may all contribute to the dissolution of boundaries in the parent-child relationship. However, maintenance of clear emotional boundaries despite the occurrence of these stressors can play an important moderating role in children's adjustment. While boundary dissolution may exacerbate the negative effects of parental stress and unavailability on children, clear emotional boundaries in the parent-child relationship may lead to a felt sense of security which will result in increased resiliency. Davies' and Cummings' (1994; see also Cummings & Davies, 1995) emotional security hypothesis proposes that children's representations of security in the parent-child relationship are distinct from their feelings of

insecurity resulting from family stress. These representations of parental emotional availability may, therefore, buffer children from the effects of stress and play an important role in their psychological adjustment (see also Rutter, 1979; 1990).

Researchers in developmental psychopathology have stressed the importance of identifying the specific processes which contribute to resiliency in children growing up in stressful environments (Cicchetti, 1993; Cicchetti & Garmezy, 1993). Examining the process of boundary dissolution between mothers and children may contribute to our understanding of the factors which protect children from the development of childhood adjustment difficulties.

#### Gender Issues in Generational Boundary Dissolution

The potential moderating and mediating effects of boundary dissolution on child adjustment are complicated by the fact that gender differences in parent-child boundaries have been reported in the literature. For example, some studies have found that mothers engage in more intrusiveness and over-protectiveness with daughters than with sons (Fullinwider-Bush & Jacobvitz, 1993; Olver et al., 1989), while others have reported no gender differences in parents' intrusive behaviors (Thomasgard et al., 1995). In addition, it has been found that mothers who are unhappy with their marital relationship are more likely to interact with their sons as an intimate partner, but are more likely to place their daughters in a parenting role (Hiester, 1995; Mika et al., 1987; Valleau et al., 1995). Contradictory findings regarding gender differences have also emerged, however. Some studies report that mothers in maritally distressed relationships are more hostile with sons, allowing their feelings towards their partner to "spill over" onto their sons (Hetherington & Clingempeel, 1992; Kerig et al., 1993), while other studies report that these mothers are

more intimate and "enmeshed" with their sons while engaging in more hostile interactions with their daughters (Hiester, 1995; Sroufe et al., 1985). These gender issues in boundary violations have not been investigated in single parent families, however, where the spousal system is absent.

As a result of these gender differences reported in the literature, boundary dissolution in parent-child relationships may have different effects on boys and girls. Mothers may engage in different types of boundary violations depending on the gender of their child and this may result in unique patterns of adjustment difficulties for girls and boys.

#### Classifying and Measuring Parent-Child Boundaries

To date, parent-child boundaries have generally been measured through observational coding methods. However, these methods require a lot of time and resources, and are, therefore, not easily implemented in applied settings (Kerig, 1995). Some self-report measures have been developed which contain subscales assessing boundary dissolution, however, they measure limited dimensions of the construct. Only two parent-report measures currently exist which assess particular dimensions of boundary dissolution. The Adult-Adolescent Parenting Inventory (AAPI, Bavolek, 1986) contains one subscale of boundary dissolution, a role-reversal scale. The Parent Protection Scale is a measure of parental "intrusiveness" (Thomasgard et al., 1995). In addition, there are two items on this scale which are reflective of an enmeshed relationship: "I encourage my child to depend on me", and "I have difficulty separating from my child". The majority of the self-report measures have been developed to assess college students' perceptions of their relationships with their parents (Bavolek, 1986; Jacobvitz & Bush, 1996; Mika et al.,

1987; Olver et al., 1989; Valleau et al., 1995). There are currently no available self-report measures for children to describe these qualities of the parent-child relationship.

Therefore, a measure of boundary dissolution has been developed for the purposes of this study, the Parent-Child Boundaries Scale (PBS). This measure is based on the various types of boundaries discussed in the literature, including five types of boundary dissolution: intrusiveness, spousification, role-reversal, enmeshment, and protection from spill-over. In addition, versions for both parents and children were developed. This measure provided a comprehensive measure of boundary dissolution as reported by both mothers and their children.

### Hypotheses

1. One of the purposes of the present study was to validate the Parent-Child Boundaries Scale. To assess the construct validity of the Parent-Child Boundaries scale, mothers' reports of boundary dissolution were correlated with theoretically related parenting constructs on other measures of parental behavior. It was hypothesized that mothers who were socially isolated would be more likely to engage in enmeshed relationships with their children, and mothers who lacked a sense of competence would be more likely to rely on their children to meet their needs. It was also hypothesized that mothers who engaged in more boundary dissolution, particularly intrusive and enmeshed behaviors, would be less likely to encourage the independence of their children.

2. Lack of social support, increased life stress, and maternal depression were expected to be associated with boundary dissolution between mothers and their children. The relative predictive power of each of these variables was examined.

3. Mother-child boundaries were investigated as potential mediators or

moderators of the relationship between three maternal risk factors (i.e., maternal stress, depression, and lack of social support) and child adjustment. The extent to which mothers maintained clear boundaries with their children was hypothesized to protect children from experiencing internalizing and externalizing difficulties. Children's level of anxiety may be particularly affected by these boundary violations given the hypothesized impact of these parent-child processes on children's sense of emotional insecurity and vulnerability (Cummings & Davies, 1995).

Baron and Kenny (1986) have outlined the conceptual and statistical differences between mediators and moderators. Mediators are intervening variables that are responsible for relationships found between independent and dependent variables. The mediator offers an explanation as to how these effects occur. Moderators, on the other hand, affect the strength or direction of the causal relationship between the independent and dependent variables.

Researchers in a variety of areas of child and family psychology have tested both mediational and moderational models to explain the possible relationships among their constructs of interest (Simons et al., 1992; Simons et al., 1993; Valentiner, Holahan, & Moos, 1994). For example, Simons et al. (1992; 1993), tested both a mediator and moderator model of the effects of spousal support on the relationship between financial stress and supportive parenting. They found that spousal support had both mediating and moderating effects on the relationship of interest.

Given the literature to date, it was unclear whether parent-child boundary dissolution would act as a mediator or moderator of the relationship between maternal distress and child adjustment. Generational boundary dissolution may mediate the

relationship between maternal distress and child adjustment in that it accounts for the relationship between these two variables. Maternal distress may lead to a process of boundary dissolution between mothers and children which results in negative consequences for children's adjustment. On the other hand, boundaries may moderate an existing relationship between maternal distress and child adjustment, changing the strength and direction of this relationship.

4. Gender differences in mother-child boundary dissolution were explored. It was hypothesized that mothers would be more likely to engage in intrusiveness and role-reversal with their daughters than with their sons given the research that has found such differences between mother-son and mother-daughter interactions (Fullinwider-Bush & Jacobvitz, 1993; Hiester, 1995; Olver et al., 1989). The degree to which mothers engage in spousification versus enmeshment with their sons was also examined given the contradictory research findings in the literature. Exploratory analyses were also conducted to examine possible gender differences in the mediational and moderational effects of boundaries on child adjustment.

## Method

### Participants

Participants for the current study were part of a larger project investigating a variety of issues in single parent families. Mothers and children between 7 and 11 years of age were recruited from schools, daycares, and community agencies in the Lower Mainland. Approval was obtained from the individual schools, daycares and agencies who then distributed fliers to women and children who were attending their facility. The flier described the purpose and procedure of the project to prospective participants who then



contacted the researchers if they wanted more information or were interested in participating in the study.

The age range of children was chosen in order to limit the focus to children at one developmental stage. Preschoolers, school-aged children, and adolescents respond to stress in characteristically different ways (Compas, Worsham, & Ey, 1992). In addition, what constitutes appropriate and inappropriate emotional boundaries may vary at different developmental stages.

### Characteristics of the Sample

This study included 84 single mothers and their eldest child between the ages of seven to 11. There were 46 girls (mean age = 9.3 years,  $SD = 1.46$ ) and 38 boys (mean age = 9.4 years,  $SD = 1.37$ ). Mothers ranged in age from 26 to 47. The average annual family income fell in the \$20,000 to \$40,000 range and mothers worked an average of 25 hours/week outside the home. Eighty-five percent of the mothers were Caucasian, 4% Asian, 4% First Nations, 1% East Indian, 1% African, and 5% did not indicate their ethnic background. Ninety-eight percent of mothers had completed high school and 40% had some vocational training or college education. Eleven percent of mothers fell in the clinical range on the Beck Depression Inventory (Beck, Ward, & Mendelson, 1985). Mothers' reports of their children's behavior problems on the Child Behavior Checklist (Achenbach & Edelbrock, 1993) indicated that 16% of children fell in the clinical range for internalizing problems while an additional 14% fell in the borderline range of this scale. Eight percent of children fell in the clinical range on externalizing behavior problems while an additional 6% fell in the borderline clinical range on this scale. With regards to previous counseling experiences, 70% of mothers indicated that they had received

individual therapy at some point and 42% reported that their child had been in therapy.

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Insert Table 1 about here

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With regards to current romantic relationships, 48% of the mothers reported that they were currently involved in a romantic relationship and 8% of mothers indicated that they were living with their current partner. Only 5% of mothers reported that their current romantic partner was supporting them financially and only 4% reported that this partner was participating equally in childrearing decisions.

With regards to the mothers' relationships with their children's fathers, 70% indicated that the break-up was "very angry" or "somewhat angry". Only 8% reported that the break-up was "friendly". Forty-three percent of the mothers reported that their current relationship with their child's father was "friendly", 15% reported that it was neither "friendly nor angry", 24% reported that it was "very angry" or "somewhat angry", and 17% reported that they had no contact with their child's father. Mothers reported that 64% of the children had at least monthly contact with their fathers, 23% saw their fathers only a few times per year, and 10% had no contact with their fathers.

### Procedure

Mothers and their children had the option to participate in the study at the Family Relations Lab at Simon Fraser University or at their home. A consent form was reviewed with each mother and child to inform them of the objectives and procedures of the study, their right to withdraw from the study at any time, and the steps taken to ensure the confidentiality of any information collected.

Mothers independently completed questionnaires for approximately two hours.

Children privately completed questionnaires in an interview format with a trained female interviewer. If at any time during the interview a child appeared distressed, the interviewer would stop the interview and check with the child regarding his/her wish to continue or engage in other activities (e.g., reading a book, playing a game). In addition, interviewers conducting a debriefing with mothers and children at the end of the interview.

Participants received a \$10 honorarium and a handbook on how parents can help their children cope with stress, which included a list of community resources for parents and children. Children received a gift certificate for a local video store. All participants will receive a copy of the results of the study upon completion. All procedures and questionnaires were approved by the Simon Fraser University Ethics Committee.

### Adult Measures

Demographic Information. Demographic information was collected from the mothers in order to describe the sample participating in the study. Data on age, ethnicity, income, and education was gathered.

Life Events Survey (LES; Sarason, Johnson, & Siegal, 1978). The LES is a measure of the number and perceived impact of major life events. Mothers rate the occurrence and impact of any of the listed events that they have experienced in the past year. Test-retest reliability of the negative events score of the LES has been found to range from .56 to .88 (Sarason et al., 1978). The test-retest reliability of the total score ranged from .63 to .64. Negative impact ratings of life events have been found to be significantly correlated with state and trait anxiety, with personal maladjustment, and with the Beck Depression Inventory.

Social Support Questionnaire (SSQ; Sarason, Levine, Basham, & Sarason, 1983).

This is a 6 item measure of perceived available support. Each item has two parts: the number of available others the person can turn to in times of need in a variety of situations and the degree of satisfaction with the perceived support. In the present study, mothers' satisfaction ratings were used since the degree of satisfaction was anticipated to be more representative of mothers' sense of well-being than simply the total number of persons available (Sarason, Shearin, Pierce, & Sarason, 1987). SSQ scores have been found to be related to depression, anxiety, hostility, perceived separation anxiety in childhood, loneliness, and shyness (Sarason et al., 1987). In addition, it has been found to correlate with other well-used measures of social support (Sarason et al., 1987). In the present study, the internal consistency of the social support scale was  $\alpha = .94$ .

Beck Depression Inventory (BDI; Beck, Ward, & Mendelson, 1985). This is a 21 item self-report questionnaire which measures the severity of depressive symptomatology. The BDI is a widely used instrument for depression, and has demonstrated good reliability and validity. In the present study, the internal consistency of the BDI was  $\alpha = .86$ .

Parent-Child Boundaries Scale - Parent Version (PBS-P; Kerig & Brown, 1996). The PBS-P is a 35 item self-report questionnaire which assesses the five types of boundary dissolution described previously: role-reversal, enmeshment, spousification, intrusiveness, and protection from spill-over (See Appendix A). Preliminary analyses on a sample of 78 mothers found the total score of the parent-report version to be reliable. The internal consistency of the total PBS-P scores was  $\alpha = .89$ . The reliabilities of the five subscales ranged from .49 to .85.

Adult-Adolescent Parenting Inventory (AAPI; Bavolek, 1986). This is a self-report scale designed to assess attitudes toward parenting and empathic parenting

practices. The AAPI contains four subscales: inappropriate expectations, empathy, corporal punishment, and role-reversal. The AAPI has been shown to be a reliable measure (Corcoran & Fisher, 1987). In the present study, the internal consistency of the role-reversal scale was  $\alpha = .79$  and the internal consistency of the inappropriate expectations scale was  $\alpha = .70$ .

Parenting Stress Index (PSI; Abidin, 1986). The PSI is a 120 item self-report questionnaire designed to assess sources of stress in parent-child relationships. The measure assesses three domains of parenting: the child domain, the parent domain, and life stress. The alphas of these domains range from .89 to .93 and the alpha of the total PSI score is .95. Concurrent and construct validity of the PSI has been demonstrated in a large number of published studies some of which are documented in the test manual. For the present study, the total PSI score, and the social isolation and sense of competence subscales were used as part of the validation of the PBS-P. Given that the PBS is a measure of emotional boundaries between parents and their children, only these subscales of the PSI were used as criterion variables (Abidin & Brunner, 1995; Webster-Stratton & Hammond, 1988). In the present study, the internal consistency of the total score was  $\alpha = .93$ . The internal consistency of the social isolation scale was  $\alpha = .72$  and the internal consistency of the sense of competence scale was  $\alpha = .74$ .

Parent Attitudes Toward Childrearing Questionnaire (PACQ; Goldberg & Easterbrooks, 1984). This self-report measure contains 51 items which assess various parenting issues. The four subscales are warmth, independence, strictness, and aggravation. All of the scales demonstrate sufficiently high internal reliability, with alphas ranging from .58 to .78 (mean  $\alpha = .69$ ). For the present study, the independence scale

of the PACQ was used as part of the validation of the Boundaries measure. In the present study, the internal consistency of the independence scale was  $\alpha = .72$ .

Child Behavior Checklist (CBCL; Achenbach & Edelbrock, 1993). The CBCL is a parent-report measure of the child's competencies and problem behaviors. The scales of primary interest for the present study include the Internalizing and Externalizing scales. The CBCL is a widely used measure of children's behavior problems which has demonstrated good reliability, as well as content, construct, and criterion-related validity (Achenbach & Edelbrock, 1993).

#### Child Measures

Parent-Child Boundaries Scale - Child Version (PBS-C; Kerig & Brown, 1996). The child version of the PBS-C is also a 35 item self-report questionnaire which assesses the five types of boundary dissolution: role-reversal, enmeshment, spousification, intrusiveness, and protection from spill-over (See Appendix B). The items on the parent-version have been reworded to reflect the child's perspective on boundary violations in the parent-child relationship.

Revised Children's Manifest Anxiety Scale (RCMAS; Reynolds & Richmond, 1978). The RCMAS is a 37 item measure of trait anxiety symptoms. The Anxiety scale consists of 28 items which measure children's level of manifest anxiety. The remaining 9 items form a Lie scale which measures the degree to which children's responses are influenced by their desire to respond in socially desirable ways. Children respond "Yes" or "No" to each item. The RCMAS has demonstrated internal consistency ( $\alpha = .85$ ; Reynolds & Richmond, 1978), concurrent validity with the trait scale of the State-Trait Anxiety Inventory for Children ( $r = .85, p < .001$ ; Reynolds, 1980), and construct validity

(Reynolds & Richmond, 1979). In the present study, the internal consistency of the CMAS was  $\alpha = .89$ .

## Results

### Parent-Child Boundaries Scale

#### Reliability

As shown in Table 2, the internal consistency of the total score of the parent-version of the PBS (PBS-P) was .89. Cronbach's alphas for the five subscales on the PBS-P ranged from .49 to .85 with a mean alpha of .71. Only the protection from spill-over scale, with an alpha of .49, was found to fall below minimum acceptable reliability of .60 according to Kaplan and Saccuzzo (1993). The other four subscales (role-reversal, enmeshment, intrusiveness, and spousification) demonstrated good reliability with alphas ranging from .72 to .85. Only a subsample of 51 children completed the child version of the PBS (PBS-C). The internal consistency of the total score of the PBS-C was .79 and the alphas for the 5 subscales on the PBS-C ranged from .40 to .75, with a mean alpha of .60. The enmeshment and protection from spill-over scales had alphas which fell below minimum acceptable reliability.

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Insert Table 2 about here

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As displayed in Table 3, all five subscales of the PBS-P were significantly correlated with the PBS-P total score. Although the five subscales were all significantly correlated with each other, these correlations ranged from  $r = .29$  to .63, indicating that some of the types of boundary dissolution were more interrelated than others. Of the five subscales, the enmeshment and role-reversal scales were most highly correlated with each

other. Role-reversal and enmeshment were also highly correlated with intrusiveness. Spousification and protection from spill-over had the lowest correlations with the other scales of the PBS-P. Similar results were found with the child version of the measure. All five subscales of the PBS-C were significantly correlated with the PBS-C total score. However, only some of the PBS-C subscales were significantly correlated with each other. As in the parent-report version, role-reversal and enmeshment were most highly correlated with each other. Spousification was significantly correlated with intrusiveness, and protection from spill-over was significantly correlated with role-reversal, intrusiveness, and spousification.

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Insert Table 3 about here

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Correlations between mothers' and children's reports of boundary dissolution are reported in Table 3. Results indicate that mothers' PBS-P total scores correlated significantly with children's PBS-C total scores. In addition, mothers' and children's scores on the role-reversal and enmeshment scales were significantly correlated with each other. Mothers' and children's scores on intrusiveness, spousification, and protection from spill-over did not significantly correlate with each other. These data indicate that while mothers and children agree in general regarding the degree of boundary dissolution in their relationship, this agreement is not found regarding all types of boundary dissolution. Specifically, mothers and children did not agree about the level of intrusiveness and spousification in their relationship. Given the unreliability of the protection from spill-over scale, it is difficult to interpret the lack of a relationship between mothers' and children's reports of this form of boundary dissolution.



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Insert Table 3 about here

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### Validity

To assess the construct validity of the Parent-Child Boundaries scale, mothers' reports of boundary dissolution were correlated with theoretically related parenting constructs on the Adult-Adolescent Parenting Inventory (AAPI), the Parenting Stress Index (PSI), and the Parental Attitudes Towards Childrearing Questionnaire (PACQ).

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Insert Table 4 about here

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### Adult-Adolescent Parenting Inventory

It was hypothesized that mothers' reports of role-reversal on the AAPI would be correlated significantly with the role-reversal scale and total score of the PBS-P. As shown in Table 4, mothers' total PBS-P scores and PBS-P role-reversal scores were correlated significantly with the role-reversal scale of the AAPI, although the correlation between the two role-reversal scores was somewhat stronger than the correlation between the PBS total score and the AAPI role-reversal score. While the AAPI role-reversal scale was correlated significantly with several of the PBS-P scales, it was most strongly correlated with the PBS-P role-reversal scale. However, when partial correlations were calculated between the AAPI scales and the PBS-P scales, partialing out the correlations among the PBS-P scales, the AAPI role-reversal scale was correlated significantly only with the PBS-P role-reversal scale ( $r = .39, p < .001$ ). The AAPI role-reversal scale was not significantly correlated with any other PBS-P scale. The inappropriate expectations scale of the AAPI, which measures the extent to which parents expect their children to

engage in tasks beyond their age expectations, was only significantly correlated with the role-reversal scale of the PBS-P. This correlation would be expected since parents who engage in role-reversal with their children rely on their children to meet their own emotional needs, despite the developmental inappropriateness of this role. These results provide some evidence for the construct validity of the role-reversal scale, given that this scale demonstrated relationships with other constructs which were distinct from the other PBS-P scales.

#### Parenting Stress Index

As shown in Table 4, mothers' reports of boundary dissolution were compared with their reports of total parenting stress, social isolation, and sense of competence on the PSI. It was hypothesized that mothers who reported feeling stressed, socially isolated, and challenged by parenting demands may be more likely to rely on their children to meet their emotional needs. Total boundary dissolution was correlated significantly with total parenting stress, social isolation, and sense of competence. Mothers' scores on sense of competence were also correlated significantly with role reversal and spousification, and moderately correlated with enmeshment. Mothers' sense of social isolation was significantly correlated with role-reversal scores and spousification scores, and moderately correlated with enmeshment. When controlling for the correlations among the PBS-P scales, a few differences in these relationships between PBS-P scores and PSI scores were found: spousification was no longer correlated significantly with social isolation and enmeshment was no longer correlated with any PSI scores. These results suggest that the stress associated with the parental role was specifically related to mothers' engagement in role-reversal and spousification with their children, but not to mothers' enmeshment with

their children. In addition, spousification was more strongly related to mothers' sense of competence than to their social isolation.

#### Parental Attitudes Towards Childrearing Questionnaire

In order to assess the construct validity of the PBS-P total score and intrusiveness score, mothers' total boundary dissolution scores and intrusiveness scores were correlated with the independence scale of the PACQ which assesses parental attitudes towards child autonomy (Goldberg & Easterbrooks, 1984). As displayed in Table 4, mothers' PBS-P total and intrusiveness scores were significantly negatively correlated with independence scores on the PACQ. The independence scale of the PACQ was not significantly related to any other PBS-P scale scores, demonstrating the conceptual distinctiveness of this PBS-P scale. When controlling for the correlations among PBS-P scales, this unique relationship between intrusiveness and independence remained and the correlations between the PACQ independence scale and the other PBS-P scales weakened.

#### Developmental Differences

Mothers' PBS-P total scores were not correlated with children's age ( $r = -.14$ ,  $p = .20$ ) and children's age was only moderately negatively correlated with mothers' reports on the intrusiveness subscale ( $r = -.19$ ,  $p = .08$ ). These results suggest that mothers tend to be somewhat more intrusive with younger children, as would be expected given that younger children require more supervision and structure.

#### Summary

These results suggest that the PBS is a reliable measure which provides an assessment of overall parent-child boundaries as well as indices of distinct types of boundary dissolution. The protection from spill-over scale, however, did not demonstrate

adequate reliability on either the mother or the child questionnaire. The construct validity of the PBS-P and its subscales was demonstrated through its relationships with other measures of theoretically related parenting constructs. Although the subscales of the PBS-P were all correlated with each other, they demonstrated unique relationships with other parenting factors. In addition, only mothers' intrusiveness scores were moderately related to children's age. Mothers' and children's reports of total parent-child boundaries were significantly correlated with each other, indicating their overall agreement regarding the occurrence of boundary dissolution in their relationships.

Predictors of Boundary Dissolution: Relationships Between Maternal Distress and  
Boundaries

The hypothesis was tested that maternal stress, depression, and social support act as predictors of boundary dissolution between mothers and their children. As shown in Table 5, correlations between the three predictors and the total PBS score showed that only mothers' scores on the Life Events Survey (LES) and the Beck Depression Inventory (BDI) were significantly related to boundary dissolution. Social Support scores (SSQ) were not significantly correlated with total PBS-P scores.

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Insert Table 5 about here

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The Williams-Hotelling test of the difference between non-independent Pearson  $r$ 's was conducted to test the relative predictive power of the three predictors of boundary dissolution. The correlation between maternal stress and the total PBS-P score did not differ significantly from the correlation between maternal depression and the total PBS-P

score ( $t = -.72$ ,  $p = .31$ ), indicating that neither variable was a significantly better predictor of boundary dissolution than the other. The correlation between maternal stress and boundary dissolution was significantly higher than the correlation between social support and boundary dissolution ( $t = 2.41$ ,  $p < .01$ ) indicating that LES scores were a better predictor of boundary dissolution than SSQ scores. The correlation between maternal depression and boundary dissolution was significantly higher than the correlation between social support and boundary dissolution ( $t = 2.69$ ,  $p < .01$ ), indicating that BDI scores were a better predictor of boundary dissolution than SSQ scores.

Exploratory analyses were conducted to assess the relationships among the maternal distress indicators and the five types of boundary dissolution. As shown in Table 6, while social support did not correlate with the total boundary dissolution score, SSQ scores were significantly negatively correlated with the role-reversal scale of the PBS-P. When controlling for the correlations among PBS-P scales, this unique correlation between SSQ scores and role-reversal remained ( $r = -.27$ ,  $p < .05$ ), while the correlations between SSQ scores and enmeshment and spousification scores weakened. These results suggest that mothers' lack of social support is uniquely related to their engagement in role-reversals with their children. Mothers who reported lower satisfaction with social support were more likely to engage specifically in role-reversal with their children. Maternal stress and depression were significantly correlated with role-reversal and spousification, but only maternal depression was significantly correlated with enmeshment. There were no significant correlations between maternal stress and depression and the intrusiveness and protection from spill-over scales of the PBS-P.

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Insert Table 6 about here

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### Summary

While maternal stress and depression both significantly predicted mothers' engagement in boundary violations with their children, maternal social support was not significantly correlated with mother-child boundaries. Maternal social support demonstrated a unique relationship with role-reversal, however, demonstrating the distinctness of the subtypes of boundaries and suggesting that a lack of social support is uniquely related to the type of boundary violation in which parents depend more on their children to meet their own emotional needs.

### Relationships Between Boundary Dissolution and Child Adjustment

Correlations were calculated between the PBS-P and three measures of child adjustment: mothers' reports of children's internalizing symptoms on the CBCL (INT), mothers' reports of children's externalizing symptoms on the CBCL (EXT), and children's self-reported anxiety on the RCMAS. As displayed in Table 7, the total score of the PBS-P was significantly correlated with all measures of child adjustment. An examination of the relationships between the specific types of boundaries and child adjustment showed that child adjustment was not related to scores on the PBS-P intrusiveness and protection from spill-over scales. Mothers' reports of children's internalizing and externalizing behavior problems were significantly correlated with spousification. Role-reversal and enmeshment scores were both significantly correlated with children's internalizing symptoms and moderately correlated with children's externalizing symptoms. Children's self-reported anxiety was significantly correlated with role-reversal, enmeshment, and

spousification.

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Insert Table 7 about here

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### Gender Differences in Child Adjustment and Boundary Dissolution

Gender differences in the relationships between boundary dissolution and child adjustment were explored. A MANOVA was performed to investigate whether there were gender differences in child adjustment scores on the RCMAS, and the Internalizing and Externalizing scales of the CBCL. No gender differences were found in child adjustment ( $F = .51, p = .68$ ). A MANOVA was also performed in order to examine gender differences on the PBS-P scores. No significant gender differences on the PBS-P scales ( $F = 1.77, p = .13$ ) were found. Gender differences on the spousification scale approached significance ( $F = 2.84, p = .09$ ), with mothers reporting more spousification with daughters than with sons.

### Gender Differences in the Relationships Between Boundary Dissolution and Child Adjustment

Fisher's  $z$  tests were conducted to investigate whether the gender differences in the correlations between boundaries and child adjustment were statistically significant. As shown in Table 8, there were some significant gender differences in the relationships between the total and scale scores of the PBS-P and child adjustment.

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Insert Table 8 about here

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Spousification was correlated more strongly with girls' self-reported anxiety than

with boys' self-reported anxiety. Spousification was found to be correlated with mothers' reports of internalizing and externalizing behavior problems for both boys and girls.

There was a significantly stronger relationship between role-reversal and internalizing symptoms for boys than for girls, although girls' self-reported anxiety was correlated with role-reversal.

Enmeshment was correlated more strongly with mothers' reports of internalizing and externalizing for boys than for girls, although both boys' and girls' self-reported anxiety correlated with enmeshment scores.

There was also a significant difference between boys and girls regarding the relationship between mothers' intrusiveness and mother's reports of children's externalizing symptoms. Intrusive mothers of sons reported significantly more externalizing behavior problems for their children than did intrusive mothers of daughters. In fact, mothers' intrusiveness was only significantly correlated with boys' externalizing behaviors.

For boys, the total PBS-P score was significantly correlated with mothers' reports of children's internalizing and externalizing on the CBCL, but not with boys' reports on the RCMAS. For girls, however, the total PBS-P score was significantly correlated only with girls' own reports of symptoms on the RCMAS and not with mothers' reports of internalizing and externalizing on the CBCL. These differences were not statistically significant, however.

### Summary

Parent-child boundary dissolution was found to be related to all measures of children's maladjustment. An examination of the separate scales of the PBS-P, however,



found that the intrusiveness and protection from spill-over scales were not correlated with measures of children's adjustment. Although gender differences were not found in mean levels of children's adjustment or parent-child boundaries, there were some gender differences in the relationships between boundaries and children's adjustment. While spousification was negatively related to both boys' and girls' internalizing and externalizing behaviors, it was only related to girls' self-reported anxiety. Intrusiveness was significantly correlated only with mothers' reports of boys' externalizing behaviors. While both boys and girls reported more anxiety when their mothers scored higher on role-reversal and enmeshment, mothers who scored higher on these two types of boundary dissolution reported more internalizing and externalizing difficulties only for boys.

#### Relationships Between Maternal Distress and Child Adjustment

In order to establish the mediational and moderational effects of boundary dissolution on the relationship between maternal distress and child adjustment, the presence of a relationship between maternal distress and child adjustment must first be established (Baron & Kenny, 1986). This relationship must be established since, by definition, a moderator is a variable which changes this existing relationship between two other variables and a mediator is a variable which accounts for the existing relationship between two other variables.

As Table 9 shows, mothers' reports of stressful events were significantly correlated with children's reports of anxiety and with mothers' reports of their children's internalizing and externalizing symptoms. Mothers' self-reported symptoms of depression were moderately related to children's self-reported anxiety and externalizing symptoms and significantly related to children's internalizing symptoms. Mothers' perceived social

support was negatively related to children's internalizing symptoms, indicating that the less satisfied mothers were with their social support, the more internalizing symptoms they reported in their children. Social support was not related to children's externalizing symptoms or self-reported anxiety. These results confirm that maternal stress and depression were related to higher levels of children's self-reported anxiety, internalizing behavior problems, and externalizing behavior problems. Social support, however, was only related to children's internalizing scores on the CBCL.

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Insert Table 9 about here

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#### Mediational Effects of Boundaries on Children's Adjustment

The hypotheses that mother-child boundaries mediate the effects of maternal stress, depression, and social support on child adjustment were tested using a series of simple regressions as recommended by Judd and Kenny (1981b): first, the mediator was regressed on the independent variable; second, the dependent variable was regressed on the independent variable; and third, the dependent variable was regressed on both the independent variable and on the mediator. For mediation to be demonstrated the following conditions must be met: the independent variable must be significantly related to the mediator, the independent variable must be significantly related to the dependent variable, and the mediator must be significantly related to the dependent variable. Mediation is demonstrated if the effect of the independent variable on the dependent variable is reduced when the mediator is added to the regression equation.

Although maternal stress, depression, and lack of social support were significantly correlated with one another (see Table 4), the correlations were not extremely high. In

addition, the predictors had unique relationships with boundary dissolution. While stress and depression were significantly correlated with boundary dissolution, social support was not. Therefore, the three predictors were not combined to form one composite score. They were treated as three separate independent variables in the mediational and moderational analyses.

#### Boundaries as a Mediator of the Effects of Life Stress on Child Adjustment

The mediational effects of the Total PBS-P score on the relationship between life events and child adjustment were assessed separately for the three measures of child adjustment.

Children's self-reported anxiety. As shown in Table 10, parent-child boundaries were found to mediate the relationship between maternal stress and children's self-reported anxiety. In the first equation, LES scores were found to significantly affect total PBS-P scores ( $F(1, 82) = 3.88, p < .05$ ). In the second equation, variations in LES scores were significantly related to variations in children's RCMAS scores ( $F(1, 82) = 4.60, p < .05$ ). In the third equation, RCMAS scores were regressed on both LES scores and the mediator, PBS-P scores. When the mediator was added to the equation, the effect of maternal stress on children's anxiety was reduced, while the mediator had a significant effect on children's anxiety.

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Insert Table 10 about here

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Internalizing symptoms. Parent-child boundaries did not mediate the relationship between maternal stress and mothers' reports of their children's internalizing symptoms. While both LES scores and PBS-P scores did significantly affect children's internalizing

symptoms, the effect of stress was not reduced when boundaries was added to the equation. Both maternal stress (Beta = .41,  $p < .001$ ) and parent-child boundaries (Beta = .20,  $p < .05$ ) still affected children's internalizing.

Externalizing symptoms. The mediational analyses for externalizing symptoms showed a similar pattern of results as was found for internalizing symptoms. Parent-child boundaries did not mediate the relationship between maternal stress and mothers' reports of their children's externalizing symptoms. Again, the effect of maternal stress and children's symptoms was not reduced when boundary dissolution was added to the equation. Both LES scores (Beta = .36,  $p < .001$ ) and PBS-P scores (Beta = .20,  $p < .05$ ) maintained their significant effects on children's externalizing symptoms.

#### Boundaries as a Mediator of the Effects of Maternal Depression on Child Adjustment

The mediational effects of the Total PBS-P score on the relationship between maternal depression and child adjustment were assessed separately for the three measures of child adjustment.

Children's self-reported anxiety. As shown in Table 11, parent-child boundaries were found to be a mediator of the relationship between maternal depression and children's self-reported anxiety. In the first equation, BDI scores were found to significantly affect total PBS-P scores. In the second equation, variations in BDI scores were significantly related to variations in children's RCMAS scores. In the third equation, RCMAS scores were regressed on both BDI scores and the mediator, PBS-P scores. When the mediator was added to the equation, the effect of maternal depression on children's anxiety was reduced, while the mediator had a significant effect on children's level of anxiety.

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Insert Table 11 about here

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Internalizing symptoms. Parent-child boundaries did not mediate the relationship between maternal depression and mothers' reports of their children's internalizing symptoms. BDI scores had a significant effect on children's internalizing symptoms ( $F(1,82) = 15.60, p < .001$ ). However, when both maternal depression and boundaries were in the equation, the BDI maintained its significant effect (Beta = .49,  $t = 4.86, p < .001$ ), while the mediator did not significantly affect internalizing scores (Beta = .16,  $t = 1.15$ ).

Externalizing symptoms. As mentioned previously, in order for mediation to be established, the independent variable must be significantly related to the dependent variable. Since BDI scores did not significantly affect externalizing scores ( $F(1, 82) = 2.55, p = .13$ ), the mediational analyses were not conducted.

#### Boundaries as a Mediator of the Effects of Maternal Social Support on Child Adjustment

In order for mediation to be established, the independent variable must be significantly related to the mediator. This relationship, however, was not found between maternal social support and boundary dissolution and so the mediational analyses were not conducted. SSQ scores did not significantly affect PBS-P scores ( $F(1,82) = .93, p = .34$ ). In addition, as noted previously, SSQ scores were only related to children's internalizing scores on the CBCL.

#### Summary

Parent-child boundaries were found to mediate the relationship between both maternal stress and depression and children's self-reported anxiety. Although parent-child boundaries were found to mediate children's self-reported anxiety, parent-child boundaries

did not mediate mothers' reports of their children's internalizing and externalizing behavior problems. Maternal stress, depression, and parent-child boundaries maintained their significant negative effects on mothers' reports of children's behavior problems. Maternal social support was not found to significantly affect parent-child boundaries.

#### Moderational Effects of Boundaries on Child Adjustment

The hypothesis that mother-child boundaries would moderate the effects of maternal stress, depression, and social support on child adjustment was tested using the hierarchical multiple regression procedure recommended by Baron and Kenny (1986). First, a predictor of boundary dissolution was entered into the regression equation and then the total boundaries score (PBS-P) was entered. This was followed by entering the interaction term of the predictor by boundary dissolution score. This procedure was performed for the three dependent variables: mothers' reports of children's internalizing and externalizing symptoms on the CBCL, and children's reports of anxiety on the RCMAS. The change in the variance accounted for by the addition of the interaction term was examined to determine the significance of the moderational effects of boundaries on a particular dimension of child adjustment.

#### Boundaries as a Moderator of the Effects of Life Stress on Child Adjustment

The interaction between life stress and boundary dissolution did not significantly moderate the relationship between maternal stress and the three indices of children's adjustment, although some results for externalizing behaviors approached significance.

Children's self-reported anxiety. On the first step, maternal stress was found to moderately predict children's anxiety and accounted for 4% of the variance of RCMAS scores ( $F(1,82) = 3.42, p = .06$ ). Next, the total boundary dissolution score was entered

into the equation, and accounted for another 5% of the variance ( $F$  Change (2,81) = 4.28,  $p < .05$ ). The interaction of life events and boundaries was then added to the equation, but it did not significantly add to the proportion of variance accounted for ( $R^2$  Change = .002,  $p = .69$ ).

Internalizing Symptoms. On the first step, maternal stress was found to significantly predict children's internalizing symptoms and accounted for 20% of the variance of that variable ( $F$  (1,82) = 20.21,  $p < .001$ ). Next, boundaries was added to the equation and accounted for an addition 3% of the variance ( $F$  change (2,81) = 2.74,  $p < .10$ ). The addition of the interaction between boundaries and maternal stress did not account for additional variance in children's internalizing ( $R^2$  Change = .001,  $p = .87$ ).

Externalizing Symptoms. As shown in Table 12, maternal stress significantly predicted children's externalizing symptoms and accounted for 16% of the variance of that variable. Parent-child boundaries accounted for an additional 4% of the variance. The interaction between maternal stress and boundary dissolution also accounted for an additional 3% of the variance of children's externalizing symptoms. As shown in Figure 1, high boundary dissolution was related to higher externalizing scores regardless of maternal stress. When mothers reported low levels of boundary dissolution, however, there was a positive relationship between maternal stress and children's externalizing scores, with lower stress being related to lower externalizing scores and higher stress levels being related to higher externalizing scores.

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Insert Table 12 about here

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### Boundaries as a Moderator of the Effects of Maternal Depression on Child Adjustment

The interaction between maternal depression and boundary dissolution did not significantly moderate the relationship between maternal depression and the three indices of children's adjustment.

Children's self-reported anxiety. On the first step, maternal depression was found to moderately predict children's anxiety and accounted for 3% of the variance of RCMAS scores ( $F(1,82) = 2.70, p = .10$ ). Next, the total boundary dissolution score was entered into the equation, and accounted for another 5% of the variance ( $F \text{ Change}(2,81) = 3.99, p < .05$ ). The interaction of maternal depression and boundaries was then added to the equation, but did not significantly add to the proportion of variance accounted for ( $R^2 \text{ Change} = .001, p = .86$ ).

Internalizing Symptoms. On the first step, maternal depression was found to significantly predict children's internalizing and accounted for 27% of the variance of that variable ( $F(1,82) = 30.77, p < .001$ ). Next, boundaries was added to the equation, but it did not account for any additional variance in children's internalizing scores ( $R^2 \text{ Change} = .01, p = .29$ ). The addition of the interaction between boundaries and maternal depression also did not account for additional variance in children's internalizing scores ( $R^2 \text{ Change} = .002, p = .66$ ).

Externalizing Symptoms. On the first step, maternal depression did not significantly predict children's externalizing symptoms and accounted for 3% of the variance of that variable ( $F(1,82) = 2.52, p = .12$ ). Parent-child boundaries accounted for an additional 5% of the variance of externalizing scores ( $F \text{ Change}(2,81) = 4.78, p < .05$ ). The interaction between maternal depression and boundary dissolution accounted for an



additional 3% of the variance of children's externalizing symptoms. However, this was not statistically significant ( $F$  Change (3,80) = 2.49,  $p < .10$ ).

#### Boundaries as a Moderator of the Effect of Maternal Social Support on Child Adjustment

The interaction between maternal social support and boundary dissolution did not significantly moderate the relationship between social support and the three indices of children's adjustment, although there were some moderational effects on children's internalizing behavior problems which did not reach significance.

Children's self-reported anxiety. Mothers' social support did not significantly predict children's anxiety ( $F$  (1,82) = 1.51,  $p = .22$ ). Boundaries was then added to the equation and accounted for an additional 5% of the variance of children's anxiety scores ( $F$  change (2,81) = 5.24,  $p < .05$ ). Last, the interaction between social support and boundaries was added to the equation and did not account for any addition variance ( $R^2$  Change = .000,  $p = .97$ ).

Internalizing Symptoms. As shown in Table 13, mothers' social support significantly predicted children's internalizing scores, accounting for 14% of the variance. Next, boundaries was added to the equation and accounted for an additional 5% of the variance. Last, the interaction between social support and boundaries was added, and accounted for an additional 3% of the variance. As shown in Figure 2, for mothers reporting low satisfaction with social support, high boundary dissolution was related to increased internalizing behavior problems in children, while low boundary dissolution was related to lower internalizing scores.

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Insert Table 13 about here

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Externalizing Symptoms. Mothers' social support scores did not significantly predict children's externalizing scores, accounting for 2% of the variance ( $F(1,82) = 1.44$ ,  $p = .23$ ). Boundary dissolution was then added to the equation and accounted for an additional 7% of the variance in externalizing scores ( $F \text{ Change}(2,81) = 3.79$ ,  $p < .05$ ). The interaction between social support and boundary dissolution did not account for additional variance in externalizing ( $R^2 \text{ Change} = .006$ ,  $p = .44$ ).

### Summary

With regards to the moderational effects of boundaries, parent-child boundaries were not found to significantly moderate the relationships between maternal distress and child adjustment. Some effects consistent with moderational hypotheses were found but these did not reach significance. Specifically, results suggested that boundaries had some weak moderational effects on the relationship between maternal stress and children's externalizing behaviors and on the relationship between maternal social support and children's internalizing behaviors.

### Gender Differences in the Mediational Effects of Boundaries

Exploratory analyses were conducted to assess possible gender differences in the mediational effects found above. It is important to note in interpreting these results that the sample sizes of boys ( $n = 38$ ) and girls ( $n = 46$ ) were below the number required for sufficient power in these analyses.

### Maternal Stress

Boys. For boys, no mediational effects for boundaries were found. The relationship between maternal stress and boundary dissolution ( $F(1,35) = .76$ ,  $p = .39$ ) did not reach significance and so mediational analyses could not be conducted.

Girls. As displayed in Table 14, boundary dissolution mediated the relationship between maternal stress and self-reported anxiety, although the relation between maternal stress and boundary dissolution was only moderately significant. Similar to results found with the entire sample, boundary dissolution did not mediate the relationship between maternal stress and maternal reports of girls' internalizing and externalizing symptoms.

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Insert Table 14 about here

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### Maternal Depression

Boys. For boys, no mediational effects for boundaries were found. The relationship between maternal depression and boundary dissolution ( $F(1,35) = 1.43, p = .24$ ) did not reach significance and so mediational analyses could not be conducted.

Girls. Boundary dissolution was not found to mediate the relationship between maternal depression and child adjustment. The relationships between maternal depression and child adjustment were not adequately significant to conduct the mediational analyses.

### Maternal Social Support

Boys. For boys, no mediational effects for boundaries were found. There was no relationship between maternal social support and boundary dissolution ( $F(1,35) = .01, p = .94$ ) and so mediational analyses could not be conducted.

Girls. Boundary dissolution was not found to mediate the relationship between maternal social support and adjustment for the subsample of girls. As with the entire sample, maternal social support was not a significant predictor of boundary dissolution and so the mediational analyses could not be conducted.

### Summary

No significantly different results were found based on children's gender. Many of the results did not reach significance with the smaller subsamples of girls and boys. Only the mediational effects of boundaries on the relationship between maternal stress and children's self-reported anxiety remained significant for the subsample of girls.

### Gender Differences in the Moderational Effects of Boundary Dissolution

#### Maternal Stress

For boys and girls, there were no moderational effects of boundaries on the relationship between maternal stress and the three indices of child adjustment.

#### Maternal Depression

Boys. As shown in Table 15, boundaries were found to moderate the relationship between maternal depression and mothers' reports of boys internalizing symptoms. The interaction of boundary dissolution and maternal depression accounted for an additional 4% of the variance of boys' internalizing. As shown in Figure 3, there was an increase in boys' internalizing behavior problems when mothers' reported high depression. This relationship between maternal depression and internalizing was not as strong when boundary dissolution was low. No moderational effects were found for boundaries on the relationship between maternal depression and boys' self-reported anxiety and externalizing symptoms.

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Insert Table 15 about here

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Girls. Boundaries did not moderate the relationship between maternal depression and girls' adjustment.

### Maternal Social Support

Boys. As shown in Table 16, boundaries moderated the relationship between maternal social support and boys' internalizing symptoms. The interaction of social support and boundaries accounted for an additional 15% of the variance in the equation. As shown in Figure 4, there was an increase in boys' internalizing scores when mothers with low social support engaged in high boundary dissolution. When mothers low in social support maintained clear boundaries with their sons, however, there was a decrease in internalizing behavior problems. No significant relationship existed between maternal social support and boys' self-reported anxiety ( $F(1,36) = .11, p = .74$ ) and externalizing symptoms ( $F(1,36) = .99, p = .33$ ).

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Insert Table 16 about here

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Girls. Boundaries did not moderate the relationship between maternal social support and girls' internalizing symptoms. The addition of the interaction between social support and boundaries did not account for any additional variance in internalizing scores ( $F \text{ Change}(3,42) = .70, p = .41$ ). No significant relationship existed between maternal social support and girls' self-reported anxiety ( $F(1,44) = 2.18, p = .15$ ) and externalizing symptoms ( $F(1,44) = .61, p = .44$ ).

### Summary

Some significant gender differences were found for the moderational effects of boundaries. Specifically, parent-child boundaries were found to significantly moderate boys' internalizing symptoms. Boundary dissolution moderated the effects of both maternal depression and maternal social support on mothers' reports of boys' internalizing

symptoms.

#### Post-Hoc Analyses of the Effects of Specific Types of Boundary Dissolution

Post hoc analyses were conducted to investigate the possibility that specific types of boundary dissolution may have different mediating and moderating effects on the relationships between maternal distress and child adjustment investigated in this study. Given the uniquely significant relationship between maternal social support and role-reversal, and between role-reversal and boys' adjustment, investigations of the mediational and moderational effects of this type of boundary were performed. In addition, given the moderate gender difference found in mothers' reports of spousification, with more spousification reported for girls, the mediational and moderational effects of this type of boundary violation were investigated.

#### Mediating and Moderating Effects of Role-Reversal

All Children. As seen in Table 17, the results for role-reversal were similar to the results found with the total boundaries score. Role-reversal was found to mediate the relationship between maternal stress and depression and children's self-reported anxiety. Lack of social support was found to significantly affect mothers' role-reversal scores ( $F(1,82) = 4.23, p < .05$ ), however, a significant relationship between maternal social support and children's self-reported anxiety was not found. As with the total boundaries score, role-reversal did not mediate mothers' reports of children's internalizing and externalizing symptoms. For the entire sample, role-reversal was not found to moderate any of the relationships between maternal distress and child adjustment.

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Insert Table 17 about here

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Boys. As shown in Table 18, role-reversal did mediate the relationship between maternal stress and mothers' reports of boys' internalizing symptoms. Role-reversal did not significantly mediate any other relationships for boys nor was it found to moderate any relationships between maternal distress and boys' adjustment.

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Insert Table 18 about here

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Girls. For girls, role-reversal did not significantly mediate or moderate the relationships between maternal distress and child adjustment.

#### Summary

Similarly to the total boundaries score, role-reversal was found to mediate the relationships between maternal stress and depression and children's self-reported anxiety. It was not found to mediate mothers' reports of children's internalizing and externalizing symptoms. Role-reversal was not found to moderate the relationships between maternal distress and children's adjustment. With regard to gender differences, role-reversal was found to significantly mediate the relationship between maternal stress and boys' internalizing. As noted previously, role-reversal had a significant impact on boys' internalizing symptoms but not girls' and these analyses showed that role-reversal mediated the relationship between maternal stress and boys' internalizing scores.

#### Mediating and Moderating Effects of Spousification

All Children. For the entire sample, spousification was not found to mediate or moderate any of the relationships between maternal distress and child adjustment.

Boys. None of the indices of maternal distress were significantly related to spousification and so the mediational analyses were not conducted. As shown in Table 19,

spousification was found to moderate the relationship between maternal social support and mothers' reports of boys' internalizing. The interaction between social support and spousification accounted for an additional 26% of boys' internalizing scores. As shown in Figure 5, there was increase in boys' internalizing scores when mothers with low social support engaged in spousification. When mothers low in social support did not engage in spousification with their sons, however, there was no increase in internalizing scores.

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Insert Table 19 about here

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Girls. As seen in Table 20, spousification was found to mediate some of the relationships for girls. Spousification mediated the relationship between maternal stress and girls' self-reported anxiety, between maternal depression and girls' internalizing, and between maternal social support and girls' internalizing. Spousification was not found to moderate any of the relationships between maternal distress and girls' adjustment.

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Insert Table 20 about here

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### Summary

While spousification was not found to have any mediating or moderating effects for the entire sample of children, gender differences were found in these relationships. Similar to results with the total boundaries score, spousification moderated the relationship between maternal social support and boys' internalizing symptoms. For girls, however, spousification mediated the relationship between maternal stress and anxiety, and between maternal depression and social support and internalizing symptoms.



## Discussion

Although the concept of generational boundary dissolution has been an important part of family systems theory for a number of years, empirical research has only recently begun to investigate this construct. Boundary dissolution, however, is a complex construct to operationalize, because it is a process which may be defined in many different ways and take various forms (Sroufe et al., 1985). Despite these difficulties, recent literature in several areas has noted the importance of studying emotional boundaries among family members in order to understand individual development within the context of these relationship systems (Davies & Cummings, 1994; Howes & Cicchetti, 1993; Sroufe et al., 1985).

The literature on single-parent families has described several characteristics of parent-child relationships in this population which reflect issues related to boundary dissolution (Hetherington & Clingempeel, 1992; Walker & Hennig, 1997). In addition, several concerns facing single mothers have been highlighted in this research, such as increased stress and depression, which may contribute to the dissolution of parent-child boundaries. Therefore, the present study investigated the maternal characteristics which may be related to boundary dissolution in single-parent families. In addition, the possible mediating and moderating roles of boundaries on the relationship between maternal distress and child adjustment were examined.

A major part of the present study was the development of a self-report measure of generational boundary dissolution for both parents and children. This questionnaire provided an index of total boundary dissolution as well as scores for five types of boundaries. The inclusion of these separate types of boundaries provides a comprehensive

assessment of the construct of boundary dissolution and allows for comparisons among different types of boundaries. Four of the types of boundary violations measured in the questionnaire, role-reversal, enmeshment, spousification, and intrusiveness, have been previously identified in the literature and were reliably measured in the present study. The protection from spill-over scale was designed to measure the extent to which parents maintain clear boundaries with their children and keep their adult issues separate from those related to their children. This scale was found to be unreliable for both the parent and child questionnaires and was not related to maternal distress or children's adjustment as the other types of boundaries were.

One problem with this scale may be that it includes items assessing both parental attitudes and parental behavior. The protection from spill-over items included both parental attitudes towards protecting children from stress (e.g., Children who are protected too much from stress will not be tough enough to cope with life) and descriptions of actual spill-over of parental stress onto children (e.g., When I'm upset about things in my life, I am more easily upset by my child). In addition, the distinction between spill-over and role-reversal behaviors, which involve parents relying on their children for emotional support, may require further clarification. In general, the parent-report version was found to be more reliable than the child version and so further clarification and simplification of child items may be necessary. Overall agreement between mothers' and children's reports of boundary dissolution was found, however, suggesting that mothers and children have similar perceptions of these family processes.

An important question in the measurement of parent-child boundaries is whether the subtypes of boundary violations represent distinct relational patterns or whether they

are part of one general process of boundary dissolution. While there was support for maintaining an assessment of overall boundary dissolution in the mother-child relationship, the results of this study also supported the distinctiveness of the various types of boundary dissolution. Even though the boundary scales were significantly correlated with each other and the total score was reliable, results were also found which were unique to the specific types of boundaries. For example, the scales demonstrated unique relationships with other parenting attitudes and variables. Therefore, while there seems to be some utility in maintaining the general construct of generational boundary dissolution, it is also important to be specific about how the process of boundary dissolution is being defined (Sroufe et al., 1985). As seen in the results of this study, important and distinct information can be gained by investigating the differences between these subtypes of boundaries.

Another major goal of this study was to investigate the factors in single-parent families which would be predictive of boundary dissolution. Specifically, it was hypothesized that maternal stress, depression, and lack of social support would all be issues relevant to single mothers that may impact boundary maintenance between parents and children. These results showed that both maternal depression and stress were significantly related to mother-child boundary dissolution, although maternal depression had a somewhat stronger relation with boundary dissolution than maternal stress. Previous research with two-parent families has identified this link between maternal stress and boundary dissolution (Fish et al., 1991), however, there is a lack of research investigating the relationship found in this study between maternal depression and boundary dissolution.

Research has found that depressed parents are less emotionally available to their children and more likely to develop insecure attachments with their children (see Cummings & Davies, 1994 for a review), results which may both be understood in relation to a process of boundary dissolution. When parents are depressed, they may be preoccupied with their own emotional needs, and therefore, less available and less attuned to the needs of their children (Biringen & Robinson, 1991). Instead, these parents may be more intrusive with their children and turn to their children to meet their own emotional needs (Biringen & Robinson, 1991; Gordon et al., 1989). This interference compromises children's development as children's needs are not being met in the family system. This unreliability in parental availability may result in the development of a sense of insecurity in children.

Social support was not found to predict parent-child boundary dissolution in the present study. One explanation for the lack of a significant relationship in this study may be that social support does not directly affect boundary dissolution, but rather, it affects boundary dissolution indirectly through its interactions with other maternal distress variables. Simons et al. (1993), in a study investigating the mediational and moderational effects of social support, also did not find any direct effects for social support on parenting and did not find that general social support buffered parents from the effects of financial stress and lack of spousal support. They did find, however, that social support had an indirect effect on parenting through its impact on depression. Therefore, social support may influence boundaries indirectly through its effects on maternal depression. In the present study, a strong correlation was found between lack of social support and depression, supporting the possibility of indirect effects of social support on parent-child

boundaries.

The third purpose of the study was to investigate the possible mediating and moderating effects of boundary dissolution on the relationship between maternal distress and child adjustment. Consistent with previous research (Fish et al., 1991; Fullinwider-Bush & Jacobvitz, 1993; Hiester, 1995; Jacobvitz & Bush, 1996; Jacobvitz & Sroufe, 1987; Kerig, 1995; Olver et al., 1989), this study found that parent-child boundary dissolution has negative effects on children's behavioral and emotional adjustment. These results add to the increasing body of evidence supporting the family systems view that boundary violations in parent-child relationships are related to negative outcomes for children's psychological development. To date, the research literature has investigated these negative effects of boundary dissolution on a variety of outcome variables, but has not considered the role of boundaries as a potential moderator or mediator of the constructs investigated. In the present study it was hypothesized that generational boundary dissolution could act as a mediator, providing an explanation for the link between maternal distress and child adjustment, or as a moderator, acting as a third variable which affects the relationship between maternal distress and child adjustment.

In general, the results of this study suggest that boundary dissolution acts as a mediator of the effects of maternal distress on child adjustment rather than a moderator. When mothers in this study were attempting to cope with stress or indicated that they were experiencing symptoms of depression, they were more vulnerable to engaging in inappropriate boundaries with their children. This increase in boundary dissolution was related to higher levels of self-reported anxiety by children. These results indicate that for families at risk, the resulting break-down in parent-child boundaries is an important

mechanism through which maternal distress affects children's adjustment. As noted in the introduction, some of the effects of maternal distress on parent-child relationships reported in the literature may be understood as part of this process of boundary dissolution between parents and children. It is important to note, however, that the effects of maternal stress and depression on child adjustment are not completely explained by boundary dissolution. While generational boundary dissolution provides a partial explanation of the effects of maternal distress on children's well-being, there are many other factors which may also account for the relationships between maternal stress and maternal depression and child adjustment. In addition, maternal stress and depression may have some direct effects on children's behavior problems.

In the present study, the mediational effects of generational boundary dissolution were found only with children's self-reported anxiety and not with mothers' reports of their children's behavior problems. These results suggest that for children, it is the resulting boundary dissolution which is more distressing for them than the direct effects of maternal stress and depression. According to mothers' reports, however, their own stress and depression is the significant factor affecting their children's adjustment. One explanation for these discrepant findings may be that mothers who are stressed and depressed inaccurately perceive their children as problematic, and, therefore, there is a direct link between maternal distress and mothers' reports of children's adjustment difficulties. This explanation is consistent with other research which has found that mothers' reports of their children's behavior problems may be influenced by their own levels of stress (Fox, Platz, & Bentley, 1995; Long & Forehand, 1992; Wolfe & Jaffe, 1985). For example, Briggs-Gowan, Carter, and Schwab-Stone (1996) found that mothers who were experiencing

symptoms of stress and depression reported more behavior problems in their daughters in comparison to both teachers' and children's reports. Another factor may be that mothers who are engaged in boundary dissolution with their children are not accurate reporters of their children's symptoms. Fish et al. (1991) found that parents who engaged in boundary dissolution rated their children as having significantly fewer adjustment difficulties in comparison to parents who did not engage in such relationships with their children, even though observations indicated that these parents' children were not as well-adjusted as children of parents who maintained clear boundaries.

In the present study, however, the relationship between maternal boundary dissolution and mothers' reports of children's behavior problems seems to have been affected by the gender of the child and the type of boundary violation. For girls, it does appear that mother-child boundary dissolution is related to maternal reports of fewer behavioral problems, although the girls themselves reported higher levels of anxiety. However, this was found when mothers were engaged in boundary violations with their daughters involving increased closeness and dependence (i.e., role-reversal and enmeshment). When mothers were engaged in spousification with their daughters, mothers also reported higher levels of behavior problems in their daughters. For boys, there were generally significant relationships found between boundary dissolution and mothers' reports of behavior problems. When mothers rely on their daughters for emotional support, girls may be socialized into a caregiving role in which they deny their own needs in order to satisfy their mothers' needs for emotional support. Therefore, girls may hide their distress from their mothers and experience more internalized anxiety than the mother is aware of. This is supported by findings that adult daughters of maritally

distressed parents report more mother-daughter alliances characterized by a subjugation of their own needs to the needs of their mothers, resulting in increased anxiety and compromised identity development (Fullinwider-Bush & Jacobvitz, 1993; Jacobvitz & Bush, 1996). Alternatively, mothers engaged in boundary violations with their daughters characterized by intense closeness and dependence may perceive their daughters as competent and well-functioning even if their daughters are showing signs of distress. The inclusion of an objective measure of children's adjustment, such as a teacher rating form, and observations of children with their mothers would be helpful to clarify these issues in future studies.

The mediational and moderational effects of boundary dissolution were also more complex when subtypes of boundaries and children's gender were considered. For girls, the results of this study seemed to indicate a particular vulnerability to mother-daughter spousification. A moderate gender difference in spousification was found in the present study, with mothers of daughters engaging in more spousification than mothers of sons. Girls in this study reported significant increases in self-reported anxiety when mothers engaged in spousification. In addition, for girls, spousification was found to mediate the relationship between maternal stress, depression, and social support and symptoms of anxiety. When mothers were distressed, there seemed to be a particular vulnerability towards engaging in hostile interactions with daughters which were based on mothers' negative feelings towards their ex-partners.

These results differed from expectations that mothers would be more likely to engage in "spill-over" of their hostile feelings towards their male partners onto their sons. Previous research has found that maritally unhappy parents may allow their negative



feelings to "spill-over" onto their relationships with their daughters (Kerig et al., 1993). In particular, Kerig et al. (1993) found that daughters faced negative reactions from their mothers when they asserted themselves. Research has shown that girls are more likely than boys to intervene in family conflicts (Vuchinich, Emery, & Cassidy, 1988), and perhaps this results in increased hostile reactions from mothers. This may be particularly the case when daughters align themselves with their fathers or engage in conflictual interactions with their mothers reminiscent of conflict between the mother and father. In addition, some studies in the boundaries literature have found that when mothers are dissatisfied with their relationships with their partners, they may interact in more seductive and intimate ways with their sons while parentifying their daughters (Hiester, 1995; Sroufe et al., 1985). This process may result in more hostile feelings towards daughters who are in the parental role. In contrast, sons may be perceived more positively because they are fulfilling intimacy needs.

Sroufe et al. (1985) have indeed found that mothers engaged more often in seductive behavior with sons, and expressions of hostility towards daughters. They found that mothers in maritally unhappy relationships were more likely to engage in a form of boundary dissolution with daughters which involved being unsupportive and degrading of them. They hypothesized that this relational pattern was a product of these mothers' relationship histories with their own mothers, which likely involved role-reversal and emotional unavailability. Thus, these mothers learned a pattern of distance in mother-daughter relationships and would be replaying their feelings of being unloved and unappreciated with their daughters. Kerig et al. (1993) have also hypothesized that the negative interactions between mothers and daughters in their study may have resulted

from mothers attempting to engage their daughters in a relationship style reflective of their own marriages. In the present study, the higher scores between mothers and daughters on spousification may, therefore, reflect a transferring of anger regarding unmet needs from ex-partners onto daughters, based on their relational history in mother-daughter relationships. While the present study focused on the negative feelings mothers have towards their ex-partners, further research comparing both seductive and hostile patterns is needed in order to clarify the gender issues raised.

In contrast to girls, the results of this study suggest that boys were at increased risk for the development of emotional difficulties when they were involved in role-reversed relationships with their mothers. Although previous research has highlighted the presence of role-reversal relationships between mothers and daughters (Hiester, 1995; Mika et al., 1987; Valleau et al., 1995), no gender differences were found in the present study with regard to mothers' engagement in role-reversal with their children. Although boys were not involved in role-reversal more often with their mothers, they did exhibit a particular vulnerability in response to mothers' engagement in role-reversal with them. For boys, their mothers' reliance on them to fulfill a parental role was a more distressing process than the direct effects of their mothers' own stressful experiences. The negative effects of role-reversal for sons may be related to the different kinds of role-reversal mothers have been found to engage in with their sons versus their daughters (Hiester, 1995; Jacobvitz & Sroufe, 1987). Specifically, these studies have found that mothers tended to engage in more intimate and "peer-like" relationships with their sons, but tended to "parentify" their daughters. Perhaps it is this uniquely intimate quality in role-reversals with sons which is particularly distressing for boys. In the present study, however, the concept of role-

reversal included both aspects of peer-like support and parent-like care and so gender differences related to these different aspects of role-reversal could not be determined.

For boys, maternal boundaries in general, and spousification in particular, seemed to act as moderators of the relationship between mothers' lack of social support and adjustment. In the present study, lack of social support was not necessarily related to mothers' vulnerability to boundary dissolution with their sons. In situations where mothers lacked social support, boundary dissolution acted more like a third variable which affected the relationship between mothers' distress and sons' adjustment. If mothers can maintain clear boundaries with their sons, despite their lack of social support, this will have important positive effects on their sons' adjustment. In particular, it is important for mothers who lack social support not to allow their negative feelings towards their ex-partners to spill-over onto their sons. Research has found that when parents lack social support from friends, neighbors and extended family, lack of spousal support plays an increased negative role on parenting (Simons et al., 1993). Therefore, mothers who lack social support may be particularly vulnerable to transferring onto their sons their feelings of resentment and hostility towards their ex-partners' lack of support.

In addition to the specific vulnerabilities associated with role-reversal and lack of social support for boys, mothers' enmeshment was also related to significant increases in boys' internalizing and externalizing behavior problems. These findings may be due to the particularly negative effects of enmeshment when it takes the form of seductive intimacy with boys as has been reported in some studies (Hiester, 1995; Sroufe et al., 1985). Another possibility is that mothers engaged in enmeshed relationships with their sons perceive their sons to be experiencing serious adjustment difficulties and, thereby, justify

their over-involvement with their sons. The present study did find significantly positive correlations between maternal enmeshment and maternal reports of boys' internalizing and externalizing, a result which was not found for girls. These results suggest the need for further research on the gender-specific effects of enmeshment on children's adjustment or, alternatively, on mothers' perceptions of their children's adjustment. With regards to enmeshment, no research has been done comparing the effects of mothers' enmeshment with sons versus daughters (Jacobvitz & Bush, 1996). While Jacobvitz and Bush (1996) speculated that enmeshment may be related specifically to externalizing behaviors in boys, this was not supported in the present study. Mothers' enmeshment was related to reports of both internalizing and externalizing difficulties for boys. Therefore, enmeshment may result in internalized anxiety for boys, as well as for girls, although further research examining both mothers' and children's reports of anxiety is needed.

#### Limitations of the Present Study

One possible complicating factor in this study is the mixture of family structures among these single parent families. Some of the children in the study experienced the separation or divorce of their parents at various stages of their development, while others grew up solely in a single-parent family. Distinctions among these family types may be important for clarifying the differential effects of family structure on systemic family processes. The process of boundary dissolution in single-parent families may be different than the process of boundary dissolution in families who have gone through the conflict and stress associated with a separation or a divorce. When families have undergone a period of marital conflict, the children may be at increased risk for being triangulated into the spousal system (Jacobvitz & Bush, 1996; Kerig, 1995; Minuchin, 1974). The various

ways that parents may involve children in their own conflicts may interact with the boundary violations specific to parent-child relationships investigated in this study. For example, Jacobvitz and Bush (1996) found that daughters were more likely to be involved in enmeshed relationships with their fathers when there was distance in the marital relationship, but more likely to be enlisted in a mother-daughter coalition when their parents were in conflict.

In addition to the effects associated with previous marital conflict, the quality of mothers' current relationships with their children's fathers may have affected mother-child boundary dissolutions. Although variability in the degree of conflict in mothers' relationships with their ex-partners was not found to be related to boundary dissolution, more specific information about the quality of this relationship may be related to differences in mother-child boundary dissolution. For example, research has found that estranged versus conflictual relationships between parents have differential effects on parent-child boundary dissolution (Jacobvitz & Bush, 1996).

Results regarding gender differences need to be interpreted cautiously given the small sample sizes of boys and girls in the present study. Despite small sample sizes, however, some significant results were found which varied across child gender. These gender effects are important to consider since they may change the interpretation of results found when all children are combined in the sample. For example, the moderating effects of boundaries on the relationship between maternal social support and internalizing symptoms found with the entire sample was apparent only for boys when the sample was divided by child gender.

Although the Parent-Child Boundaries Scale demonstrated adequate reliability and

was found to correlate significantly with other related parenting constructs, it is a new measure and further investigation of its psychometric properties is required. In addition, self-reports of boundary dissolution need to be compared to observations of actual mother-child interactions. Given the number of studies in this area relying on observational codings of parent-child boundary dissolution, knowledge about the relationships between self-reports and observations of boundaries will allow comparisons across studies to be made. Since parents are involved in the process of boundary dissolution themselves, it may be difficult for them to reflect accurately on these processes. The information that parents provide about boundaries may differ from actual observations of these behaviors in meaningful ways. For example, mothers may be able to report on the specific behaviors involved in role-reversed relationships, but may be less aware of their engagement in an enmeshed relationship with their child. In the present study, however, some support for the validity of self-reported boundary dissolution was found given that there were significant correlations between children's and mothers' reports of boundaries.

#### Implications and Future Research

The findings of the present study support the empirical investigation of constructs derived from family systems theories. The process of defining and operationalizing the construct of boundary dissolution allows both professionals working with families and family members themselves to become more aware of the specific behaviors in their relationships which may be of concern. The inclusion of this information may be particularly important in prevention and intervention programs targeted at families who are facing stress or dealing with emotional difficulties such as depression. In single-parent

families in particular, mothers are faced with increases in work stress and loss of support from spouses, and so they may turn to their children to fulfill their needs for emotional support (McLanahan & Sandefur, 1994). It is important for those working with families at risk to be aware of the possible boundary violations occurring in these families in order to help them develop more adaptive parent-child relationships.

Future research in this area should continue to investigate the unique effects of specific types of boundary violations and their interactions with both parent and child gender. In addition, investigations of boundary dissolution in single and two-parent families will allow for comparisons of these systemic family processes across various family structures. In general, the role of fathers in the process of boundary dissolution is an important area for future research in both single and two-parent families. Specifically, the impact of the quality and frequency of children's contact with their fathers should be examined as well as differences in father-son versus father-daughter boundaries. Another important area for future research is the investigation of all members in the family system, which will provide important information regarding the interrelations among dyadic family interactions (Jacobvitz & Bush, 1996; Kerig, 1995). Given the intergenerational transmission of these relational patterns, longitudinal research is needed in order to further understand the effects of family structure and gender on the development of parent-child boundaries.

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Table 1

Means, Standard Deviations, and Ranges of Variables


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	<u>M</u>	<u>SD</u>	<u>Range</u>
LES Total	20.02	14.58	1-70
BDI Total	9.58	7.24	0-46
SSQ Satisfaction	51.73	14.35	4-72
PBS-P Total	80.01	15.38	44-125
RCMAS	10.89	6.08	0-23
CBCL Internalizing	13.08	9.13	0-58
CBCL Externalizing	12.98	7.49	0-33

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Note. LES = maternal stress; BDI = maternal depression; SSQ = maternal social support; PBS-P = parent-child boundaries; RCMAS = children's self-reported anxiety; CBCL = mothers' reports of child behavior problems

Table 2

Means, Standard Deviations, and Alphas of the Parent-Child Boundaries Scale

	<u>M</u>	<u>SD</u>	Alpha
<u>Parent-Report</u>			
Total Score	80.71	15.38	.89
Role-Reversal	21.05	5.12	.78
Enmeshment	17.13	4.07	.73
Intrusiveness	14.61	3.24	.72
Spousification	11.21	4.82	.85
Protection From Spill Over	16.51	3.15	.49
<u>Child Report</u>			
Total Score	93.27	14.82	.79
Role-Reversal	29.29	5.58	.68
Enmeshment	21.37	4.53	.50
Intrusiveness	14.01	4.57	.66
Spousification	9.81	4.50	.75
Protection From Spill-Over	18.01	3.92	.40

Table 3  
Correlations Among Parent Scales, Child Scales and Between Parent and Child Scales of the Parent-Child Boundaries Measure

	P-Tot	P-RR	P-En	P-In	P-Spo	P-Pro	C-Tot	C-RR	C-En	C-In	C-Spo	C-Pro
P-Tot	.82**	.82**	.70**	.69**	.65**							
P-RR		.63**	.51**	.39**	.39**							
P-En			.56**	.40**	.49**							
P-In				.29**	.36**							
P-Spo					.37**							
P-Pro												
C-Tot	.43**	.32*	.35**	.19	.35**	.27*	.71**	.61**	.56**	.62**	.69**	
C-RR	.45**	.44**	.38**	.20	.27	.28*		.46**	.04	.21	.42**	
C-En	.40**	.38**	.36**	.18	.37**	.16			.18	.12	.27*	
C-In	.08	-.01	.10	.08	-.01	.15				.33*	.30*	
C-Spo	.06	-.05	.05	.01	.18	.05						.38**
C-Pro	.28*	.17	.23	.21	.25	.12						

Note. P- = Parent-report version of the PBS; C- = Child-report version of the PBS; Tot = Total score of the PBS; RR = Role-

Reversal scale; En = Enmeshment scale; In = Intrusiveness scale; Spo = Spousification scale; Pro = Protection from Spill-Over scale

\* $p < .05$ . \*\* $p < .01$ .

Table 4

Correlations Among the Parent-Child Boundaries Scale, the Adult-Adolescent Parenting Inventory, the Parenting Stress Index, and the Parental Attitudes Towards Childrearing Questionnaire

	PBS-Tot	PBS-RR	PBS-En	PBS-In	PBS-Spo	PBS-Pro
AAPI						
Role-Reversal	<u>.40**</u>	<u>.55**</u>	.35**	.35**	.21+	.28**
Inappropriate Expectations	.17	.25*	.08	.15	.17	.09
PSI						
Total	<u>.38**</u>	<u>.35**</u>	<u>.24*</u>	<u>.21+</u>	<u>.47**</u>	<u>.15</u>
Sense of Competence	<u>.33**</u>	<u>.31**</u>	.19+	.15	.48**	.07
Social Isolation	<u>.22*</u>	<u>.35**</u>	<u>.18+</u>	.02	.21*	.07
PACQ						
Independence	<u>-.25*</u>	-.16	-.20+	<u>-.27**</u>	-.18	-.04

Note. PBS-Tot = Total score of the PBS parent version; RR = Role-Reversal; En = Enmeshment; In = Intrusiveness; Spo = Spousification; Pro = Protection from Spill-Over. Correlations hypothesized to be significant are underlined.

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

Table 5

Correlations Between Maternal Stress, Depression, Social Support, and BoundaryDissolution

	LES	BDI	SSQ
PBS-P Total	.22*	.30**	-.11
LES		.30**	-.27*
BDI			-.59**
SSQ			

Note. PBS-P = parent-child boundaries; LES = maternal stress; BDI = maternal depression; SSQ = maternal social support

\* $p < .05$ . \*\* $p < .01$ .

Table 6

Correlations Between the Parent-Child Boundaries Scale and Maternal Stress, Depression, and Social Support

Predictors	PBS-P Scales				
	Role-Reversal	Enmeshment	Intrusiveness	Spousification	Protection
LES	.24*	.07	.13	.29**	.08
BDI	.38**	.29**	.10	.29**	.04
SSQ	-.24*	-.11	-.07	-.18	.09

Note. PBS-P = parent-child boundaries; LES = maternal stress; BDI = maternal depression; SSQ = maternal social support.

\* $p < .05$ . \*\* $p < .01$ .



Table 7

Correlations Between the Parent-Child Boundaries Scale and Child Adjustment

Child Adjustment	PBS-Tot	PBS-RR	PBS-En	PBS-In	PBS-Spo	PBS-Pro
RCMAS	.26*	.30**	.29**	.07	.20+	.11
INT	.26*	.22*	.26**	.11	.28**	.05
EXT	.28**	.16	.20+	.12	.36**	.09

Note. PBS-Tot = Total score; RR = Role-Reversal; En = Enmeshment; In = Intrusiveness; Pro = Protection from Spill-Over; RCMAS = anxiety; INT = CBCL internalizing behaviour problems; EXT = CBCL externalizing behaviour problems.

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

Table 8

Gender Differences in the Correlations Between the Parent-Child Boundaries Scale and  
Child Adjustment

PBS-P	RCMAS		INT		EXT	
	Girls	Boys	Girls	Boys	Girls	Boys
PBS-Tot	.36**	.14	.14	.42**	.20	.42**
PBS- Intrusiveness	.09	.04	.13	.09	<u>-.02</u>	<u>.30*</u>
PBS-Role- Reversal	.38**	.21	<u>.03</u>	<u>.52**</u>	.09	.30*
PBS- Spousification	<u>.39**</u>	<u>-.03</u>	.34*	.24+	.45**	.30*
PBS- Enmeshment	.33*	.22+	<u>.09</u>	<u>.47**</u>	<u>.01</u>	<u>.42**</u>
PBS- Protection	.17	.06	-.01	.11	.07	.14
RCMAS			.10	.31*	.16	.37*
INT					.56**	.46**

Note. Underscore indicates correlations which significantly differ for boys and girls (Fisher's z,  $p < .05$ ).  
+ $p < .10$ . \* $p < .05$ . \*\* $p < .01$ .

Table 9

Correlations Between Ratings of Maternal Distress and Child Adjustment

Maternal Distress	Child Adjustment		
	RCMAS	Internalizing	Externalizing
LES	.22*	.44**	.40**
BDI	.20+	.52**	.20+
SSQ	-.13	-.37**	-.13

Note. RCMAS = anxiety; LES = maternal stress; BDI = maternal depression; SSQ = maternal social support.

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

Table 10

Mediational Effects of Boundaries on the Relationship Between Life Stress and Children's Self-Reported Anxiety

Equation	Variables in Regression Equation	F	Beta	T
1.	PBS regressed on LES	3.88*	.21*	1.97*
2.	RCMAS regressed on LES	4.60*	.22*	2.15*
3.	RCMAS regressed on LES	3.77*	.14	1.30
	and on PBS		.23*	2.00*

Note. PBS = parent-child boundaries; LES = maternal stress; RCMAS = children's self-reported anxiety.

\* $p < .05$ .

Table 11

Mediational Effects of Boundaries on the Relationship Between Maternal Depression and Children's Self-Reported Anxiety

Equation	Variables in Regression Equation	F	Beta	T
1.	PBS regressed on BDI	8.28**	.30**	2.88**
2.	RCMAS regressed on BDI	4.20*	.21*	2.05*
3.	RCMAS regressed on BDI	3.38*	.11	1.00
	and on PBS		.23*	2.01*

Note. PBS = parent-child boundaries; BDI = maternal depression; RCMAS = children's self-reported anxiety.

\* $p < .05$ . \*\* $p < .01$ .

Table 12

Hierarchical Multiple Regressions for the Moderating Effects of Boundaries on the Relationship Between Maternal Stress and Mothers' Reports of Child Externalizing

Step	Variable Block	R <sup>2</sup> Change	F Change	Beta
1.	Maternal Stress	.16	15.86**	.40**
2.	PBS	.04	3.75*	.20*
3.	Maternal Stress x PBS	.03	2.80+	1.12+

Note. PBS = parent-child boundaries.

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

Table 13

Hierarchical Multiple Regressions for the Moderating Effects of Boundaries on the Relationship Between Maternal Social Support and Mothers' Reports of Child Internalizing

Step	Variable Block	R <sup>2</sup> Change	F Change	Beta
1.	Maternal Social Support	.14**	12.92**	-.36**
2.	PBS	.05*	4.58*	.22*
3.	Social Support x PBS	.03+	2.65+	-1.01+

Note. PBS = parent-child boundaries.

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

Table 14

Mediational Effects of Boundaries on the Relationship Between Life Stress and RCMAS  
for Girls

Equation	Variables in Regression Equation	F	Beta	T
1.	PBS regressed on LES	3.25+	.26+	1.80+
2.	RCMAS regressed on LES	4.66*	.30*	2.16*
3.	RCMAS regressed on LES and on PBS	3.93*	.17 .31*	1.14 1.98*

Note. PBS = parent-child boundaries; LES = maternal stress; RCMAS = children's self-reported anxiety.

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



Table 15

Hierarchical Multiple Regressions for the Moderating Effects of Boundaries on the Relationship Between Maternal Depression and Mothers' Reports of Boys' Internalizing Symptoms

Step	Variable Block	R <sup>2</sup> Change	F Change	Beta
1.	Maternal Depression	.59	51.86**	.77**
2.	PBS	.08	8.13**	.28**
3.	Depression x PBS	.04	4.94*	2.22*

Note. PBS = parent-child boundaries.

\* $p < .05$ . \*\* $p < .01$ .

Table 16

Hierarchical Multiple Regressions for the Moderating Effects of Boundaries on the Relationship Between Maternal Social Support and Mothers' Reports of Boys' Internalizing Symptoms

Step	Variable Block	R <sup>2</sup> Change	F Change	Beta
1.	Maternal Social Support	.14	6.00**	-.38**
2.	PBS	.18	9.06**	.42**
3.	Social Support x PBS	.15	9.75**	-2.87**

Note. PBS = parent-child boundaries.

\* $p < .05$ . \*\* $p < .01$ .

Table 17

Mediational Effects of Role-Reversal on the Relationship Between Maternal Stress and Depression and Children's Self-Reported Anxiety

Equation	Variables in Regression Equation	F	Beta	T
1.	RR regressed on LES	4.98*	.24*	2.23*
2.	RCMAS regressed on LES	3.41*	.20*	1.90*
3.	RCMAS regressed on LES and on RR	4.83**	.13 .27**	1.20 2.46**
1.	RR regressed on BDI	13.74**	.38**	3.71**
2.	RCMAS regressed on BDI	3.23*	.19*	1.86*
3.	RCMAS regressed on BDI and on RR	4.20**	.08 .27*	.67 2.36*

Note. RR = role-reversal; LES = maternal stress; RCMAS = children's self-reported anxiety; BDI = maternal depression.

\* $p < .05$ . \*\* $p < .01$ .

Table 18

Mediational Effects of Role-Reversal on the Relationship Between Life Stress and Mothers' Reports of Boys' Internalizing

Equation	Variables in Regression Equation	F	Beta	T
1.	RR regressed on LES	4.11*	.32*	2.02*
2.	INT regressed on LES	4.04*	.32*	2.01*
3.	INT regressed on LES	7.46**	.16	1.11
	and on RR		.47**	3.15**

Note. RR = role-reversal; LES = maternal stress; INT = CBCL internalizing behavior problems.

\* $p < .05$ . \*\* $p < .01$ .

Table 19

Hierarchical Multiple Regressions for the Moderating Effects of Spousification on the Relationship Between Maternal Depression and Social Support and Mothers' Reports of Boys' Internalizing Symptoms

Step	Variable Block	R <sup>2</sup> Change	F Change	Beta
1.	Maternal Depression	.58**	49.25**	.76**
2.	Spousification	.02	1.44	.13
3.	Depression x Spousification	.04+	3.44+	.87+
1.	Maternal Social Support	.19**	7.98**	-.43**
2.	Spousification	.06+	2.56+	.24+
3.	Social Support x Spousification	.26**	17.43**	-2.75**

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

Table 20

Mediational Effects of Spousification on the Relationship Between Maternal Stress and Girls' Self-Reported Anxiety and Between Maternal Depression and Social Support and Girls' Internalizing

Equation	Variables in Regression Equation	F	Beta	T
1.	Spousification regressed on LES	12.17**	.47**	3.49**
2.	RCMAS regressed on LES	3.56*	.29*	1.89*
3.	RCMAS regressed on LES and on Spousification	4.20*	.16 .33*	.99 2.13*
1.	Spousification regressed on BDI	9.50**	.43**	3.08**
2.	INT regressed on BDI	3.75*	.34*	2.08*
3.	INT regressed on BDI and on Spousification	2.95*	.06 .36*	.37 2.03*
1.	Spousification regressed on SSQ	4.24*	-.30*	-2.06*
2.	INT regressed on SSQ	6.67**	-.36**	-2.58**
3.	INT regressed on SSQ and on Spousification	3.62*	-.19 .31*	-1.31 2.00*

Note. LES = maternal stress; RCMAS = children's self-reported anxiety; BDI = maternal depression; INT = CBCL internalizing behavior problems; SSQ = maternal social support.

\* $p < .05$ . \*\* $p < .01$ .

## Figure Captions

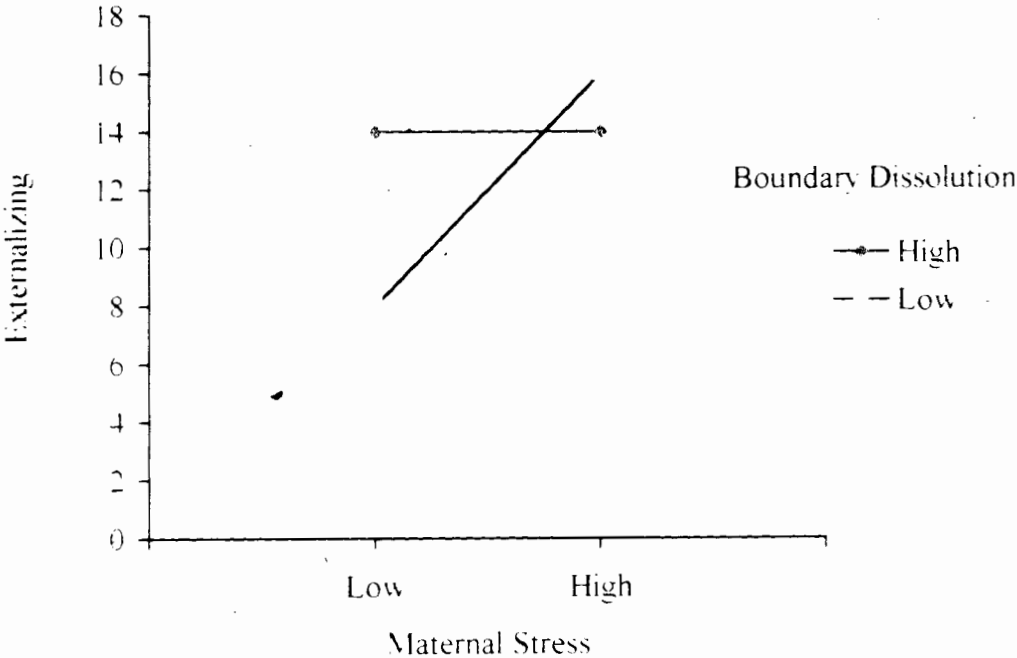
Figure 1. The effects of parent-child boundaries on the relationship between maternal stress and children's externalizing behavior problems.

Figure 2. The effects of parent-child boundaries on the relationship between maternal social support and children's internalizing behavior problems.

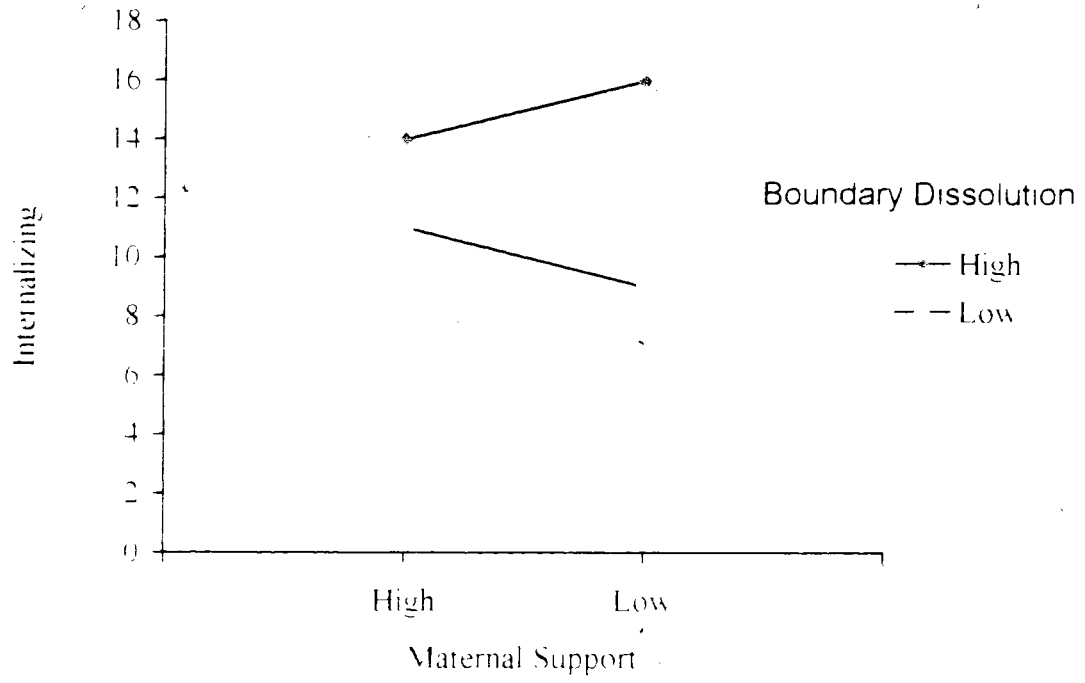
Figure 3. The effects of parent-child boundaries on the relationship between maternal depression and boys' internalizing behavior problems.

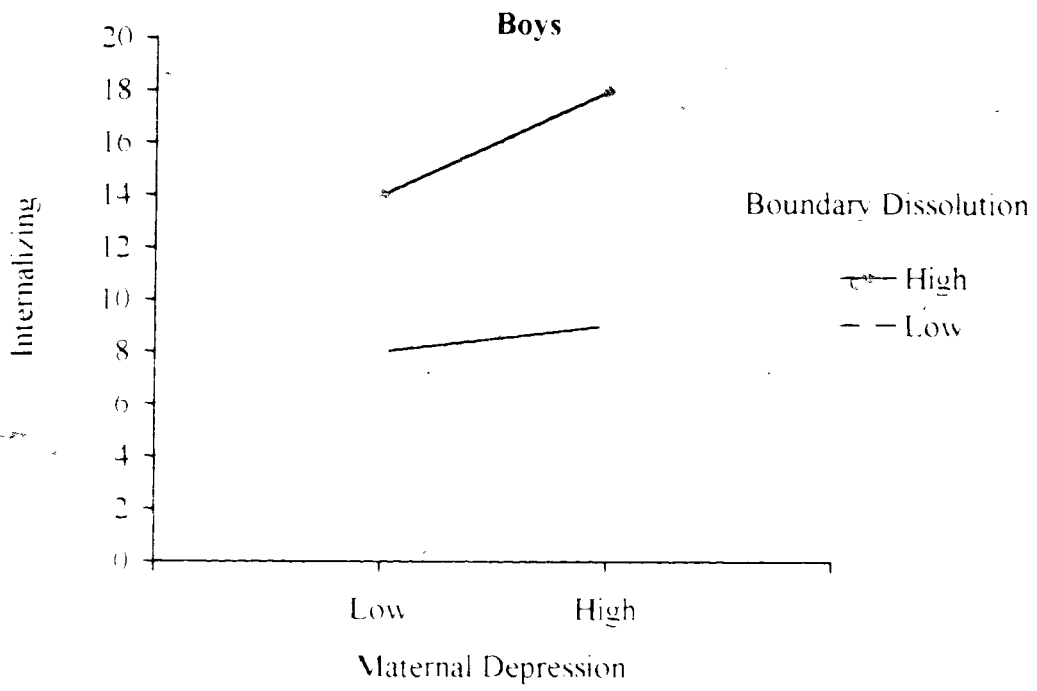
Figure 4. The effects of parent-child boundaries on the relationship between maternal social support and boys' internalizing behavior problems.

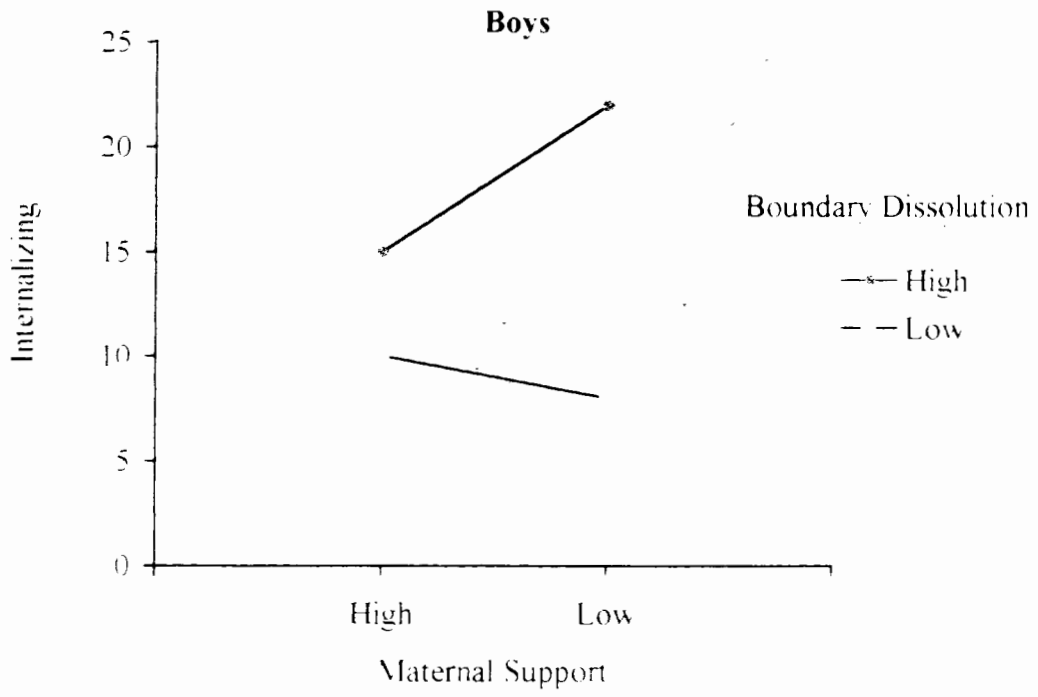
Figure 5. The effects of spousification on the relationship between maternal social support and boys' internalizing behavior problems.

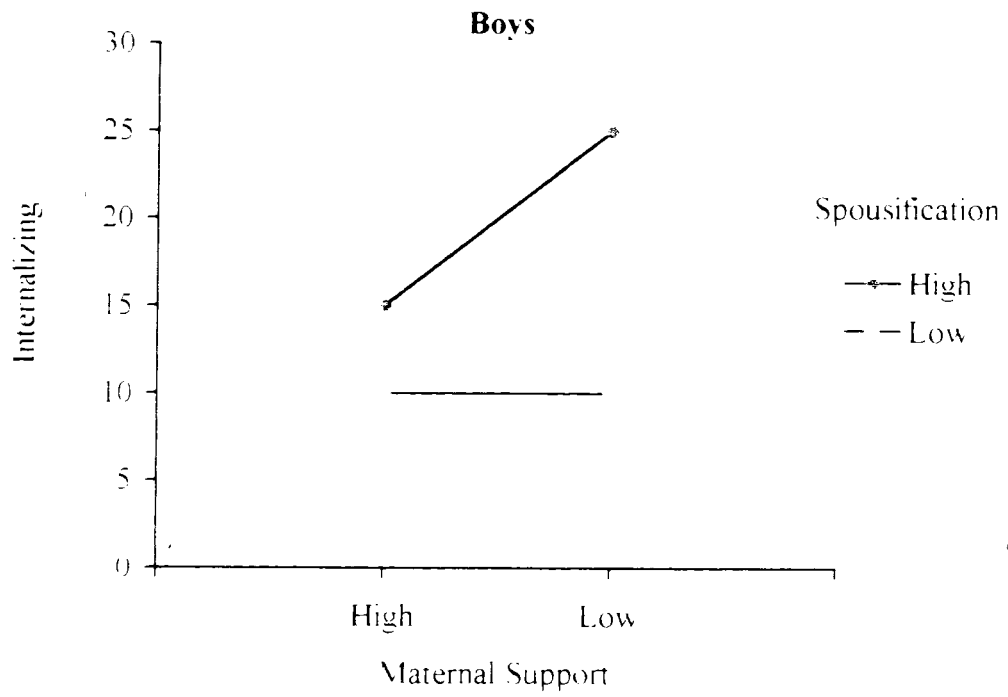












Appendix A:  
Parent-Child Boundaries Scale - Parent Version

**Parent PBS**

The following statements describe different things that parents do and various concerns that they might have about their children. Please indicate how much each item is true for you by circling the right number. Remember, there are no right or wrong answers and your first thought is usually best.

	never	hardly ever	sometimes	often	almost always
1. Even if my child asked me not to go in his/her room, I would go in anyway.	1	2	3	4	5
2. I feel lonely when my child spends time away from me.	1	2	3	4	5
3. My child and I are so close that we can tell what the other is thinking and feeling.	1	2	3	4	5
4. I talk to my child about my personal life just as if s/he were a grown-friend.	1	2	3	4	5
5. My child takes care of things around the house just as if s/he were a grown-up.	1	2	3	4	5
6. My child "pushes my buttons" just like his/her father.	1	2	3	4	5
7. When I'm upset about things in my life, I am more easily upset with my child.	1	2	3	4	5
8. I feel like I'm the kid and my child is the parent.	1	2	3	4	5
9. It bothers me when my child wants to have privacy from me.	1	2	3	4	5
10. I want my child to comfort me when I am feeling blue.	1	2	3	4	5
11. It is important for parents to treat children as separate individuals.	1	2	3	4	5
12. My child and I are so alike, it is as though we are two halves of the same person.	1	2	3	4	5
13. When my child is misbehaving, s/he reminds me of his/her father.	1	2	3	4	5
14. My child feels I ask him/her too many personal questions.	1	2	3	4	5
15. I react to my child the same way I react to his/her father.	1	2	3	4	5
16. Children who are protected too much from stress will not be tough enough to cope with life.	1	2	3	4	5

	never	hardly ever	sometimes	often	almost always
17. I need to know everything that my child is thinking and feeling.	1	2	3	4	5
18. I try as much as possible to protect my child from the stresses that I'm going through.	1	2	3	4	5
19. I need my child to support me emotionally.	1	2	3	4	5
20. I want to be kept informed about everything that goes on in my child's relationships with other people.	1	2	3	4	5
21. It bothers me if my child has fun and is carefree when I have troubles.	1	2	3	4	5
22. I have similar feelings towards my child as I do towards his/her father.	1	2	3	4	5
23. I would look through my child's personal things without his/her knowledge.	1	2	3	4	5
24. When I'm mad at my partner, I also get mad at my child.	1	2	3	4	5
25. I want my child to spend a lot of time with me.	1	2	3	4	5
26. My child and I think and feel just the same.	1	2	3	4	5
27. My child deserves to have an easier time of it than I've had.	1	2	3	4	5
28. It bothers me if my child has opinions or feelings that disagree with mine.	1	2	3	4	5
29. I talk to my child about things that upset me, even if they are "adult" matters (my personal problems, my intimate relationships, "grown-up" worries).	1	2	3	4	5
30. I wish my child were not so much like his/her father.	1	2	3	4	5
31. My child is responsible for my happiness.	1	2	3	4	5
32. I can tell how my child is feeling even better than s/he can.	1	2	3	4	5
33. My child acts like a parent more than I do.	1	2	3	4	5
34. I would rather spend time with my child than with other grown-ups.	1	2	3	4	5
35. If I am feeling bad, my child is the one who cheers me up.	1	2	3	4	5

Appendix B:  
Parent-Child Boundaries Scale - Child Version



## Child PBS

I am going to read some statements about different things that mothers do. Think about your mother and decide if this is something she usually does, often does, sometimes does, rarely does, or never does.

	never	hardly ever	sometimes	pretty much	a lot
1. My mom would go in my room even if I asked her not to.	1	2	3	4	5
2. My mom feels lonely when I do not spend enough time with her.	1	2	3	4	5
3. My mom and I know each other's thoughts and feelings.	1	2	3	4	5
4. My mom tells me too many personal things about her life.	1	2	3	4	5
5. I take care of things around my house, just as if I were a grown-up.	1	2	3	4	5
6. I make my mom upset, just like my dad does.	1	2	3	4	5
7. When my mom is upset about something, she also gets upset with me.	1	2	3	4	5
8. I feel like my mom is the kid and I'm the parent.	1	2	3	4	5
9. It's OK with my mom if I have things that are private from her.	1	2	3	4	5
10. I'm the one who is supposed to make sure my mom is happy.	1	2	3	4	5
11. It's OK for me to think and feel differently from my mom.	1	2	3	4	5
12. My mom and I are so much the same we're almost like the same person.	1	2	3	4	5
13. When my mom gets mad at me, she says I'm just like my dad.	1	2	3	4	5
14. My mom asks me to tell her about things that I don't want to tell her.	1	2	3	4	5
15. My mom treats me just the same way she treats my dad.	1	2	3	4	5
16. My mom thinks that it is important for me to know about her problems.	1	2	3	4	5
17. My mom needs to know everything I think and feel.	1	2	3	4	5

	never	hardly ever	sometimes	pretty much	a lot
18. My mom talks to me about her worries.	1	2	3	4	5
19. My mom needs me to take care of her.	1	2	3	4	5
20. My mom asks too many questions about me and my friends.	1	2	3	4	5
21. My mom wants me to be happy even if she has worries.	1	2	3	4	5
22. My mom feels the same way about me as she does about my dad.	1	2	3	4	5
23. My mom looks through my personal stuff without asking me.	1	2	3	4	5
24. When my mom is mad at my dad, she also gets mad at me.	1	2	3	4	5
25. My mom wants me to spend a lot of time with her.	1	2	3	4	5
26. My mom thinks and feels the same as me.	1	2	3	4	5
27. My mom tells me not to worry about her problems.	1	2	3	4	5
28. It's OK with my mom if I disagree with her.	1	2	3	4	5
29. My mom talks with me about "grown-up" things that are not really for kids.	1	2	3	4	5
30. My mom wishes I didn't act so much like my dad.	1	2	3	4	5
31. It is my job to make sure my mom is happy.	1	2	3	4	5
32. My mom thinks she knows how I am feeling better than I do.	1	2	3	4	5
33. I take care of my mom more than she takes care of me.	1	2	3	4	5
34. My mom would rather spend time with me than with her grown-up friends.	1	2	3	4	5
35. If my mom is feeling bad, it is up to me to cheer her up.	1	2	3	4	5