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SOCIAL CAPITAL, PARENTAL BEHAVIORS AND CHILDREN'S SELF-ESTEEM IN THE FAMILY CONTEXT

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Ph.D. degree in Sociology

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SOCIAL CAPITAL, PARENTAL BEHAVIORS AND CHILDREN'S SELF-ESTEEM IN THE FAMILY CONTEXT

By

Shu-Yao Hsu

A DISSERTATION

Submitted to
Michigan State University
in partial fulfillment of the requirements
for the degree of

DOCTOR OF PHILOSOPHY

Department of Sociology and Urban Affairs Programs

2001

ABSTRACT

SOCIAL CAPITAL, PARENTAL BEHAVIORS AND CHILDREN'S SELF-ESTEEM IN THE FAMILY CONTEXT

By

Shu-Yao Hsu

The increasing of the one-parent families has been argued to decrease the availability of social capital for children due to the lack of social ties from the other parent. The growing number of mothers participating in the labor force can negatively effect the parent-child relationship due the limited time spending with children. Parents have long been seen as the primary social agents to bring and secure resources for their children in the process of socialization. Do parents still play the primary role in the process of child development in the current American families?

Research has not systematically examined the relationships among social capital, parental behaviors, and a child's socio-emotional development. Some research has focused on the parental intellectual and other resources contributing to family capital that effects child outcomes, but neglected parental behaviors, while some emphasized the impact of parental behavior on the child's psychological development without consideration of other broader family factors. This current study attempts to apply Alejandro Portes' theory of social capital and examine the impact of social capital and other forms of family capital on parental behaviors that contribute to children's self-esteem.

The major research questions are (1) what types of capital have the more effects on parental behaviors, social capital, human capital of parents, or financial capital of a

family? (2) whether the lack of any of the three types of capital can be compensated by either one of the other two types of capital in terms of shaping parental behaviors; (3) what types of parental behaviors lead to higher self-esteem for children.

The current study will use the data set collected by the Child Development Supplement (CDS) to the Panel Study Income Dynamics (PSID). The CDS data were collected by the University of Michigan Survey Research Center in 1997 with funding from the National Institute of Child Health and Human Development (NICHD) as a separate project of the Panel Study Income Dynamics (PSID).

Support reciprocity between parents and people outside the household, family income, and parental education predict supportive parental behaviors including parental warmth, parental monitoring, and "telling others positive things about the child". The family financial strain predicts parental monitoring. The less the family financial strain is, the higher the parental monitoring is. "The higher degree of supportive parental behaviors, the higher children's self-esteem" is supported by three supportive parental behaviors that are parental warmth, parental monitoring, and "telling others positive things about the child".

This study reveals that social support, family income, and parental human capital are the important factors to lead to supportive parental behaviors. The supportive parental behaviors contribute to the higher children's self-esteem. It has been argued that the best parenting style should spare the rod or spare the hug. No matter we spare the rod or not, the hug should never be spared.

ACKNOLEDGMENTS

The years as a graduate student in Sociology Department and Urban Affairs Programs have been very stimulating and instructive. First of all I would like to thank Clifford L. Broman, my adviser, not only for his support, encouragement and wise guidance, but also for providing me the opportunities to join his research. Consequently, I learned what I needed for finishing my dissertation smoothly.

I would like to thank Steve Gold, Stan Kaplowitz and Dozier Thornton, members of my committee, who provided me important information and suggestions.

In addition, I would like to give special thanks to Ruth S. Hamilton, who has been encouraging during my years as a graduate student.

Finally, I would like to thank my husband, my daughter, my parents, the secretaries in related departments and offices including Fran Anna Fowler, Joan Reid, Tamara Dennany, and friends who have been supportive, instrumentally or emotionally.

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CHAPTER I INTRODUCTION

1. Introduction

"A Call to Civil Society: Why Democracy Needs Moral Truths", a report issued by the Council on Civil Society in 1998, claims that the deterioration of child and adolescent well-being is one critical dimension indicating social crisis of moral depletion in the United States of America (Elshtain, 1999). As noted at several places in "A Call to Civil Society", children don't get enough attention from their parents, and parental investment in their children and parenting skills are in decline.

Furstenberg (1999) argues that the most dramatic changes in the American family are the disconnection between sexuality and marriage, cohabitation, and less enduring marriage. These changes have affected parental practices. How to balance the demands of family life and work has become a challenge for parents. According to the report of the international adolescent health survey, the Health Behaviors in School-Aged Children (HBSC) Study, that investigated 11, 13, and 15 year old children's experiences concerning health behaviors and lifestyle issues in 26 European countries and regions, Canada, and the United States coordinated by the World Health Organization (WHO), only 64 percent of U.S. students reported living with both parents. This proportion is lower than for all other countries except Greenland (NIH and NICHD, 2000).

Child development can result from both parenting processes and the parental structure (Furstenberg, 1999). The former refers to parenting styles and parental behaviors such as warmth, control, and autonomy, while the later refers to who resides with the child and who are the primary caregivers. One question to be asked is: how to make a family function to serve the best interests of children. A single parent can be aided by his/her own parents, relatives, or friends in raising the child. It needs further investigation if the presence of support from relatives promotes parenting skills, or compensates for the absence of the biological father or mother.

The increase in one-parent families and the quantitative decline in relationships with relatives outside the households lead to fewer social ties that can decrease the availability of social capital for children in the contemporary American society (DeFrain and Olson, 1999; McLanahan and Sandefur, 1994). Another striking fact is the increasing number of families with mothers in the labor force (DeFrain and Olson, 1999; Furstenberg, 1999). Mother's labor force participation increases family income, but decreases the time spending with children that can lead to negative effects on parent-child relationship and child cognitive development (Carlin, 1999; Haveman and Wolfe, 1995). However, maternal working has been linked to the reduction of social capital for children and its negative effects on child development (Coleman, 1988a, 1988b, 1990).

Parents have long been seen as the primary social agents to bring and secure resources for their children in the process of socialization. Recently, research has supported that maternal intellectual ability and parental time allocation contribute to family capital beneficial in facilitating children's cognitive and socio-emotional development (Parcel and Menaghan, 1993, 1994). Greater social capital has also been

associated with lower high school dropout (Furstenberg and Hughes, 1995; Smith et al., 1992; Teachman et al., 1996), and with greater college enrollment (Furstenberg and Hughes, 1995). Parental support can compensate for the loss of community bonds for positive child outcomes (Gold, 1995; Hagan et al., 1996). Obtaining greater social capital in facilitating positive child outcomes appears to be the major task for parents. Such a task makes the role of parenting challenging.

The concept of social capital has been used across different disciplines such as economics, education, health and well-being, political science, and sociology in order to understanding various aspects of human lives from the institutional level to the individual level (Portes & Landolt, 1996; Woolcock, 1998). However, recently, this concept has been extended to apply to the organizational level rather than just to the individual level (Portes & Landolt, 1996). Besides, the concept of social capital is treated in various ways. The decomposition of social capital into the three elements is usually ignored (Portes, 1998). According to Portes (1998), the three elements of social capital are the sources of social capital, the possessors of social capital (those making claims), and the resources of social capital. There are four different sources of social capital including reciprocity exchange, enforceable trust, value introjection, and bounded solidarity (Portes and Sensenbrenner, 1993; Portes, 1998). Portes' decomposition of social capital is applied to establish the theoretical framework and to guide data analysis of this current study.

Due to the limitation on data sources, this current study is not able to cover all sources of social capital; therefore, reciprocity exchange of social support is the major focus rather than other sources. Related literature on social support and reciprocity is integrated for further understanding the mechanism of reciprocity exchange under the

broad social capital framework. Parents here are treated as the persons who make claims of social capital for their children. This study will examine the pattern of support reciprocity between parents (or primary caregivers) and people living outside the household including instrumental and emotional support, as well as how support reciprocity relates to parental behaviors.

Research has primarily focused on the positive side of social support to parents who are constrained by childrearing responsibilities. The possible downsides of social capital need to be considered (Light and Gold, 2000; Portes and Landolt, 1996; Waldinger, 1995). The downsides refer to the limitations and costs of social capital. Social support system can both facilitate and constrain the actors. Social relations may lead to unexpected stress for either support recipients or support providers in the process of support exchange. In this study, the effects of support reciprocity are examined in both the general and the specific perspectives. The general perspective investigates the global effects of support reciprocity on parental behaviors, while the specific perspective looks into the effects of support reciprocity based on the type of social ties (e.g. own parents, siblings, and friends).

The unit of analysis is based on the individual child. Corresponding to the individual child, the primary caregiver of the child at home (most of them are mothers) is the main focus. A child's primary caregiver at home (mostly the child's mother) is treated as a social agent who claims or secures resources of social capital for the child. However, other related issues not mentioned above (e.g. solidity within the family, trust between a parent and people outside the household) are beyond the scope of the dissertation.

Research has not systematically examined the relationships among social capital, financial capital, and human capital, parental behaviors, and children's socio-emotional development. Some research focused on the effects of parental work characteristics or parental investment on children's outcomes, but neglected parental behaviors (e.g. Parcel and Menaghan, 1993, 1994), while some emphasized the impact of parental behaviors on the children's psychological development without consideration of other broader family factors (Coopersmith, 1967). This current study attempts to examine the impact of social capital and other forms of family capital on parental behaviors that contribute to children's self-esteem.

The focus on children's self-esteem is based on three theoretical and empirical considerations. First, global self-esteem is viewed as a critical indicator of psychological well-being (Rosenberg, Schooler, Schoenbach, and Rosenberg, 1995).

Second, self-esteem is found to correlate positively with social support from parents and peers through different developmental spans (Newcomb and Keefe, 1997), and, more important, can increase later social support (Newcomb, 1990). According to Newcomb and Keefe's 12-year longitudinal study on self-esteem and social support with a sample of 7th, 8th, and 9th grade students (Newcomb and Keefe, 1997), social support consistently predicts later self-esteem over a 12-year period at 4-year intervals, but not as good as predicts earlier self-esteem. Conversely, self-esteem has positive effects on later social support and the quality of later relationships (Newcomb, 1990). Critically, neither the impact from social support to self-esteem nor that from self-esteem to social support is empirically significant at the same interval. The relationship between social support and self-esteem need further investigation. According to the "looking glass" theory (Cooley,

1902; Mead 1934), individuals define themselves by internalizing evaluative judgements of others through social interactions. During childhood, the degree to which a child feels accepted and supported by the parents leads to positive feelings about the self and certain personal characteristics. Then, the certain personal characteristics (e.g. self-esteem) help shape the nature of one's social support system in their future life.

Finally, self-esteem appears to have the characteristic of lower stability than other personality traits such as social conformity and gregariousness, even though self-esteem has substantial stability over time in general (Newcomb and Keefe, 1997). Social conformity refers to individual's attitudes toward society and traditional values, while gregariousness refers to individual's interaction style toward other people and the world. The lower stability of self-esteem can be a reflection of self-feelings toward perceived judgement of others that invokes in the self (Hertzog and Nesselroade, 1987; Newcomb and Keefe, 1997). During the period of development in childhood, it is believed to be of great importance for the development of a positive sense toward self. Since self-esteem has more room for change compared to other personality traits; therefore, it is necessary to understand what factors, in what context contribute more to self-esteem among children.

Several variables are found to be critically related to child development, for example, the family financial condition (Mayhew and Lempers, 1998), the relationship between parents and children (Putallaz and Heflin, 1990), the impact of family support on a child's friendship quality (Franco and Levitt, 1998), and the structure of the family (Parcel and Menaghan, 1993, 1994). Since the family plays the crucial role in the process of child development, psychologically and intellectually; thus, the focus of this study lies

primarily on the family context. The complex issues surrounding the development and maintenance of a child's self-esteem demands more research in this area (Shelton, 1990).

2. Purpose of the Dissertation

Existing research evidence is still ambiguous to explain which variables (e.g. parental behaviors, family support, family financial condition, or other familial factors) are more powerful in predicting children's self-esteem. This study aims to refine the neglected details between the theoretical explanations and the past empirical findings regarding different forms of capital surrounding a family, and how the different forms of capital are transformed to shape children's self-esteem. Specifically, this study investigates parental social capital, financial capital, human capital, parental behaviors, and children's self-esteem. Parental behaviors are treated as a mediator between these different forms of capital and children's self-esteem, because parents are viewed as the social agents who transform or make claims of resources for their children. This research attempts to solve three questions including:

- 1. Which form(s) of capital has/have the more effects on parental behaviors? Social capital? Human capital? Or, financial capital?
- 2. Can any form of capital be substituted by other forms of capital in terms of shaping parental behaviors?
- 3. What parental behaviors lead to higher self-esteem for children?

3. Literature Review

3.1 Support Reciprocity

Current literature on social capital emphasizes that "reciprocity exchange" is a key variable of facilitating individual actions for generating social capital (Coleman, 1988a, 1990; Fernandez-Kelly, 1995; Portes & Sensenbrenner, 1993). Reciprocal relations can increase solidarity and trust within relationships (Pearlin et al., 1981). The notion of reciprocity is one important focus on social support (Antonucci, 1985; Lu, 1997). Individuals whose network is non-reciprocal are likely to perceive their network as not adequate and to report less positive outcomes such as psychological well-being, self-esteem, life satisfaction, and happiness. In general, reciprocity between providers and recipients is more likely to lead to positive and longer relationships, while asymmetrical relationships are more likely to elicit anger and resentment (Antonucci, 1985). In addition to being an important focus on social support, reciprocity is a key element that effects the production of resources during the process of social capital transaction for individuals or groups (Coleman, 1988a, 1990; Portes, 1998; Portes & Sensenbrenner, 1993).

Social support most commonly refers to helpful functions accessible to an individual through social ties or from significant others such as family members, friends, relatives, and co-workers (Lin et al., 1979; Thoits, 1985). The functions of support typically include emotional aid and instrumental aid. Emotional aid usually refers to assertions or demonstrations of love, caring, esteem, value, and group belonging (Cobb, 1976; House, 1981; Kaplan et al., 1977). Instrumental aid refers to actions or materials provided by others that enable the fulfillment of ordinary responsibilities, such as household, childcare, financial, and job-related obligations (House, 1981).

According to Pearlin and his colleagues (1981), the qualities of support are especially critical when they "involve the exchange of intimate communications and the presence of solidarity and trust" (Pearlin et al., 1981, p.340). Particularly, emotional support from significant others or primary others appears to be the most powerful predictor of reduced psychological distress regardless of the presence of stressful circumstances (Cohen & McKay, 1984; Heller, 1979; House, 1981; Thoits, 1985; Turner, 1983). The emotional function of social support appears to be the key aspect of social support related studies. Social support from our social networks can buffer stress, and improve well-being in adulthood as well as in childhood and adolescence, maybe even more than in later life (Heller et al., 1986). Such effects will foster self-esteem, feelings of security and control over oneself and the environment, and in this way will help to protect and promote well-being (Nestmann and Hurrelmann, 1994).

Social support can also function as a stress buffer for mothers with irritable infants (Crodkenberg and McCluskey, 1986). Those mothers who have more social support and who have less frequent negative interactions with significant others provide positively warm and sensitive care to their children (Cotterell, 1986; Crnic et al., 1983; Pascoe et al., 1981; Weinraub & Wolf, 1983; Zarling, Hirsch & Landry, 1988).

Social support is important in parenting for several reasons. First, the less social support can lead to the more frequently negative parental behavior. Research finding indicates that adolescent mothers who reported less support are found to use restriction and punishment more often (Garcia-Coll et al., 1986). Second, social support reduces the negative effects of stress on the parenting behavior of mothers (Kurtz and Derevensky, 1994; Rhodes and Woods, 1995), and eases the stress of parenting by enabling a mother

to share her frustrations, which may, in turn, enable her to be more sensitive with her children (Cochran and Brassard, 1979).

It has been suggested that there is a down side to giving support as well as to receiving support (Bierhoff, 1994; Lu, 1997; Lu & Argyle, 1992; Rook, 1992). In other words, social support might have not only positive but also negative consequences for the support recipients and providers. Both giving and seeking support require special skills, and sometimes the process of exchange can be risky (Goldsmith & Parks, 1990).

According to social exchange theory, social interaction can result in both rewards and costs (Rook, 1984). Within the social support related studies, research evidence indicates social support may not only fail to buffer the stress of illness, but may add to distress (Wortman, 1984; Barbee, Derlega, Sherburne, and Grimshaw, 1998). Many supportive behaviors that are meant to be helpful may turn out to be harmful. For example, child care assistance offered by others often increases the feelings of inadequacy because the parent perceives his/her incompetence to perform everyday tasks (Peters-Golden, 1982).

Research findings increasingly suggest that receiving support conflicts with the idea of self-management, leads to negative reactions from others (Coates, Wortman, & Abbey, 1979; Miller & Steinberg, 1975), damages self-esteem (Williams & Williams, 1983), evokes feelings of helplessness (McLeroy, DeVellis, DeVellis, Kaplan, & Toole, 1984), and relates to symptoms of anxiety, feelings of dependence and guilt (Lu and Argyle, 1992), and dissatisfaction of a recipient's needs (Tracey, Revenson, Schiafino, Majerovitz, & Gibofsky, 1991). Problems of giving support may involve feelings of being burdened and frustrated (Lu and Argyle, 1992), fear of possible interpersonal conflicts (Chesler & Barbarin, 1984; Wortman & Lehman, 1985), personal distress

(Wortman & Dunkel-Schetter, 1979), and feelings of inadequacy and incompetence (Wortman & Lehman, 1985).

Although the mainstream social support research has been largely toward studying the beneficial effects on well-being, the recognition of the potential harmful effects of social support need to be considered (La Gaipa, 1990; Lu, 1997).

In addition, the reciprocal relationship between a provider and a recipient is critical in the effects of social support on an individual. Norms of reciprocity can change depending upon the level of intimacy between the two parties. Reciprocity with spouse relates to higher levels of happiness, while reciprocity with friends relates to higher level of life satisfaction (see Antonucci, 1985). Growing evidence shows that more intimate support networks increase the vulnerability to the detrimental effects of such stress rather than buffering the negative effects of life stress (Kessler & McLeod, 1984). In sum, positive and negative effects of social support, and the reciprocal relationships between support providers and recipients among parents will be examined.

3.2 Social Capital

The concept of social capital has been broadly used across disciplines in the last decade. However, the wide use of this concept has led to great variations on its definition from one scholar to another. This current study applies Alejandro Portes' conceptualization of social capital (1998). His concept is gradually receiving consensus in the literature on social capital.

Portes' conceptualization on social capital is embedded in the proposition that collective expectations affect individual economic behavior (Portes and Sensenbrenner, 1993). For Portes (1998), social capital per se is neither a source nor a resource, but rather a mediator between the sources and the functions (or resources). The concept of social capital is systematically treated by distinguishing it into three elements: (1) the sources of social capital (those agreeing to these demands); (2) the possessors of social capital (those making claims); and (3) the resources themselves. The distinction between these elements and the ability to obtain them by virtue of membership in different social structures are explicitly made. Portes argues that social capital is defined as the "expectations for action within a collectivity that affect the economic goals and goalseeking behavior of its members, even if these expectations are not oriented toward the economic sphere" (Portes and Sensenbrenner, 1993), and "the ability of actors to secure benefits by virtue of membership in social networks or other social structures" (Portes, 1998). In sum, expectations for action and the ability of actors are the critical factors to facilitate actions for securing or claiming benefits. This is, however, consistent with Coleman's emphasis that social capital as a variety of entities facilitates actions within social structure (1988a). One may not be beneficial from any resource, if the resource has not been claimed or transformed into the form that is needed or appropriate to be used.

There are four different sources of social capital including value introjection, bounded solidarity, reciprocity exchange, and enforceable trust (Portes and Sensenbrenner, 1993; Portes, 1998). The former two sources are instrumental, while the later two are consummatory (see Table 1).

Table 1. Gains and Losses Mediated by Social Capital (modified from Portes, 1998)

Sources	Mediator	Resources (or Functions)
Instrumental Reciprocity exchange Enforceable trust	Ability to secure benefits through membership in networks and other social structures, and expectations for action	Positive effects:
ConsummatoryValue IntrojectionBounded solidarity	within a collectivity that affect the economic goals and goal-seeking behavior of its members	Negative effects: Restricted access to opportunities Restrictions on individual freedom Excessive claims on group members Downward leveling norms

Reciprocity exchange refers to norms of giving and receiving favors, information, approval, and other valued items. The giver's returns are not necessarily directly from the individual recipient, but can be from the collectivity as whole in the form of honor or approval. Enforceable trust is built through effective collective sanctions and rewards to monitor the behaviors of group members. Value introjection stresses socialization into consensually established beliefs and urges individuals to behave based on the group's guiding values rather than pursuing self-interest. Bounded solidarity refers to the mechanism that appropriates the altruistic dispositions of actors. The sense of solidarity is generated by a common fate or the common adversity of confrontation with the community. Literature on social capital has strongly emphasized the positive consequences, but neglected the negative side. Dense social ties can provide more access to resources, but bring greater social control and restrict individual freedom. The equal attention for both positive and negative effects should be noticed in theory and research.

Due to the limitations on data sources, this study will not cover all sources of social capital; therefore, reciprocity exchange of social support is the main focus rather than other sources. The reciprocal relationships between a parent and people outside the household will be examined, but not the reciprocal relationship between parents and children. Parents here are treated as the persons who make claims of social capital for their children.

In addition to Portes, Pierre Bourdieu (1979, 1980, 1985) and James S. Coleman (1988a, 1988b, 1990) are important contributors to the conceptualization of social capital. Pierre Bourdieu is the one who produces the first systematic contemporary analysis of social capital (Portes, 1998). Bourdieu regards social capital as "the aggregate of the actual or potential resources which are linked to possession of a durable network of more or less institutionalized relationships of mutual acquaintance or recognition" (Bourdieu 1985, p. 248; 1980). Bourdieu's statement clearly decomposes social capital into two elements: (1) the social relationship itself that individuals use to claim access to resources, and (2) the quantity and quality of the resources. The treatment of this concept tends to be instrumental, and emphasizes the benefits accruing to individuals by participation in-groups and on the construction of sociability for the purpose of creating resources. Instead of being a natural given resource, social networks are constructed through investment strategies and become usable as a reliable source of other benefits. Through social capital, actors can gain direct access to economic resources such as subsidized loans, investment tips, and protected markets. Throughout, Bourdieu's emphasis is on the ultimate reduction of all forms of capital to economic capital (Bourdieu, 1979, 1980, 1985; also see Portes, 1998).

Coleman conceptualizes social capital as "a variety of entities with two elements in common: They all consist of some aspect of social structures, and they facilitate certain action of actors--whether persons or corporate actors--within the structure" (Coleman 1988a, p. S98; also see Coleman, 1990, p. 302). This definition is based on the function of social capital (Coleman, 1988a, 1990). For Coleman, reciprocity expectations and group enforcement of norms are the mechanisms used to generate social capital. Social organization provides the context for both sources and effects to materialize. Privileged access to information is as the consequence of its possession. Coleman stresses that social capital plays the key role in the creation of human capital. He not only sheds the light on the importance of social capital for the acquisition of human capital and the creation of human capital for the next generations, but also identifies some of the mechanisms through which it is generated. Coleman's concept has been applied by various empirical research, and a great number of these studies focus particularly on family and child development (e.g. Hofferth, Boisjoly, & Duncan, 1999; Parcel and Menaghan, 1993, 1994; Zhou and Bankston, 1998).

Portes criticizes that Coleman's definition is too ambiguous and opens the way for relabeling some contradictory processes as social capital (Portes, 1998). Although Bourdieu like Coleman has emphasized social capital as a resource that is generated through social ties and can facilitate certain actions for actors (Bourdieu, 1980, 1985; Coleman, 1988a, 1990), Coleman makes the fallacy of equating social capital with the resources acquired through it. The distinction of social capital from its resources is made explicit in Bourdieu, but ambiguous in Coleman.

After Bourdieu and Coleman, Baker (1990) defined social capital as "a resource that actors derive from specific social structures and then use to pursue their interests; it is created by changes in the relationship among actors" (p. 619). Baker's concept is very close to Bourdieu's, but he treats social capital as a resource like Coleman. Schiff's definition (1992) is "the set of elements of the social structure that affects relations among people and are inputs or arguments of the production and/or utility function" (p.161). This definition is broader than others are. Burt (1992) sees social capital as "friends, colleagues, and more general contacts through whom you receive opportunities to use your financial and human capital" (p.9). Burt emphasizes the relative absence of ties, labeled "structural holes," that facilitates social mobility of individuals, because weaker ties are seen as sources of seeking new knowledge and new resources. This is completely opposite to Coleman's emphasis on dense networks as a necessary condition for the generation of social capital. Hofferth and her colleagues (1999) follow Coleman's essay and conceptualize social capital as an important potential resource emerging from social relationships. "Social capital posits that social relationships form a resource that individuals can draw upon in their personal and professional lives" (Hofferth et al., 1999, p.79).

In short, Portes' conceptualization on social capital is the only one that makes a clear and systematic differentiation to the key elements of social capital into three categories. Although his concept is gradually receiving consensus in the literature on social capital, the empirical application on social capital following his conceptualization has not been made. This study applies Portes' concept for providing advanced and systematic analysis on the construct of social capital.

3.3 Different Forms of Capital in the Family Context

According to Coleman (1988a, 1990), there are three major resources of capital in the family context: (1) social capital, (2) human capital, and (3) financial capital. Social capital is different from the other two forms of capital including human capital and financial capital. Forms of capital can be transformed into one another through various institutional mechanisms (Bourdieu, 1985; Fernandez-Kelly, 1995; Portes, 1998). Social capital here refers to the "expectations for action within a collectivity that affect the economic goals and goal-seeking behavior of its members, even if these expectations are not oriented toward the economic sphere" (Portes and Sensenbrenner, 1993), and "the ability of actors to secure benefits by virtue of membership in social networks or other social structures" (Portes, 1998). Human capital refers to parent's education and related cognitive skills that assist learning for children (Coleman, 1988a). Financial capital refers to family income or other financial resources used for the household and the child (Coleman, 1988a). All three forms of capital can be productive to make possible certain actions or achievements.

The effect of social capital on the creation of human capital in the next generation has been emphasized (Coleman, 1988a). Family factors are considered to account for more variance in the socialization process for most children than school or community factors (Hofferth et al., 1997). Families provide the context in which most children grow up, and learn social values, knowledge as well as skills to develop connections to other people from different aspects of social structure in later life. A child's psychological and intellectual development can be regarded as the by-product of social capital and other

forms of family capital in a child's socialization process (Coleman, 1988a). The role of social capital in resource transactions is critical for understanding the role of parents in the creation of human capital for their children.

Social ties not only consist of the interpersonal connection within the family, but also include those that the family establishes with people outside the immediate family members. A family rich in connectedness can be beneficial to parents as well as to children. However, the wide range of social connections and strong bonds between parents and children need time and effort that demand the physical presence of parents, their attention, and involvement. For the purpose of building a stock of resources that the family can call upon when needed, such investment in these connections is necessary (Hofferth et al., 1997; Hofferth et al., 1998; Hofferth et al., 1999). Coleman (1988a) argues that the parental human capital can contribute to the child's development, only when parents are an important part of child's life. In other words, the absence of parents is seen as the lack of investment in the parent-child connectedness. Even when the parents are rich in their own human capital, children can gain little support from their parents in the process of cognitive development due to the frequent absence of their parents. Thus, in this condition the child's growth can be irrelevant to the parent's human capital (Coleman, 1988a, 1990).

Social support has been identified as a crucial determinant of parenting practices (Belsky, 1990; Cochran & Brassard, 1979; Cotterell, 1986; Pascoe et al., 1981; Simons, Beaman, Conger & Chao, 1993; Weinraub & Wolf, 1983; Zarling, Hirsch & Landry, 1988). In the past, social capital in families are often the focus, but it is also important to consider social relationships that are embedded in the larger community through which

parents can mobilize their resources that facilitate children's development (Lin, 1990; Wong, 1998). Other factors including family income, family financial strain, parental education, socioeconomic status, and maternal unemployment are considered to be critically associated with parenting (Brenner & Fox, 1999; Shumow, Vandell & Posner, 1998). Research findings indicate that maternal education and financial resources contribute to the higher degree of parental warmth and firm control (Brody et al., 1995; Elder, Eccles, Ardelt, & Lord, 1995). In contrast, greater parental harshness can be the result of lower family income (Conger et al., 1990; Mirowsky & Ross, 1986), family financial stress (Takeuchi, Williams & Adair, 1991), lower parental education (Dornbusch et al., 1987; Kelley, Sanchez-Hucles, & Walker, 1993; Raikkonen & Keltikangas-Jarvinen, 1992), and maternal unemployment (McLoyd, Jayaratne, Ceballo, & Borquez, 1994). In other words, the level of financial capital and human capital is associated with parenting practices.

Research findings have shown that financial problems are less psychologically central to children than to adults, because family financial hardship is an ascribed status rather than achievement status for children (Demo & Savin-Williams, 1983; Whitbeck et al., 1991). Consequently, financial capital is treated as a predictor of parental behaviors rather that of children's self-esteem.

3.4 Parental Behaviors

This section specifically focuses on parental behavior related literature. In an early study (Coopersmith, 1967: *Antecedents of Self-Esteem*), Coopersmith (1967) has pointed

out the significance of parental behaviors in shaping children's self-esteem. Parental reinforcement and the rewards of imitating parental behaviors presumably play important parts in shaping children's actual characteristics and behaviors.

Two general dimensions of parental behaviors, support and control, have been identified by numerous studies and reviews to predict child psychological and intellectual development since the 1940s (Peterson and Hann, 1999). The dimension of parental support has been labeled as warmth, verbal affection, physical affection, nurturance, acceptance and general support (Becker, 1964; Rohner, 1986; Rollins & Thomas, 1979; Schaefer, 1959; Siegelman, 1965; Stafford & Bayer, 1993). According to Harter (1998). support in the form of acceptance and approval from parents is a significant source of self-evaluation for young children. Empirical evidence suggests that parents provide emotional security, and serve as models of interactive behaviors for their children (Parke & Buriel, 1998; Putallaz & Heflin, 1990). In addition, support from close family members has been related to higher self-esteem for children and adolescents (Franco and Levitt, 1998; Harter, 1998; Levitt et al., 1993; van Aken & Asendorpf, 1997; Wolchik, Beals & Sandler, 1989). The protection of self-esteem is regarded as a primary function of social support across the life span (Antonucci, 1990; Franco and Levitt, 1998; Sandler, Miller, Short, and Wolchik, 1989).

The dimension of parental control has been conceptualized as actions used by parents to modify the behaviors and internal states of children (Peterson & Rollins, 1987). Firm control and excessive control are the two most frequently identified types of parental control. Induction and monitoring (or behavior control) are the two frequently

identified forms of firm control; while *psychological overcontrol* and *punitiveness* are the two forms of excessive control (Peterson and Hann, 1999).

Induction is a behavior which emphasizes the psychological form used by parents to explain positive and negative consequences of a child's actions for both the child and others (Hoffman, 1994; Maccoby & Martin, 1983; Rollins & Thomas, 1979). In this form of firm control, parents do not impose arbitrary authority on children. Consequently, children have opportunities to engage in two-way communication and express different viewpoints with their parents (Peterson & Rollins, 1987). Induction is seen as a means of fostering internalization and voluntary commitment to social expectations from parents and the society (Peterson and Hann, 1999).

Monitoring (or behavioral control), the other form of firm control, refers to parental attempts or supervising behaviors to manage their children's schedules, activities, physical whereabouts, and peer associations (Barber et al., 1994; Patterson and Capaldi, 1991). Much of the research on parental monitoring has focused on the association of insufficient supervision with higher frequencies of antisocial, delinquent, and other problem behaviors (Barber et al., 1994).

Psychological overcontrol, one form of excessive control, refers to behaviors with intrusive or arbitrary qualities used by parents to manipulate children's emotional experiences. Love withdrawal is the frequently used techniques of psychological overcontrol (Maccoby & Martin, 1983; Rollins & Thomas, 1979; Stafford & Bayer, 1993). Love withdrawal techniques such as turning one's back and refusing to speak to the young are often used as punishment to manipulate children's fears, keep children

responsive to parental perspectives, and discourage children to deviate from parental expectations (Maccoby & Martin, 1983).

Punitiveness, the other form of excessive control, refers to punitive or coercive behaviors used by parents including either verbal or physical attempts to control children without the rational explanations (Peterson et al., 1985; Peterson and Hann, 1999). More severe forms of punitiveness can be characterized as violence between parents children. Parental punitiveness constrains the development of self-esteem, and the application of arbitrary force often cause hostility and resistance from children to their parents (Rollins & Thomas, 1979; Turner & Finkelhor, 1996).

Parental behaviors of firm control such as induction are more likely to enhance children's self-esteem through the enforcement of clearly defined limits (Coopersmith, 1967; Openshaw & Thomas, 1986). In other words, induction increases self-esteem by the parent-child communication in which parental confidence matches children's abilities to understand and cope successfully with the social environment (Peterson & Rollins, 1987; Stafford & Bayer, 1993). The result is that clear, consistent, and legitimate parental control facilitates self-esteem by contributing to the internalization of values and expectations that, in turn, lead to greater confidence in a child's definition of the standards for expected outcome (Baumrind, 1978; Coopersmith, 1967; Felson & Reed, 1986; Higgins, 1991; Openshaw & Thomas, 1986; Peterson, Rollins & Thomas, 1985; Putallaz & Heflin, 1990).

The positive effects of parental firm control on children's self-esteem have been challenged (Grusec & Goodnow, 1994; Lepper, 1981; Lewis, 1981). Firm control may

apply excessive pressure on children and induce external compliance to parental authority, rather than encourage the children to internalize norms and become self responsible. The most noticeable advocate of firm control addressed by Baumrind (1971,1978) is that the "firm enforcement of rules, effective resistance to the child's coercive demands, and willingness to guide the child by regime and structured interventions" (1971, p. 87). Lewis (1981) reinterprets the measures of child compliance used in Baumrind's research (1971) as the result from the internal responsiveness of the children rather than from the firm control of parents. Consequently, Lewis (1981) argues that firm control may not be a necessary antecedent of self-esteem or social competence. She further suggests that two-way communication between parents and children, rather than the firm control used by authoritative parents, is the primary mechanism that fosters self-esteem and social competence in children. In this study, both firm control and excessive control of parental behaviors are included.

Research findings have consistently showed that low levels of parental warmth or high levels of harsh or punitive parental behaviors are related to the occurrence of problem behavior in children across demographically diverse groups of families (Berlin et al., 1995; Florsheim et al., 1996; Ge et al., 1996; Greenberger and Chen, 1996).

3.5 Self-Esteem in Child Development

The period of middle childhood is a significant time for exploring the connection of different types of social relations. Furthermore, this period corresponds to the time when various components of the child's self-concept come together to yield the general

affective sense of self-worth referred to as self-esteem (Franco and Levitt, 1998; Harter, 1983). According to Cooley's looking-glass self formulation (1902), self-esteem is socially constructed through the interaction between children and their parents or other significant others who are important in the children's lives. Thus, approval and disapproval from significant others becomes incorporated into one's own esteem for the self. Developmentally, the internalization of parental approval or disapproval is particularly crucial to the self-esteem formation of children (Harter, 1990, and 1993). In other words, the appraisal from significant others is a critical determinant of children's self-esteem. This is consistent with the concept of "reflected appraisals", an important principle of self-esteem formation, addressed by Rosenberg (1986).

Within this current research framework, self-esteem is conceptualized as "the level of global regard that one has for the self as a person" (Harter, 1993, p.88). This definition has much in common with Rosenberg's conception (1965, 1979, and 1986). Both deal with self-esteem as self-evaluation in which an individual makes and maintains with regard to self. Because of the limitations of the questions included in the survey, this definition emphasizes perception based self-esteem rather than efficacy based.

According to Rosenberg (1979), self-esteem is different from self-acceptance. An individual with high self-esteem has self-respect, feels worthy, recognizes personal limitations, and expects to experience personal growth and improvement over time. Conversely, an individual with low self-esteem exhibits self-dissatisfaction, lacks self-respect, and has a self-picture that is disagreeable. Block and Robins (1993) and Harter (1990) suggested that low self-esteem reflects a substantial deficit between the real self and the ideal self. In Cooley's conception of the looking-glass self, the discrepancy

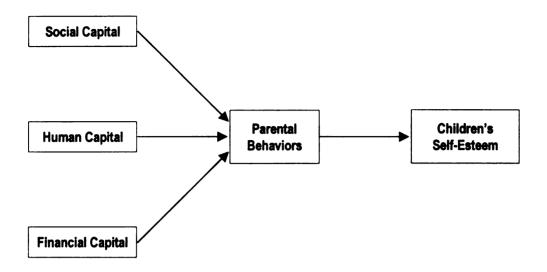
between one's imagination of other's perception and one's actual evaluations of self is a key factor that is usually ignored. However, imagined perceptions and actual perceptions do not always correspond to each other. Based on the examination of the empirical evidence for the looking-glass self in over 50 studies, Shrauger and Schoeneman (1979) find that one's evaluation to self is not always consistent with others' evaluations to the particular person, while one's evaluation to self can be substantially based on the imagination on how others evaluate him/her. The discrepancy between imagined perceptions and actual perceptions suggests that self-evaluation in the process of self-concept formation is active rather than passive (Gecas and Schwalbe, 1983). The active form of the "looking-glass self" is usually neglected.

A similar idea is also argued by Rosenberg (1979). That is the selective activity of the self within the process of reflected appraisals, as well as within other processes of self-esteem formation. Under some of the conditions, individuals will even select certain people as significant others. Most of this selectivity occurs in the service of self-esteem maintenance or enhancement. For Rosenberg (1979) and Cooley (1902), the self is an active agent in the process of reflected appraisals. Consequently, the concern here is whether or not the active form of self-evaluation in the self-esteem formation starts in childhood; if the early start of active self-evaluation gives more challenges to parents as social agents in the child's socialization process. This study includes several crucial parental behaviors and characteristics, and examines the impacts of these variables on children's self-esteem.

4. Research Hypotheses

According to the discussion in literature review, social capital, family financial capital, and parental human capital have been identified as critical determinants of parenting practices. Hence, social capital, family financial capital, and parental human capital are the three predictors of parental behaviors. Then, parental behaviors are the predictors of children's self-esteem. Parental behaviors consist of parental warmth, parental monitoring, and other specific behaviors such as praising, showing physical affection, telling others positive things about the child, sending children to their room, taking away TV or other privileges, taking away an allowance, spanking, and grounding. The research hypotheses are formulated with the attempts to answer the research questions mentioned previously what types of capital (e.g. social capital, human capital, and financial capital) have the more impact on parental behaviors and what types of parental behaviors lead to higher self-esteem for children. Based on the theoretical and empirical literature review above, the theoretical model is illustrated as the follows.

Figure 1. Theoretical Model of Social Capital, Parental Behaviors, and Children's Self-Esteem



4.1 Reciprocity of Social Support and Parental Behaviors

This study applies Portes' decomposition of social capital into the three elements that are: (1) the sources of social capital (those agreeing to these demands); (2) the possessors of social capital (those making claims); and (3) the resources themselves. Regarding the sources of social capital, reciprocity exchange of social support is the major focus rather than other sources due to the limitations on data sources. Reciprocity exchange of social support in this study refers to the reciprocal relationship of giving and receiving favors (e.g. childcare), information, emotional support, and other valued items between parents (or primary caregivers) and people living outside the household.

For the possessors of social capital (those making claims), parents here are treated as the persons who make claims of social capital for their children. According to Portes' definition of social capital (Portes and Sensenbrenner, 1993; Portes, 1998), expectations

for action and the ability of actors are the critical factors to facilitate actions for securing or claiming benefits. Children can be beneficial from resources that are claimed or transformed by their parents.

The resources in this study refer to parental behaviors that can be supportive or obstructive to children. In short, the research framework includes four various levels of social contexts. The first is resources from outside of the family; that is social support from people outside of the household. The second is resources inside the family including parental human capital and family income. The third is parents, precisely parental behaviors. The fourth level focuses on children, in particular children's self-esteem. Parents in this case play the key role to transform and claim the resources to increase the well-being for their children.

According to the perspectives of social support and social capital, reciprocity is regarded as an important factor that influences the exchange of social support or other resources for individuals (Antonucci, 1985; Coleman, 1988a; Portes, 1998; Portes & Sensenbrenner, 1993). Non-reciprocal network is perceived as inadequate and less positive in terms of life satisfaction and happiness. Reciprocity between providers and recipients is more likely to lead to positive and longer relationships (Antonucci, 1985), that may buffer each other's stress for a long term.

The receiving of emotional or instrumental social support is supposed to relieve the stress of parenting, while the providing of social support can increase one's sense of self-management and prolong the support relationship that also decrease the hardship of being a parent. Those mothers who have less frequent negative interactions with significant

others provide positively affectionate and sensitive care to their children (Cotterell, 1986; Crnic et al., 1983; Pascoe et al., 1981; Weinraub & Wolf, 1983; Zarling, Hirsch & Landry, 1988).

Therefore, the reciprocal support exchange can be a critical process in which parents learn various ways to interact with others supportively; then, the new experience can lead to more supportive parental behaviors. Support reciprocity between parents and parents' social ties (e.g. grandmother/grandfather, friends, co-workers) results in warm and supportive parental behaviors. The first hypothesis is formulated as:

Support reciprocity between parents and people outside the household (e.g. own mother/father, grandmother/grandfather, friends, siblings, and co-workers) predicts supportive parental behaviors such as the higher degrees of parental warmth, parental monitoring, telling others positive things about the child, and praising, and showing physical affections.

4.2 Financial Capital and Parental Behaviors

Family income and family financial strain, as two indicators of financial capital, have been identified as determinants of parental behaviors to be supportive or harsh (Shumow, Vandell & Posner, 1998; Takeuchi, Williams, & Adair, 1991). Research findings indicate that greater parental harshness relates to lower family income and higher financial strain (Conger et al., 1990). In other words, the less family financial

strain and the higher family income parents have, the more likely the parents provide supportive parental behaviors to their children. Specifically, the hypotheses are:

The less family financial strain, the more likely parents have supportive parental behaviors such as the higher degrees of parental warmth, parental monitoring, telling others positive things about the child, praising, and showing physical affections.

The higher family income, the more likely parents have supportive parental behaviors such as the higher degrees of parental warmth, parental monitoring, telling others positive things about the child, praising, and showing physical affections.

4.3 Human Capital and Parental Behaviors

Parental education is considered to be a determinant of supportive parenting (Kelley, Power, & Wimbush, 1992; Shumow, Vandell & Posner, 1998). Research findings indicate that supportive, reasoning, and firm-control parenting is related to higher maternal education (Brody et al.,1995; Elder, Eccles, Ardelt, & Lord, 1995), while greater parental harshness relates to lower parental education (Dornbusch et al., 1987; Kelley, Sanchez-Hucles, & Walker, 1993; Raikkonen & Keltikangas-Jarvinen, 1992). In other words, the higher parental education leads to more supportive and reasoning parenting. Theoretically, the higher levels of parental education and parental self-esteem predict supportive parental behaviors. The hypothesis is formulated as:

The higher the parental education is, the more likely parents have supportive parental behaviors such as the higher degrees of parental warmth, parental monitoring, telling others positive things about the child, praising, and showing physical affections.

4.4 Parental Behaviors and Children's Self-Esteem

Parents have been seen as the primary social agents to bring and secure resources for their children and to create human capital in the next generation. Parental human capital has been considered highly related to children's cognitive and socio-emotional development (Parcel and Menaghan, 1993, 1994). Anyhow, parental human capital must be transformed by some forms of interaction to their children. Therefore, parental behaviors are treated as the primary contact between parents and their children in shaping children's self-esteem. A great deal of research findings support that the warm, clear, consistent, and legitimate parental control facilitates children's self-esteem by contributing to the internalization of values and expectations that, in turn, lead to greater confidence in children's definition of the standards for expected outcome (Baumrind, 1978; Coopersmith, 1967; Felson & Reed, 1986; Higgins, 1991; Openshaw & Thomas, 1986; Peterson, Rollins & Thomas, 1985; Putallaz & Heflin, 1990). Specifically, the hypothesis is formulated as:

The higher degree of supportive parental behaviors (including parental warmth, parental monitoring, telling others positive things about the child, praising, and showing physical affections), the higher children's self-esteem.

CHAPTER II METHOD

Following the introduction of research framework, literature review, and research hypotheses, this chapter focuses on data used for this study, the data collection procedure, the instruments used for collecting data, the sample, the measures used to observe research constructs, and some technical issues including data management (e.g. extracting the target subsample, and dealing with missing data, and variable reconstruction).

1. Data

The current study uses the data set collected by the Child Development Supplement (CDS) to the Panel Study Income Dynamics (PSID). The CDS data were collected by the University of Michigan Survey Research Center in 1997 with funding from the National Institute of Child Health and Human Development (NICHD). The CDS data were released to the public at the CDS project web site in May, 1999 (http://www.isr.umich.edu/src/child-development/home.html). The CDS is a separate project to the PSID rather than just a supplement study. It is for the first time since 1981 that the comprehensive national time-use information was collected from children of all ages in several settings. This data set provides information on social support, financial,

time, and social-psychological resources with measurement taken at the level of the family, neighborhood, and school for 0-12 year old children and related childcare givers.

The Panel Study of Income Dynamics (PSID) is a longitudinal survey and has collected data annually from a representative sample of U.S. men, women, children, and the families in which they reside since 1968. The data collected by the PSID include employment, income, wealth, housing, food expenditures, income transfers, marriage, and children from 5,000 families in 1968. The study has grown to include over 10,000 families currently. Core funding for the PSID is provided by the National Science Foundation. The information on children's development and experience as children has been limited to demographic characteristics (e.g. age and sex), and schooling. There are no direct assessments or reports of children's development and experiences as children. Consequently, it is vague on the childhood process whereby early experiences in various contexts like family, school, and neighborhood determine children's successes as young adults.

As Hofferth and her associates (1997) point out, it has been a major research focus on the consequences of family circumstances and events such as family structure and income for children's educational and economic successes as young adults by using the PSID data in recent years (Duncan, Brooks-Gunn & Klebanov, 1994; Duncan, Yeung, Brooks-Gunn, & Smith, 1998; Haveman & Wolfe, 1994; McLanahan & Sandefur, 1994).

The Child Development Supplement (CDS) rectifies this situation and collects additional information that is not contained in the main PSID. The CDS data include: (1) measurements of economic and demographic conditions at both the individual and the

family levels, as well as neighborhood and school characteristics at the time of the interview; (2) information from the primary caregiver instead of directly targeting on a child's mother or father in the household; (3) information on family processes such as parenting, and social relationships between parents, between parents and children, and between parents and non-family members; (4) age graded assessments of child cognitive, behavioral, and health from the children, the child caregivers, the teachers and child care providers; and (5) the learning environment in the home, teacher and administrator reports of school resources, and parent-reported measures of neighborhood resources.

The CDS data support the current study whereby a variety of variables critically related to child development are collected from both the primary caregiver and the child. It is a unique strength that the responses are from the primary caregiver in the household instead of simply asking either one of the parents to answer the questions. The primary caregiver is whoever spends most of the important time with the child. The influence from the primary caregiver to the child can be profound and critical during the process of child development. Although, for most pairs of the primary caregiver and the child in the sample, their relationship is mother-child in the same family, the key point is at least we know in most cases mothers still play the role of the primary caregivers.

In addition, there are several critical variables collected by the CDS. These variables consist of child cognitive and behavioral assessments, parenting behaviors, parental characteristics, social support from outside of the household, family structure, family income, and family financial strain. The richness of the CDS data facilitates the integration of social support and social capital theories into the areas of parenting and child development in the both individual and family levels in this current study.

Specifically, social support to the primary caregiver is measured from both sides of the recipient and the provider; consequently, the pattern of social exchange can be obtained for investigating the mechanism of resource transformation from parents to children. The measures of social support are adopted from the 1987-1988 National Survey of Families and Households (NSFH)(Sweet, Bumpass, and Call 1988). However, the focus of the NSFH is not on child development, therefore no data can be accessed to study the effects of parental social support on the parents and their children. The application of social capital theory is made possible by the usage of the CDS data. The CDS data are considered to be highly appropriate for this study.

The CDS study is planned to be longitudinal; however, currently only the first wave of data collections is released. Therefore, this current study is limited to focus only on cross-sectional analyses based on the first wave.

2. Data Collection and the Instruments

Data collection of the CDS began in January 1997 and was completed in November 1997. In 1997, the Core PSID Family Unit (FU) interview was first completed that determined the number and ages of children. If there was a child in the family unit between birth and age 12, the primary caregiver of each eligible child was contacted about the Child Development survey. For the family units containing more than two children age twelve and younger, the central office randomly selected two children and assigned time diary days, and determined a likely primary caregiver. If the primary caregiver is being interviewed about two children, a separate questionnaire for each child

was completed. The primary caregiver of each child was visited for the written permission to interview the children, obtained child assessments, and child interviews, as well as a primary caregiver interview and assessment, time use diaries and left self-administered instruments. In addition to the primary caregiver, the absent father who lived outside of the home, child caregivers, teachers, and administrators in day care or school were asked to answer different questionnaires (see Appendix A for more information in interview procedure).

There are 13 different questionnaires and booklets used for data collection. These questionnaires and booklets are listed in Table 2 (also see Appendix B for more details). For this study, only three sets of data are used. These three sets of data are collected by three instruments that are: (1) Primary Caregiver-Child Booklet, (2) Primary Caregiver-Household Booklet, and (3) Child Questionnaire. Originally, all data are saved independently in different files corresponding to the instruments used for data collection. In addition to the three data files mention above, the demographic file is included for the demographic information. The demographic data were collected during the PSID main panel data collection in 1997. This data set is comprised of one record for each child in the CDS sample. Therefore, respondents from the same household can be recognized by the family ID.

Table 2. Questionnaires and Booklets for Data Collection

- 1. Primary Caregiver Child Booklet *
- 2. Primary Caregiver Household Booklet *
- 3. Child Questionnaire *
- 4. Time Diary
- 5. Other Caregiver Child Booklet
- 6. Other Caregiver Household Booklet
- 7. Fathers Outside of the Home Child Booklet
- 8. Fathers Outside of the Home Household Booklet
- 9. Elementary/Middle School Teacher Booklet
- 10. Preschool/Daycare Teacher Booklet
- 11. Home-Based Care
- 12. Elementary/Middle School Administrator Booklet
- 13. Preschool/Daycare Administrator Booklet

Note: * means that data collected by the instrument are used in this dissertation.

Primary Caregiver - Child Booklet. The respondents of this booklet are the primary caregivers. The primary caregivers were asked to report information about each target child by face to face interview as a preferred mode and telephone interview as optional. The main information collected by this instrument consists of primary caregiver's literacy, children's health history, children's schooling, home environment, children's behavior, household tasks, parental involvement in school, parental monitoring of children's activities and friends, child care history, relationship with absent parent (if applicable), and food availability at home.

Primary Caregiver - Household Booklet. The respondents of this booklet are the primary caregivers. The primary caregivers were asked to report information about the target child's household and neighborhood. This booklet is administrated in a self-administered mode, and face to face or telephone interview as optional. Each primary caregiver completed only one household booklet regardless of the number of children whom the primary caregiver took care of in the sample. For the households where contained two primary caregivers, both were asked to complete this booklet. The main information collected by this instrument consists of characteristics of the family's neighborhood, social support for the mother/primary caregiver, the distribution of household tasks, attitudes on childrearing, parenting, attitudes on gender roles in the household, psychological well-being, family conflict, and work schedules.

Child Questionnaire. The respondents of this booklet are the children who were 3 - 12 years old. The mode of data collection was face to face interview only. Multiple assessments were administered to children of the appropriate ages. The main information collected by this instrument consists of children's reading and math ability, children's memory, self-esteem related to school subjects and to children's general lives.

3. Sample

The sample for this project was drawn from the 1997 PSID interviews. The PSID has collected data annually since 1968. As interviews were completed for the 1997 PSID, households with children who were Family Unit (FU) members under the age of 13 were

identified for inclusion in the CDS. Both the PSID core sample and the new PSID immigrant refresher sample generated Child Development cases. The stratified selection procedures were applied for sampling. The sample was originally divided into four strata based on the geographical distance from the interviewing staff. Households outside the continental US were excluded from interviewing and were coded as non-sample.

The actual number of households eligible for the Child Development Supplement from the PSID is 2,705. Among these 2,705 households, 2,458 are from the Core sample and 247 are from the New Immigrant sample. A total of 2,390 households with a total of 3,586 children are interviewed for the Child Development Supplement. The response rate is 88.2%. Of these 3,586 children identified by CDS, boys and girls are represented in approximately equal numbers. The race composition is that White children constitute 46.03% of the total child respondents; Black 40.98%; Hispanic 7.49%; Asian 1.76%; Native American 0.53%; other 2.99% (see Appendix C). The substantial number of black and other minority families of the PSID sample is the result of an initial oversampling of low-income families and the addition of a recent sample of immigrant families.

In order to extract the subsample of interests in this current study, a multi-step procedure of case selection is performed. The procedure of case selection is as follows:

Only children who answered the questions of self-esteem in the Child Questionnaire are included, and their ages range primarily from 8 to 12. The available child respondents are 1,088; each child respondent has a correspondent primary caregiver that

answered other sets of questionnaires. Both children and their primary caregivers are included for data analysis.

Among the 1088 children, 328 cases as 164 pairs of siblings who share the same primary caregiver within each pair of sibling. If all 328 cases are included for data analysis, the primary caregivers would be overrepresented due to the repeated use of the household data from the primary caregivers. For avoiding the overrepresentation of the primary caregivers who had two children in the sample, the older child from the same family is dropped. The choice of younger children is due the skewed distribution toward the older age among those children without another sibling answering the questionnaires. For other demographic variables including sex and race, these two groups (the younger and the older children from the same household) have almost the same distributions. After taking out the older children, the valid cases are 924 pairs of primary caregivers and children (see Table 3).

Table 3. Frequency Distribution of Age of Child by Number of Children Answering Questionnaires from the Same Household

Age of Child	One Child Answered	Two Children Answered		Total
_		Older	Younger	
6	1	0	0	1
7	13	0	10	23
8	137	3	55	195
9	141	15	46	202
10	166	39	31	236
11	131	47	16	194
12	171	60	6	237
Total	760	164	164	1088

For the purpose of obtaining primary caregiver's demographic variables (e.g. primary caregiver's education, age, sex, employment status), some cases are dropped. If the relationship between the primary caregiver and the child is mother-to-child or father-to-child, and the relationship between the head of household and the child is also mother-to-child or father-to-child, the pair of a primary caregiver and the child is included as valid cases in this study. Finally, only 875 pairs are included for the data analysis. This step relates to the process of variable reconstruction in the later section, and more details will be discussed.

For the 875 pairs of primary caregiver-child cases, there are around 256 missing cases for variables of the Financial Strain Scale and the social support related variables. It is a high proportion of missing data for these critical independent variables. They present two forms of capital. The 256 pairs of cases are dropped out of the analysis. These cases are with missing data for variables of the Financial Strain Scale and the social support related variables. Thus, after taking out the cases with missing data, the valid cases are

619 pairs of primary caregivers and children. The process of dealing with the missing data is discussed after the sections of "variable construction" and "measures".

4. Variable Reconstruction

The demographic variables of the primary caregiver are from the demographic file that is extracted from the PSID main panel data collection. The respondents to the PSID annual interviews are usually the male adult head of a household, or sometimes the wife or cohabitor of the head. This single household respondent provides information about every member in this family including him/herself. Unfortunately, the demographic variables of the primary caregiver are not immediately available after merging the data files together. Therefore, education, age, and sex of the primary caregiver need to be reconstructed to present the same construct as one single variable.

Four variables are used to identify the role of the primary caregiver in the household, and they are (1) the relationship of the primary caregiver to the child, (2) the relationship of the child to the head, (3) the sex of head, and (4) the household type. After determining the role of the primary caregivers as wives or heads, new demographic variables are created by retrieving data from corresponding variables. For example, the primary caregiver's education needs to be retrieved from either "head education" or "wife education". For those who are neither head nor wife, their education levels would be missing.

For the specific parental behaviors, the similar problem occurs. The same set of questions is used to ask two different groups of the primary caregivers whose children are

aged from 6 to 9 as one group, while the others are 10 and older as the other. The data for these two groups are saved into two sets of variables. Data for the same question are combined into one single variable to present each parental behavior.

5. Measures

According to the research theoretical framework of Figure 1 and hypotheses discussed above, the measures used for the target variables in this study are listed as follows.

5.1 Social Capital and Support Reciprocity (as the Independent Variable)

According to Portes' decomposition of social capital, social capital is operationalized into three levels of measures. The first level is "the sources of social capital" such as social support for parents. The second level is "the possessor of social capital" such as parents in a family. The third level is "the resources of social capital". Parental behaviors are used as the measures that indicate the level of resources children received from the primary caregivers.

For the second level, "the possessor of social capital" (who makes the claims), the focus follows the propositions that parents have long been seen as the primary social agents to bring and secure resources for their children in the process of socialization. The possessor of social capital who makes the claims is linked to the primary caregivers or the parents. The relationship between the child and the primary caregiver is used as the

measure. However, most of children's primary caregivers are mother, stepmother, or adoptive mother in this data set as mentioned previously. The details of the first and the third levels will be discussed in the following sections.

Support reciprocity between the primary caregiver (or the parent) and others is used as the first level of measures, the sources of social capital. The sources here focus on the parental social ties instead of the children's social ties. Parental social ties primarily focus on people outside the household who provide (or receive) social support to (or from) the primary caregivers. Two different types of social support are measured including emotional and instrumental support. Furthermore, the people who provided (or received) support to (or from) the primary caregiver were asked according to their social relationship. The information on the social ties between the primary caregiver and people outside the household is critical for identifying the pattern and range of the primary caregiver's network, and how different types of social support exchanged or invested.

The measures of support reciprocity are drawn from the National Survey of Families and Households and from the 1980 Panel Study of Income Dynamics (see Appendix D). This set of items measures receiving and provision of emotional and instrumental assistance from (or to) others who are not living with the respondent over the past month. The question asks if the primary caregiver received any help like child care, transportation, and repairs to your home or car in the past month. If the answer is positive, the respondents are asked about those who gave the help. Each respondent can mention up to five persons including former spouse or partner, own mother/father, mother/father-in-law, own grandmother/grandfather, spouse's grandmother/grandfather, sister/brother, aunt/uncle/ cousin, child's other parent, friend, counselor/minister/other

clergy, members of church or other organization, co-workers, grown child, and other. The same questions are asked about support provided by primary caregivers to people outside the household. Therefore, support reciprocity will be identified by using computer software programming to match respondent's answers on the support recipients and support providers.

Specifically, the matching between the support recipients and support providers is treated by three steps. The first step is to identify those who receive and those who provide help by what type of support. The second step is to mark respondents into two sets of four different categories. These two sets are divided by two types of support, emotional and instrumental support. The four categories are both receiving and providing, receiving only, providing only, and neither receiving nor providing. The third step focuses on those who both received and provided support from and to others. Each respondent who received and provided support answered questions about up to five relationships that helped most often in the past month. Support recipients and providers with the same relationship to the respondents will be matched. The matching is to see the pattern of relationships from support recipients and providers to respondents. The concern of the matching procedure is on what level of support reciprocity makes a difference on the primary caregiver's behaviors. Is it the simple reciprocal support regardless of the relationship from the recipients and providers to the respondents, or is it the level of reciprocity that must be fed back between the same relationship?

5.2 Parental Behaviors (as the Mediator)

Parental behaviors are used as the third level of measures on social capital, "the resources of social capital", that indicate resources children received from the primary caregivers. Parental Behaviors are measured by (1) parental warmth (see Appendix E); (2) parental monitoring (see Appendix E); (3) other specific parental behaviors: grounding, spanking, taking away privileges and allowance, sending the child to a room, telling positive things about the child to others, praising, and showing physical affection (see Appendix F).

Parental warmth includes 6 items, asking about how often in the past month the primary caregivers (1) hugged or showed physical affection to your child, (2) told your child that you love the child, (3) spent time with your child doing the child's favorite activities, (4) joked or played with your child, (5) talked with your child about things the child is interested in, and (6) expressed appreciation for something the child did.

Responses ranged from not in the past month (1) to every day (5). Each item will be scored from 1 to 5. The summary scores range 9 to 30. Higher scores indicate higher parental warmth. The reliability coefficient (Cronbach's Alpha) of the scale of parental warmth is .80.

Parental monitoring includes 8 items, asking about how things are going in general in the child's life including health, friendships, relation to the primary caregiver, etc.

Responses ranged from excellent (1) to poor (4). The negative items are recoded before computing the average scores of the scale. Each item will be scored from 1 to 4. The summary scores range 14 to 32. Higher scores indicate higher parental monitoring. The reliability coefficient is .81.

Specific parental behaviors are measured by 8 items including praising, showing physical affection, telling others positive thing about the child, grounding, spanking, taking away privileges, taking away allowance, and sending to room. For these 8 specific parental behaviors, the former three behaviors that are praising, showing physical affection, and telling others positive things about the child are treated as positive behaviors to children are treated as positive behaviors to children, and the later five are treated as negative including grounding, spanking, taking away privileges, taking away allowance, and sending to room.

These questions are originally asked about how many times in the past week the caregivers have done these behaviors to the child. In this study, these 8 items are recoded into dichotomous variables to show whether the primary caregiver did any behavior to the child. The code of one means the primary caregiver did the behavior, while the code of zero means the primary caregiver did not do the behavior. The reason for recoding these parental behaviors is because the distribution of every negative parental behavior is highly skew toward zero time. For grounding, 73% of the primary caregivers reported that they had never done this behavior to the child in the past week, 92.2% for spanking, 69.5% for taking away the child's privilege, 87.1% for taking away the child's allowance, and 62.5% for sending the child to a room. The distribution of every positive parental behavior is highly skew toward between once and one hundred times during the period of one week. Only 7.4% reported that they had never spoken child's positive things to others, 5.8% had never praised the child, and 1.8% had never shown physical affection to the child.

5.3 Human Capital and Other Parental Characteristics (as Independent Variables)

The construct of human capital is measured by the primary caregiver's education.

Parental education is categorized by years of schooling ranging from 1 to 20 years.

5.4 Financial Capital (as the Independent Variable)

The construct of financial capital is measured by: 1) family income; 2) family financial strain. The scale of family financial strain is drawn from the work of Glen Elder and Rand Conger in measuring experiences of economic or financial stress and strain and practical responses to such financial pressures (Conger & Elder, 1994) (see Appendix G). This scale includes 16 items including sold possessions or cashed in life insurance, postponed medical care, postponed major purchases, and etc happened in the last year. Each item asked the occurrence of each problem. All 16 items are counted into one variable that indicates the number of economic problems that happened in the last year. The summary scores range from 0 to 10. The reliability coefficient is .64, which are not as good as those of other scales used in this study.

5.5 Children's Self-Esteem (as the dependent variable)

This construct is measured by 8-item scale created by Marsh (1990). Only children aged 8-12 answered these items (see Appendix H). All items in this scale are positively stated and responses range from never (1) to always (7). Each item will be scored from 1 to 7. The summary scores range from 17 to 56. Higher scores indicate higher self-esteem.

The reliability coefficient (Cronbach's Alpha) of the scale of children's self-esteem is .74. This is an acceptable reliability level.

5.6 Socio-Demographic Variables (as Control Variables)

Socio-demographic variables used in the study include the primary caregiver's age and sex. The limitation on race related variables is the lack of primary caregiver's racial background. Race of primary caregivers is available only when they are the heads of the household. However, more than half of the primary caregivers are not the heads of the household, thus their racial background is unable to be identified.

6. Mean Differences between the Target Subsample and Missing Data

The multi-step procedure of case selection has been performed to extract the subsample of interests in this study. There are some cases lost in each step of case selection.

For the first step, only children who answered the questions of self-esteem in the Child Questionnaire are included. Around 30% (=1,088 / 3,586) of the CDS child respondents are selected for this study. The second step is to avoid overrepresentation on the primary caregivers (PCG). 164 (=1,088-924) cases are taken away. The third step is to reconstruct demographic variables, and 49 (=924-875) cases could not be identified. For the last step, 256 primary caregivers reported no information on social support and

financial strain related variables. This leads to only 619 (=875-256) cases included for data analysis.

The differences between the target subsample and the missing data serve as comparison levels for justifying the limitations of the CDS data used in this study. The following sections focus on the comparison between the target subsample and the 256 missing cases that result from the last step, missing data on social support and financial strain related variables.

The purpose of analyzing the differences between the target subsample and missing data is to confirm that the characteristics of missing group are not significantly different from the target group. Consequently, the drop of missing data does not make significant effects on the research results.

The means of socio-demographic variables (including the primary caregiver's age, sex, education, and family income) and children's self-esteem for both the target and the missing groups are listed in Table 4. The primary caregiver's mean age of the missing group tends to be younger than that of the target subsample. Both the primary caregiver's mean education and family income of the missing group tend to be lower than those of the target subsample are. Children's self-esteem of the missing group is also lower.

Table 4. Means of Socio-Demographic Variables and Children's Self-Esteem for the Target Subsample and the Missing Group

		Target Group	Missing Group
PCG Age	Mean	37.63	36.68
	Std. Deviation	6.01	6.00
	Range	52 (=73-21)	44 (=66-22)
	N	615	255
PCG Sex	Mean	0.03	0.04
	Std. Deviation	0.17	0.19
	Range	1 (=1-0)	1 (=1-0)
	N	619	256 `
PCG Education	Mean	12.95	12.33
	Std. Deviation	2.40	2.65
	Range	15 (=17-2)	15 (=17-2)
	N	609 `	254 `
Family Income	Mean	51447.69	45632.33
•	Std. Deviation	50572.37	97243.92
	Range	577000.00	1512000.00
	J	(=577000 -0)	(=1512000-0)
	N	619	256
Children's Self-	Mean	44.83	44.18
Esteem	Std. Deviation	6.70	7.38
	Range	39 (=56-17)	
	N	612	251

One-way analysis of variance (ANOVA) is used to test whether the mean responses of the target subsample and the 256 missing cases are significantly different from each other. There are significant differences in the primary caregiver's age and education (see Table 5).

Table 5. ANOVA of Socio-Demographic Variables and Children's Self-Esteem between the Target Subsample and the Missing Group

,		Sum of Squares	df	Mean Square	F Value	P Value
PCG Age	Between Groups	161.07	1	161.07	4.46	0.03
1 00 Age	Within Groups	31329.00	868	36.09	7.70	0.00
	Total	31490.07	869	30.03		
PCG Sex	Between Groups	0.01	1	0.01	0.40	0.53
	Within Groups	28.03	873	0.03		
	Total	28.04	874			
PCG Education	Between Groups	67.67	1	67.67	11.03	0.00
	Within Groups	5281.98	861	6.13		
	Total	5349.65	862			
Total Family	Between Groups	6.12E+	1	6.12E	1.34	0.25
Income	Within Groups	3.99E+	873	4.57E		
	Total	4E+12	874			
Children's	Between Groups	74.84	1	74.84	1.57	0.21
Self-Esteem	Within Groups	41073.23	861	47.70		
	Total	41148.08	862			

For parental warmth, monitoring, and positive parental behaviors (including telling positive things of the child to others, praising, and showing physical affection), all means of the target group are slightly higher than those of the missing group (see Table 6).

Table 6. Means of Parental Warmth, Monitoring, and Positive Parental Behaviors for the Target Subsample and the Missing Group

		Target Group	Missing Group
Parental Warmth	Mean	25.77	25.44
	Std. Deviation	3.57	4.23
	Range	21 (=30-9)	19 (=30-11)
	N	616` ′	252 `
Parental Monitoring	Mean	26.97	26.77
•	Std. Deviation	3.37	3.56
	Range	18 (=32-14)	19 (=32-13)
	N	528 `	223`
Telling Positive	Mean	0.93	0.91
Things to Others	Std. Deviation	0.26	0.29
•	Range	1 (=1-0)	1 (=1-0)
	N	614	247
Praising	Mean	0.94	0.91
U	Std. Deviation	0.24	0.28
	Range	1 (=1-0)	1 (=1-0)
	N	611 `´	249`
Showing Physical	Mean	0.98	0.97
Affection	Std. Deviation	0.14	0.17
	Range	1 (=1-0)	1 (=1-0)
	N	593	248

There is no significant difference in parental warmth, parental monitoring, and positive parental behaviors between the target and the missing groups according to one-way analysis of variance (see Table 7).

Table 7. ANOVA of Parental Warmth, Parental Monitoring, and Positive Parental Behaviors between the Target Subsample and the Missing Group

		Sum of	df	Mean	F	Р
		Squares		Square	Value	Value
Parental Warmth	Between Groups	19.08	1	19.08	1.34	0.25
	Within Groups	12336.95	866	14.25		
	Total	12356.03	867			
Parental Monitoring	Between Groups	6.29	1	6.29	0.53	0.46
-	Within Groups	8809.91	749	11.76		
	Total	8816.2	750			
Positive Parental Behav	viors					
Telling Positive	Between Groups	0.04	1	0.04	0.48	0.49
Things to Others	Within Groups	62.59	859	0.07		
•	Total	62.63	860			
Praising	Between Groups	0.15	1	0.15	2.44	0.12
•	Within Groups	53.94	858	0.06		
	Total	54.09	859			
Showing Physical	Between Groups	0.02	1	0.02	0.78	0.38
Affection	Within Groups	17.60	839	0.02		
	Total	17.61	840			

For negative parental behaviors, the means of "grounding" and "spanking" for the target group are slightly lower than those of the missing group, but the means of the other three behaviors for the target group are higher (see Table 8).

Table 8. Means of Negative Parental Behaviors for the Target Subsample and the Missing Group

		Target Group	Missing Group
Grounding	Mean	0.26	0.27
-	Std. Deviation	0.44	0.45
	Range	1 (=1-0)	1 (=1-0)
	N	616	254
Spanking	Mean	0.08	0.10
	Std. Deviation	0.27	0.30
	Range	1 (=1-0)	1 (=1-0)
	N	618	254
Taking Away Privilege	Mean	0.30	0.28
	Std. Deviation	0.46	0.45
	Range	1 (=1-0)	1 (=1-0)
	N	616	254
Taking Away Allowance	Mean	0.08	0.07
9	Std. Deviation	0.26	0.26
	Range	1 (=1-0)	1 (=1-0)
	N	583	233
Sending to Room	Mean	0.37	0.35
•	Std. Deviation	0.48	0.48
	Range	1 (=1-0)	1 (=1-0)
	N	614	253

There is no significant difference in any negative parental behavior between the target and the missing groups according to one-way analysis of variance (see Table 9).

Table 9. ANOVA of Negative Parental Behaviors between the Target Subsample and the Missing Group

		Sum of Squares	df	Mean Square	F Value	P Value
Grounding	Between Groups	0.03	1	0.03	0.17	0.68
•	Within Groups	168.22	868	0.19		
	Total	168.25	869			
Spanking	Between Groups	0.12	1	0.12	1.62	0.20
	Within Groups	66.76	870	0.08		
	Total	66.89	871			
Taking Away	Between Groups	0.06	1	0.06	0.29	0.59
Privilege	Within Groups	181.43	868	0.21		
•	Total	181.49	869			
Taking away	Between Groups	0.00	1	0.00	0.02	0.90
Allowance	Within Groups	56.44	814	0.07		
	Total	56.44	815			
Sending to Room	Between Groups	0.06	1	0.06	0.25	0.62
•	Within Groups	200.77	865	0.23		
	Total	200.83	866			

For the primary caregiver's sex, total family income, parental behaviors and children's self-esteem, there are no significant differences between these two groups. Although the mean differences of age and education exist between these two groups, the dependent variables (children's self-esteem and parental behaviors) show no significant difference. For the consideration of consistency of case inclusion for analysis, the 256 pairs of primary caregivers and children will not be included in data analysis.

7. Profile of Respondents in the Target Subsample

The frequency distribution of the demographic variables for the target subsample is demonstrated in Table 10. As can be seen, 600 (96.9%) of the respondents are female. In other words, 96.9% of primary caregivers are the child's mother.

Table 10. Distribution of Socio-Demographic Variables of the Target Subsample

Variable Category Frequency %					
PCG Sex	Female	600	96.9		
(N=619)	Male	19	3.1		
PCG Age	21-30	63	10.2		
(N=615)	31-40	357	58.0		
	41-50	186	30.2		
	51-60	6	1.0		
	61 -73	3	0.5		
PCG Education	2-11	98	16.1		
(N=609)	12	215	35.3		
(in Years)	13-14	152	25.0		
	15-16	103	16.9		
	17	41	6.7		
Child Age	7-8	129	20.9		
(N=619)	9	130	21.0		
,	10	135	21.8		
	11	104	16.8		
	12	121	19.5		
Child Sex	Female	317	51.2		
(N=619)	Male	302	48.8		
Child Race	White	317	51.4		
(N=617)	Black	240	38.9		
, ,	Hispanic	30	4.9		
	Asian	6	1.0		
	Native	4	0.6		
	Other	20	3.2		

Age of primary caregivers ranges from 21 to 73 years old, but the majority (357 or 58%) concentrates between 31 to 40 years old. More than one-third of the primary caregivers (215 or 35.3%) has finished 12 years of education. As for child age, the range is from 7 to 12 years old. The sex distribution of children is 48.8% of male and 51.2% of female. For child race, white and black children are the two largest groups. The former is 51.4% and 38.9%.

CHAPTER III RESULTS

According to the theoretical model (see Figure 1) and research hypotheses, social capital, parental human capital, and financial capital are the three predictors of parental behaviors. Parental behaviors consist of parental warmth, parental monitoring, and other specific parental behaviors including praising, showing physical affection, telling others positive things about the child, sending children to their room, taking away TV or other privileges, taking away an allowance, spanking, and grounding. The research hypotheses are formulated with the attempts to answer the research questions mentioned previously what types of capital (e.g. social capital, human capital, and financial capital) explain more variance on parental behaviors.

For the purpose of investigating the effect from each form of capital to each parental behavior, only one form of capital as the predictor(s) is entered into a regression equation each time. Although all predictors have been put into regression equations at once, it is difficult to distinguish the effect from one predictor to another. In addition, the more predictors a regression equation includes, the more likely multicollinearity occurs. Multicollinearity is the undesirable situation where the correlations among the independent variables are strong. The results shown in the following sections focus on the analysis on the effect from each form of capital to each parental behavior, and on that from each parental behavior to children's self-esteem.

1. Social Capital and Parental Behaviors

For testing the first hypothesis: "Support reciprocity between parents and people outside the household (e.g. own mother/father, grandmother/grandfather, friends, siblings, and co-workers) predicts supportive parental behaviors like the higher degrees of parental warmth, parental monitoring, telling others positive things about the child, praising, and showing physical affections". Social support here is categorized into two types, instrumental and emotional support. Support reciprocity is classified into four types: receive and provide, receive only, provide only, and neither receive nor provide. The analysis on support reciprocity focuses on only the parallel exchange within the same type of social support. Consequently, the exchange from the instrumental support to the emotional is not the focus. In other words, the support exchange across different types of social support is not included. For example, if one respondent provides instrumental support to a friend and the friend provides emotional support back to that respondent, this case is excluded in the analysis of this study.

In addition, social tie is another dimension to be considered. The pattern of support reciprocity may be different from one social tie to another. The following sections are divided into two parts: the first part focuses on the overall exchange of social support without consideration of social ties; the second focuses on the exchange within social ties such as providing support to friends and receiving support from friends, also.

For the continuous dependent variables including parental warmth and parental monitoring, multiple regression is applied to examine which type(s) of support

reciprocity is/are the best predictor(s) of the parental behaviors. The unstandardized regression coefficients are used in most of the tables of multiple regression. "The unstandardized coefficient remains fairly stable despite differences in the variances and the covariances of the variables in different settings or populations" (Pedhazur, 1982, p.247). The standardized coefficient is "sample-specific and can not be used for the purpose of generalizations across settings and populations" (Pedhazur, 1982, p.247). Therefore, the unstandardized coefficient is used in this study instead of the standardized coefficient.

For the dichotomous variables including the eight specific parental behaviors such as telling others positive things about the child, praising, and so on, logistic regression is applied to predict the probabilities of these specific parental behaviors for the primary caregivers who are characterized by different types of support reciprocity. Among these eight specific parental behaviors, "telling others positive things about the child" and "praising the child" are the two major variables that are frequently and significantly predicted by support reciprocity in general or within certain social tie. Consequently, the results concerning specific parental behaviors concentrate only on these two supportive parental behaviors, "telling others positive things about the child" and "praising the child".

1.1 Overall Social Support Reciprocity and Parental Behaviors

The following sections focus on the results of data analysis on the prediction from support reciprocity to parental behaviors. For overall support reciprocity, social support

from any social tie is counted no matter whom the primary caregivers receive social support from. Four categories of support reciprocity (including both receive and provide, receive only, provide only, and neither receive nor provide) are created for each type of social support, emotional and instrumental support, by applying the principle of parallel exchange within the same type of social support to match the support recipients and support providers.

1.1.1 Overall instrumental support reciprocity and parental behaviors

Table 11 demonstrates analogous patterns of prediction from instrumental support reciprocity to parental warmth and to parental monitoring. For parental warmth, the regression coefficient of the type of "receive and provide" shows that the change from the group combined all other types together to the group of "receive and provide" predicts an increase of .70 unit in parental warmth while controlling for the primary caregiver's age and sex. Both regression coefficients of the "receive only" and "provide only" types are negative. Only the "receive and provide" type significantly predicts parental warmth. Those who receive and provide instrumental support tend to have the significantly highest degree of parental warmth to their children.

Table 11. Regression of Parental Warmth and Parental Monitoring on Overall Social Support Reciprocity

		Depend	ent Variable	
Independent Variable	Parent	al Warmth	Parenta	Monitoring
Overall Instrumental Support Reciprocity				
Receive and provide	.70*		.87*	
Receive only	35		54	
Provide only	44	-	.57	
Overall Emotional Support Reciprocity				
Receive and provide		.68		.07
Receive only		87		45
Provide only		.66		.68
Primary Caregiver's age	02	02	.03	.05
Primary Caregiver's sex	-1.10	-1.10	00	.09
Constant	26.42	26.10	25.49	25.15
R^2	.02	.02	.03	.01
F	2.72*	1.80	2.64*	1.08
N	612	602	525	516

Note: ** p < .01; * .01 \leq p < .05.

The regression coefficients are unstandardized.

For parental monitoring, the regression coefficient of the type of "receive and provide" shows that the change from the group combined all other types together to the group of "receive and provide" predicts an increase of .87 unit in parental monitoring while controlling for the primary caregiver's age and sex. The regression coefficient of the "receive only" type is negative, -.54. The regression coefficient of the "provide only" type is .57. Only the "receive and provide" type significantly predicts parental monitoring. Those who receive and provide instrumental support tend to have the significantly highest degree of parental monitoring to their children.

The results of the multiple regression show that instrumental support reciprocity is a significant predictor of parental warmth and parental monitoring. There is a positive

relationship between instrumental support reciprocity and parental warmth, as well as between instrumental support reciprocity and parental monitoring controlling for the primary caregiver's age and sex. Those who receive and provide instrumental support have the higher degrees of parental warmth and parental monitoring toward their children (see Table 11).

Controlling for the primary caregiver's age and sex, the multiple coefficient of determination (R-square) for parental warmth is .02, and that for parental monitoring is .03. Only 2 percent of the total variation in parental warmth is explained by the simultaneous predictive power of instrumental support reciprocity that contains three dummy-coded independent variables, "receive and provide", "receive only", and "provide only", controlling for the primary caregiver's age and sex. Only 3 percent of the total variation in parental monitoring is explained by the same set of independent variables (see Table 11).

Table 12 demonstrates the results of logistic regression of specific parental behaviors, "telling others positive things about the child" and "praising the child", on overall

Table 12. Logistic Regression of Specific Parental Behaviors on Overall Instrumental Support Reciprocity

Dependent Variable: "Telling Others Positive Things about the Child"

	В	Exp(B)	Sig.
Independent Variable			
Overall Instrumental Support Reciprocity			
Receive and Provide	1.55	4.73	0.00
Receive Only	0.87	2.39	0.12
Provide Only	0.04	1.05	0.90
PCG Age	0.03	1.03	0.33
PCG Sex	0.33	1.39	0.76
Constant	0.98	2.66	0.34
-2 Log likelihood		307.33	
N		610	

Dependent Variable: "Praising the Child"

	В	Exp(B)	Sig.
Independent Variable			1
Overall Instrumental Support Reciprocity			
Receive and Provide	1.11	3.03	0.01
Receive Only	0.89	2.43	0.17
Provide Only	0.28	1.32	0.54
PCG Age	0.05	1.05	0.13
PCG Sex	-0.07	0.93	0.95
Constant	0.53	1.69	0.65
-2 Log likelihood		263.03	
N		607	

instrumental support reciprocity. For specific parental behaviors, instrumental support reciprocity is significantly and positively associated with the probability of the two parental behaviors "telling others positive things about the child" and "praising the child". With the change from the non-reciprocal group to the reciprocal (receive and provide) group in exchanging instrumental support in general, the primary caregivers

become more likely to tell others positive things about the child and praising the child (see Table 12).

1.1.2 Overall emotional support reciprocity and parental behaviors

The patterns of prediction from emotional support reciprocity to parental warmth and to parental monitoring are slightly different from those from instrumental support reciprocity (see Table 11). For parental warmth, the regression coefficient of the type of "receive and provide" shows that the change from the group combined all other types together to the group of "receive and provide" predicts an increase of .68 unit in parental warmth while controlling for the primary caregiver's age and sex. The regression coefficient of the "receive only" type is negative, -.87. The regression coefficient of the "provide only" type is .66, that is very close to the "receive and provide" type. None of these regression coefficients significantly predicts parental warmth.

For parental monitoring, the regression coefficient of the type of "receive and provide" shows that the change from the group combined all other types together to the group of "receive and provide" predicts an increase of .07 unit in parental monitoring while controlling for the primary caregiver's age and sex. The regression coefficient of the "receive only" type is negative, -.44. The regression coefficient of the "provide only" type is .68. None of these regression coefficients significantly predicts parental monitoring (see Table 11).

The results of the multiple regression show that emotional support reciprocity is neither a significant predictor of parental warmth nor one of parental monitoring controlling for the primary caregiver's age and sex (see Table 11).

The multiple coefficient of determination (R-square) for parental warmth is .02, and that for parental monitoring is .03 controlling for the primary caregiver's age and sex.

Only 2 percent of the total variation in parental warmth is explained by the simultaneous predictive power of emotional support reciprocity, that contains three dummy variables, "receive and provide", "receive only", and "provide only", controlling for the primary caregiver's age and sex. Only 3 percent of the total variation in parental monitoring is explained by the same set of independent variables (see Table 11).

Table 13 demonstrates the results of logistic regression of specific parental behaviors, "telling others positive things about the child" and "praising the child", on overall emotional support reciprocity. The results of emotional support reciprocity are similar to those of instrumental support reciprocity. Emotional support reciprocity is significantly associated with the probability of the two supportive parental behaviors "telling others positive things about the child" and "praising the child". With the change from the non-reciprocal group to the reciprocal (receive and provide) group, the primary caregivers become more likely to tell others positive things about the child as well as praising the child.

Table 13. Logistic Regression of Specific Parental Behaviors on Overall Emotional Support Reciprocity

Dependent Variable: "Telling Others Positive Things about the Child"

	В	Exp(B)	Sig.
Independent Variable			
Overall Emotional Support Reciprocity			
Receive and Provide	1.45	4.27	0.00
Receive Only	1.42	4.14	0.18
Provide Only	0.60	1.82	0.19
PCG Age	0.02	1.02	0.49
PCG Sex	0.54	1.71	0.62
Constant	0.83	2.29	0.43
-2 Log likelihood		302.14	
N		600	

Dependent Variable: "Praising the Child"

	В	Exp(B)	Sig.
Independent Variable			
Overall Emotional Support Reciprocity			
Receive and Provide	1.27	3.54	0.00
Receive Only	6.26	521.25	0.64
Provide Only	0.28	1.32	0.58
PCG Age	0.04	1.04	0.21
PCG Sex	0.09	1.09	0.94
Constant	0.52	1.67	0.66
-2 Log likelihood		245.97	
N		597	

In short, the first hypothesis, support reciprocity between parents and people outside the household predicts supportive parental behaviors, is partially supported by the CDS data. Instrumental support reciprocity predicts higher parental warmth and parental monitoring, while emotional support reciprocity does not significantly predict higher parental warmth and parental monitoring. Both of instrumental and emotional support reciprocity significantly predict the higher probability of the two supportive parental

behaviors "telling others positive things about the child" and "praising the child". The primary caregivers within a reciprocal relationship are more likely to have supportive parental behaviors.

1.2 Support Reciprocity and Parental Behaviors by Social Tie

After examining the relationship between support reciprocity and parental behaviors in general, the impact of social ties is of interest. For further understanding the effects of social ties to the pattern of support reciprocity, the following sections examine the impact of support reciprocity on parental behaviors by social tie and the type of social support. The availability of social ties is critical for identifying the pattern of social support exchange. Social ties here include the primary caregiver's own mother/father, mother/father-in-law, own grandmother/ grandfather, spouse's grandmother/grandfather, sister/brother, friends, child's other parent, former spouse or partner, aunt/uncle/cousin, counselor/minister/other clergy, members of church or other organization, co-workers, grown child, and others.

Before performing the matching procedure, the principle of parallel support exchange is also applied here to match the support recipients and support providers.

There are still four categories of support reciprocity (including both receiving and providing, receiving only, providing only, and neither receiving nor providing). Then, the connection between a provider and a recipient with the matched social tie is pinpointed.

The data show that the matched connections concentrate on three types of social ties that are PCG's own parent, sibling, and friends.

1.2.1 Instrumental support reciprocity and parental behaviors by social ties

Table 14 demonstrates the patterns of prediction from instrumental support reciprocity to parental warmth and to parental monitoring for different types of social ties. For parental warmth, the "receive and provide" type between PCGs and friends significantly predicts the higher parental warmth with the regression coefficient, 1.07. The change from the group combined all other types together to the group of "receive and provide" between PCGs and friends predicts an increase of 1.07 unit in parental warmth controlling for the primary caregiver's age and sex. The "provide only" type between PCGs and siblings significantly and negatively predicts parental warmth with the regression coefficient, - .97. The change from the group combined all other types together to the group of "provide only" between PCGs and siblings predicts a decrease of .97 unit in parental warmth controlling for the primary caregiver's age and sex. For parental monitoring, none of these regression coefficients are significant.

The results of the multiple regression show that instrumental support reciprocity is a significant and positive predictor of parental warmth, while the social relationship is friendship. Instrumental support reciprocity is a significant and negative predictor of parental warmth, while the PCG is an instrumental support provider to his/her sibling. Instrumental support reciprocity does not significantly predict parental monitoring for any of the three types of social ties.

For the six equations, the multiple coefficients of determination (R-square) are from .01 to .02. Only 2 percent of the total variation in parental warmth is explained by the

simultaneous predictive power of instrumental support reciprocity controlling for the primary caregiver's age and sex, when the social relationship is either friends or siblings. For the rest four equations, only 1 percent of the total variation in the dependent variable is explained by the simultaneous predictive power of instrumental support reciprocity controlling for the primary caregiver's age and sex (see Table 14).

Table 14. Regression of Parental Warmth and Parental Monitoring on Instrumental Support Reciprocity by Social Tie

Support Reciprocity	by Social 1	10	Donondo	-4 \/i-bl		
Independent Variable			Depende	nt Variable	2	
Instrumental Support Reciprocity	D	arental War	th	Day	rental Moni	toring
Between PCG and Own Parent	r	ai Ciilai Wai	IIIUI	rai	Cillai MUIII	toring
Receive and provide	.53			.22		
·	.55 01			.22 59		
Receive only						
Provide only	51			.49		
Between PCG and Sibling						
Receive and provide		.78			.81	
Receive only		95			79	
Provide only		97*			.07	
Between PCG and Friend						
Receive and provide			1.07*			.25
Receive only			.10			09
Provide only			.44			.62
	•				•	0.4
Primary Caregiver's age	02	02	02	.03	.04	.04
Primary Caregiver's sex	-1.14	-1.17	-1.35	01	.05	.05
Constant	26.45	26.82	26.29	25.66	25.53	25.49
R ²	.01	.02	.02	.01	.01	.01
F	1.15	2.84*	2.34*	1.12	1.52	.95
N	612	612	612	525	525	525

Note: ** p < .01; * .01 \leq p < .05. The regression coefficients are unstandardized.

Table 15 shows the results of logistic regression of specific parental behaviors, "telling others positive things about the child" and "praising the child", on instrumental support reciprocity between the primary caregiver and his/her own parent. Instrumental support reciprocity is significantly and positively associated with the probability of "telling others positive things about the child", but not with that of "praising the child". With the change from the non-reciprocal group to the reciprocal (receive and provide) group in exchanging instrumental support with own parents, the primary caregivers become more likely to telling others positive things about the child.

Table 15. Logistic Regression of Specific Parental Behaviors on Instrumental Support Reciprocity between the Primary Caregiver and His/Her Own Parent

Dependent Variable: "Telling Others Positive Things about the Child"

	В	Exp(B)	Sig.
Independent Variable			
Instrumental Support Reciprocity			
Receive and Provide	2.11	8.25	0.04
Receive Only	1.01	2.76	0.10
Provide Only	-0.01	1.00	0.99
PCG Age	0.04	1.04	0.20
PCG Sex	0.22	1.24	0.84
Constant	0.96	2.61	0.35
-2 Log likelihood		313.80	
N		610	

Dependent Variable: "Praising the Child"

	В	Exp(B)	Sig.
Independent Variable			
Instrumental Support Reciprocity			
Receive and Provide	0.71	2.04	0.25
Receive Only	1.12	3.06	0.13
Provide Only	0.12	1.13	0.83
PCG Age	0.05	1.05	0.09
PCG Sex	-0.11	0.90	0.92
Constant	0.62	1.86	0.59
-2 Log likelihood		266.63	
N		607	

Table 16 shows the results of logistic regression of specific parental behaviors, "telling others positive things about the child" and "praising the child", on instrumental support reciprocity between the primary caregiver and his/her own siblings. Instrumental support reciprocity with own siblings does not significantly predict the probability of any of these two behaviors.

Table 16. Logistic Regression of Specific Parental Behaviors on Instrumental Support Reciprocity between the Primary Caregiver and His/Her Sibling

Dependent Variable: "Telling Others Positive Things about the Child"

	В	Exp(B)	Sig.
Independent Variable			
Instrumental Support Reciprocity			
Receive and Provide	1.67	5.30	0.10
Receive Only	0.28	1.32	0.61
Provide Only	0.08	1.08	0.87
PCG Age	0.03	1.03	0.23
PCG Sex	0.28	1.32	0.79
Constant	1.17	3.22	0.25
-2 Log likelihood		320.37	
N		610	

Dependent Variable: "Praising the Child"

	В	Exp(B)	Sig.
Independent Variable			
Instrumental Support Reciprocity			
Receive and Provide	1.43	4.16	0.17
Receive Only	0.34	1.40	0.59
Provide Only	0.05	1.06	0.92
PCG Age	0.05	1.05	0.09
PCG Sex	-0.09	0.92	0.93
Constant	0.71	2.04	0.54
-2 Log likelihood		267.55	
N		607	

Table 17 demonstrates the results of logistic regression of "telling others positive things about the child" and "praising the child" on instrumental support reciprocity between the primary caregiver and his/her friends. Instrumental support reciprocity is

significantly and positively associated with the probability of these two parental behaviors.

Table 17. Logistic Regression of Specific Parental Behaviors on Instrumental Support Reciprocity between the Primary Caregiver and His/Her Friend

Dependent Variable: "Telling Others Positive Things about the Child"

	В	Exp(B)	Sig.
Independent Variable			
Instrumental Support Reciprocity			
Receive and Provide	2.81	16.57	0.01
Receive Only	0.72	2.05	0.25
Provide Only	0.26	1.30	0.49
PCG Age	0.02	1.02	0.38
PCG Sex	-0.02	0.98	0.98
Constant	1.24	3.44	0.22
-2 Log likelihood		305.76	
N		610	

Dependent Variable: "Praising the Child"

	В	Exp(B)	Sig.
Independent Variable			
Instrumental Support Reciprocity			
Receive and Provide	1.46	4.28	0.02
Receive Only	0.91	2.48	0.23
Provide Only	0.77	2.16	0.13
PCG Age	0.05	1.05	0.15
PCG Sex	-0.36	0.70	0.73
Constant	0.68	1.98	0.55
-2 Log likelihood		261.37	
N		607	

With the change from the non-reciprocal group to the reciprocal group in exchanging instrumental support with friends, the primary caregivers become more likely to tell others positive things about the child and praising the child.

1.2.2 Emotional support reciprocity and parental behaviors by social tie

Table 18 shows that "receive and provide" of emotional support between PCGs and their parent, between PCGs and their siblings, and between PCGs and their friends positively and significantly predicts parental warmth.

Table 18. Regression of Parental Warmth and Parental Monitoring on Emotional Support Reciprocity by Social Tie

Independent Variable Instrumental Support Reciprocity			Depende	nt Variabl	<u>e</u>	
instrumental Support Reciprocity	P	arental Wa	armth	Pai	ental Mor	nitoring
Between PCG and Own Parent						•
Receive and provide	1.08*			.50		
Receive only	.58			.01		
Provide only	.51			11		
Between PCG and Sibling						
Receive and provide		.85*			.21	
Receive only		18			43	
Provide only		.99*			.95*	
Between PCG and Friend						
Receive and provide			.90**			.20
Receive only			86			-1.65**
Provide only			.47			.60
Primary Caregiver's age	02	02	02	.04	.04	.06
Primary Caregiver's sex	-1.17	94	-1.07	.01	.28	.00
Constant	26.06	26.16	26.17	25.52	25.38	25.45
R ²	.02	.02	.03	.01	.02	.03
F	2.46*	2.60*	3.30**	.83	1.69	3.20**
N	612	612	612	525	525	525

Note: ** p < .01; * $.01 \le p < .05$. The regression coefficients are unstandardized.

For the emotional support between PCGs and their siblings, the type of "provide only" from PCG to the sibling also positively and significantly predicts both parental warmth and parental monitoring. For the emotional support between PCGs and their friends, the type of "receive only" from friends to PCGs negatively and significantly predicts parental monitoring. The multiple coefficients of determination (R-square) for these equations range from .01 to .03 controlling for the primary caregiver's age and sex. Only 1 to 3 percent of the total variation in parental warmth is explained by the

simultaneous predictive power of emotional support reciprocity with the parent, sibling, and friends, respectively.

In sum, controlling for the primary caregiver's age and sex, emotional support reciprocity positively and significantly predicts parental warmth for all three types of social connection. The emotional support providing from PCGs to their siblings positively and significantly predicts both parental warmth and parental monitoring. Emotional support receiving from friends negatively and significantly predict parental monitoring.

The decomposed analysis on support reciprocity by social tie demonstrates different results from the general analysis on support reciprocity. In general, instrumental support reciprocity significantly predicts both parental warmth and parental monitoring. When social ties are broken down, the effect of instrumental support reciprocity is manifest only in friendship. The effects of emotional support reciprocity are not clear, when all types of social ties are mixed together. After distinguishing the types of social ties, the results demonstrate that emotional support reciprocity is a significant predictor for parental warmth in all three different social ties that includes own mother/father, siblings, and friends. Social tie is a critical factor to be considered. Different social ties can lead to different patterns of support reciprocity, and in turn to shape different parental behaviors.

Table 19 shows the results of logistic regression of "telling others positive things about the child" and "praising the child" on emotional support reciprocity between the primary caregiver and his/her own parents.

Table 19. Logistic Regression of Specific Parental Behaviors on Emotional Support Reciprocity between the Primary Caregiver and His/Her Own Parent

Dependent Variable: "Telling Others Positive Things about the Child"

	В	Exp(B)	Sig.
Independent Variable Emotional Support Reciprocity			
Receive and Provide	1.08	2.94	0.03
Receive Only	0.57	1.77	0.22
Provide Only	0.59	1.81	0.34
PCG Age PCG Sex	0.03 0.21	1.03 1.24	0.27 0.84
Constant	1.09	2.99	0.28
-2 Log likelihood		318.12	
N		610	

"Praising the Child"

	В	Exp(B)	Sig.
Independent Variable Emotional Support Reciprocity			
Receive and Provide	1.03	2.80	0.06
Receive Only	1.09	2.97	0.08
Provide Only	-0.03	0.97	0.96
PCG Age	0.05	1.05	0.09
PCG Sex	-0.19	0.83	0.86
Constant	0.50	1.65	0.66
-2 Log likelihood		263.50	
N		607	

Emotional support reciprocity between the primary caregiver and his/her own parents is significantly and positively associated with the probability of these two parental behaviors. With the change from the non-reciprocal group to the reciprocal group in exchanging emotional support with own parents, the primary caregivers become more likely to tell others positive things about the child and praising the child.

Table 20 shows that emotional support reciprocity between the primary caregiver and his/her own siblings is significantly associated with the probability of the parental behavior "telling others positive things about the child".

Table 20. Logistic Regression of Specific Parental
Behaviors on Emotional Support Reciprocity
between the Primary Caregiver and His/Her
Sibling

"Telling Others Positive Things about the Child"

	В	Exp(B)	Sig.
Receive and Provide	0.77	2.16	0.08
Receive Only	0.63	1.87	0.31
Provide Only	0.71	2.02	0.16
PCG Age	0.03	1.03	0.34
PCG Sex	0.40	1.49	0.71
Constant	1.26	3.53	0.20
-2 Log likelihood		319.79	
N		610	

"Praising the Child"

	В	Exp(B)	Sig.
Receive and Provide	0.49	1.63	0.27
Receive Only	0.75	2.12	0.32
Provide Only	0.94	2.56	0.13
PCG Age	0.04	1.05	0.14
PCG Sex	0.04	1.04	0.97
Constant	0.84	2.31	0.45
-2 Log likelihood		266.75	
N		607	

The association between instrumental support reciprocity and "telling others positive things about the child" is positive. With the change from the non-reciprocal

group to the reciprocal (receive and provide) group in exchanging emotional support with own siblings, the primary caregivers become more likely to tell others positive things about the child.

Table 21 shows that the results of emotional support reciprocity with friends are similar to those of instrumental support reciprocity with friends.

Table 21. Logistic Regression of Specific Parental Behaviors on Emotional Support Reciprocity between the Primary Caregiver and His/Her Friend

"Telling Others Positive Things about the Child"

	В	Exp(B)	Sig.
Receive and Provide	1.73	5.65	0.00
Receive Only	0.63	1.88	0.26
Provide Only	0.76	2.15	0.07
PCG Age	0.02	1.02	0.42
PCG Sex	0.38	1.46	0.72
Constant	0.93	2.52	0.35
-2 Log likelihood		303.45	
N		610	

"Praising the Child"

	В	Exp(B)	Sig.
Receive and Provide	1.40	4.07	0.00
Receive Only	1.03	2.80	0.18
Provide Only	0.73	2.07	0.14
PCG Age	0.04	1.04	0.18
PCG Sex	-0.01	0.99	0.99
Constant	0.51	1.67	0.65
-2 Log likelihood		258.24	
N		607	

Emotional support reciprocity between the primary caregiver and his/her friends is significantly and positively associated with the probability of the parental behavior "telling others positive things about the child" and that of "praising the child". With the change from the non-reciprocal group to the reciprocal group in exchanging emotional support with friends, the primary caregivers become more likely to tell others positive things about the child and praise the child.

2. Financial Capital and Parental Behaviors

Financial capital here is operationalized as family financial strain and family income. The following sections examine two hypotheses. The first part focuses on the relationship between family financial strain and parental behaviors. The second concentrates on that between family income and parental behaviors.

2.1 Family Financial Strain and Parental Behaviors

Table 22 shows that family financial strain is a significant predictor for parental monitoring, but not for parental warmth.

Table 22. Regression of Parental Warmth and Parental Monitoring on Family Financial Strain

	Dependent Variable			
	Parental Warmth		Parental Monitoring	
Independent Variable	В	Beta	В	Beta
Family Financial Strain	10	05	41**	22**
Primary Caregiver's Age	02	04	.01	.02
Primary Caregiver's Sex	-1.07	05	.19	.01
Constant	26.87		27.19	
R ²		.01		.05
F		1.39		9.04**
N	6	12	52	25

Note: ** p < .01; * .01 \leq p < .05

Table 23 shows that family financial strain does not significantly predict the probability of any of these two specific parental behaviors "telling others positive things about the child" and "praising the child".

Table 23. Logistic Regression of Specific Parental Behaviors on Family Financial Strain

Dependent Variable: "Telling Others Positive Things about the Child"

	В	Exp(B)	Sig.
Independent Variable			
Family Financial Strain	0.08	1.08	0.41
PCG Age	0.03	1.03	0.24
PCG Sex	0.20	1.22	0.85
Constant	1.18	3.25	0.26
-2 Log likelihood		324.26	
N		610	

Dependent Variable: "Praising the Child"

	В	Exp(B)	Sig.
Independent Variable			
Family Financial Strain	-0.06	0.94	0.50
PCG Age	0.04	1.05	0.15
PCG Sex	-0.11	0.89	0.91
Constant	1.24	3.46	0.29
-2 Log likelihood		270.25	
N		607	

Hypothesis 2.1: "the less family financial strain, the more likely parents have supportive parental behaviors like the higher degrees of supportive parental behaviors" is partially supported by the CDS data. Parental monitoring is significantly predicted by family financial strain. The less the financial strain the higher the parental monitoring on children; the more the financial strain the lower the parental monitoring on children. Yet, the prediction of family financial strain is not significant in parental warmth, "telling others positive things about the child", and "praising the child".

2.2 Family Income and Parental Behaviors

Table 24 indicates that family income is a significant predictor for both parental warmth and parental monitoring. Both the regression coefficients of family income on parental warmth and on parental monitoring are close to zero. Consequently, a one-unit increase in family income causes a very small increase in parental warmth and parental monitoring controlling for the primary caregiver's age and sex.

Table 24. Regression of Parental Warmth and Parental Monitoring on Family Income

		Depende	nt Variable	
	Parental 1	Warmth	Parental I	Monitoring
Independent Variable	В	Beta	В	Beta
Family Income	6.060E-06*	.09*	1.610E-05**	.24**
Primary Caregiver's Age	03	05	01	01
Primary Caregiver's Sex	98	05	.29	.01
Constant	26.68		26.32	
R ²	.0*	1).	06
F	2.3	4	10.	67**
N	61:	2	5	25

Note: ** p < .01; * $.01 \le p < .05$

The multiple coefficient of determination (R-square) for parental warmth is .01, and that for parental monitoring is .06 controlling for the primary caregiver's age and sex.

One percent of the total variation in parental warmth is explained by family income, and six percent of the total variation in parental monitoring is explained by the simultaneous predictive power of family income.

Family income is significantly and positively associated with the probability of the parental behavior "telling others positive things about the child" and that of "praising the child". With the increase in family income, the primary caregivers become more likely to tell others positive things about the child and praise the child. Yet, the proportions of the occurrence of these two behaviors increase very slightly (see Table 25).

Table 25. Logistic Regression of Specific Parental Behaviors on Family Income

Dependent Variable: "Telling Others Positive Things about the Child"

	В	Exp(B)	Sig.
Independent Variables			
Family Income	0.00	1.00	0.01
PCG Age	0.01	1.01	0.85
PCG Sex	0.44	1.55	0.68
Constant	1.74	5.68	0.07
-2 Log likelihood		317.27	
N		610	

Dependent Variable: "Praising the Child"

	В	Exp(B)	Sig.		
Independent Varialbes					
Family Income	0.00	1.00	0.00		
PCG Age	0.01	1.01	0.65		
PCG Sex	0.14	1.15	0.90		
Constant	1.41	4.10	0.20		
-2 Log likelihood	258.81				
N	607				

Hypothesis 2.2: "The higher family income, the more likely parents have supportive parental behaviors," is supported. Family income significantly predicts both parental warmth and parental monitoring. The higher the family income is, the higher the parental warmth is, and so is the higher the parental monitoring. The more likely the behaviors, "telling others positive things about the child" and "praising the child" occur.

3. Human Capital and Parental Behaviors

Table 26 indicates that the primary caregiver's education is a very significant predictor for both parental warmth and parental monitoring. The regression coefficient of the primary caregiver's education on parental warmth is .16, and that on parental monitoring is .29. Consequently, a one-unit increases in the primary caregiver's education causes an increase of .16 unit in parental warmth controlling for the primary caregiver's age and sex. A one-unit increases in the primary caregiver's education causes an increase of .29 unit in parental monitoring controlling for the primary caregiver's age and sex.

Table 26. Regression of Parental Warmth and Parental Monitoring on Primary Caregiver's Education

	Dependent Variable						
	Parental	Warmth	Parental Monitoring				
Independent Variable	В	Beta	В	Beta			
Primary Caregiver's Education	.16**	.11**	.29**	.21**			
Primary Caregiver's Age	03	05	.00	.00			
Primary Caregiver's Sex	-1.13	06	.19	.01			
Constant	24.84		23.17				
R ²	.0	2	.04				
F	3.3	35*	7.58**				
N	60)6	52	20			

Note: ** p < .01; * $.01 \le p < .05$

Controlling for the primary caregiver's age and sex, the multiple coefficient of determination (R-square) for parental warmth is .02, and that for parental monitoring is .04. Two percent of the total variation in parental warmth is explained by the simultaneous predictive power of the primary caregiver's education, and four percent of the total variation in parental monitoring is explained by the primary caregiver's education.

Parental education is significantly and positively associated with the probability of the parental behavior "telling others positive things about the child", but not with that of "praising the child". With the increase in the parental education, the primary caregivers become more likely to tell others positive things about the child (see Table 27).

Table 27. Logistic Regression of Specific Parental Behaviors on the Primary Caregiver's Education

Dependent Variable:
"Telling Others Positive Things about the Child"

	B Exp(B)					
Independent Variable Primary Caregiver's Education	0.20	1.22	0.00			
PCG Age PCG Sex	0.01 0.18	1.01	0.57 0.87			
Constant	-0.51	0.60	0.67			
-2 Log likelihood	317.27					
N		610				

Dependent Variable: "Praising the Child"

	В	Exp(B)	Sig.	
Independent Variable Primary Caregiver's Education	0.10	1.11	0.15	
PCG Age PCG Sex Constant	0.04	1.04	0.20	
	-0.17	0.84	0.87	
	0.03	1.03	0.98	
-2 Log likelihood	262.44			
N	601			

Hypothesis 3: "The higher the parental education is, the more likely parents have supportive parental behaviors," is supported. Parental education significantly predicts both parental warmth and parental monitoring. The higher the parental education is, the higher the parental warmth is, and so is the higher the parental monitoring.

4. Parental Behaviors and Children's Self-Esteem

The following sections focus on the relationships between parental behaviors and children's self-esteem. The parental behaviors to be analyzed including parental warmth, parental monitoring, praising, showing physical affections, telling others positive things about the child, grounding, spanking, taking away privilege, taking away allowance, and sending the child to a room.

Table 28 shows that three parental behaviors (including parental warmth, parental monitoring, and one supportive parental behavior "telling others positive things about the child") positively and significantly predict children's self-esteem.

The regression coefficient of parental warmth on children's self-esteem is .16, and that of parental monitoring on children's self-esteem is .32. Consequently, a one-unit increases in parental warmth causes an increase of .16 unit in children's self-esteem controlling for the primary caregiver's age and sex. A one-unit increases in parental monitoring causes an increase of .32 unit in children's self-esteem controlling for the primary caregiver's age and sex.

The regression coefficient of the supportive parental behavior "telling others positive things about the child" is 3.02. The coefficient indicates that the change from the group of "never telling others positive things about the child" to the group of "telling others positive things about the child" predicts an increase of 3.02 unit in children's self-esteem controlling for the primary caregiver's age and sex.

Table 28. Regression of Children's Self-Esteem on Parental Behaviors

	Dependent Variable: Children's Self-Esteem									
Independent Variable										
Parental Warmth	.16*									
Parental Monitoring		.32*								
Specific Parental Behaviors										
Grounding			89							
Spanking				-1.32			-			
Taking Away Privilege					62					
Taking Away Allowance						.25				
Sending to Room							91			
Praising								1.23		
Showing Physical Affection									.65	
Telling Positive Things to Others										3.02*
Primary Caregiver's Age	.05	.06	.05	.04	.05	.05	.03	.06	.07	.04
Primary Caregiver's Sex	-1.54	05	-1.51	-1.78	-1.81	-1.74	-1.74	-1.85	-2.35	-1.73
Constant	38.90	34.08	43.19	43.51	43.39	42.94	43.97	41.33	41.57	40.52
R^2	.01	.03	.01	.01	.01	.00	.01	.01	.01	.02
F	2.07	4.91**	1.30	1.19	1.01	.67	1.45	1.34	1.17	3.44*
<u>N</u>	605	520	605	607	605	574	603	600	582	603

Note: ** p < .01; * .01 \leq p < .05. The regression coefficients are unstandardized.

The multiple coefficients of determination (R-square) for these equations range from .01 to .03 controlling for the primary caregiver's age and sex. Only 1 to 3 percent of the total variation in children's self-esteem is explained by the simultaneous predictive power of each parental behavior, respectively, controlling for the primary caregiver's age and sex.

Hypothesis 4: "The higher degree of supportive parental behaviors (including parental warmth, parental monitoring, telling others positive things about the child, praising, and showing physical affections), the higher children's self-esteem," is

supported by three supportive parental behaviors that are parental warmth, parental monitoring, and of "telling others positive things about the child".

CHAPTER IV CONCLUSION

This chapter consists of three sections. The first section provides a summary of research findings related to research intentions and hypotheses. The second section discusses the implications of this study. Finally, the last section explores the limitations of this study and provides suggestions for future research.

1. Summary

The research intentions of this study aims to examine the relationship between parental practice and children's self-esteem under the broader family context. The concept of multi-level social context integrated with social capital theory is applied to the research framework. Basically, there are four levels in the research framework. The first level focus on children, in particular children's self-esteem. The second is parents, precisely parental behaviors. The third is resources inside the family including parental human capital and family income. The fourth is resources from outside of the family; that is social support from people outside of the household. According to social capital theory, the mobilization of resources is critical for utilization. Parents in this case play the key role to transform and transfer the resources to facilitate the well-being for their young children.

Consequently, the effects of different forms of capital surrounding a family get the major attention. Since the parent's role is so critical, parental practice is treated as a primary factor to shape children's self-esteem. In the attempt of investigating the effects of different forms of capital on parental behaviors and what parental behaviors lead to the higher children's self-esteem, research hypotheses and data analysis aimed to discover research evidence for solving the puzzle.

H1: "Support reciprocity between parents and people outside the household predicts supportive parental behaviors" is partially supported by the CDS data. Overall instrumental support reciprocity significantly predicts the higher degrees of parental warmth and parental monitoring, as well as the higher probability of "telling others positive things about the child" and "praising the child". Overall emotional support reciprocity does not significantly predict higher parental warmth and parental monitoring, but predict the higher probability of "telling others positive things about the child" and "praising the child".

For instrumental support reciprocity by social tie, only "telling others positive things about the child" is significantly and positively predicted by the reciprocal relationship in instrumental support with own parents. For instrumental support with siblings, only parental warmth is significantly and negatively predicted, when instrumental support is provided by the primary caregivers without being received from siblings. For instrumental support with friends, the higher degree of parental warmth, and the higher probability of "telling others positive things about the child" and "praising the child" are significantly and positively predicted by the reciprocal relationship.

For emotional support reciprocity by social tie, parental warmth and "telling others positive things about the child" are significantly and positively predicted by the reciprocal relationship with own parents. For emotional support with siblings, parental warmth is significantly and positively predicted by the reciprocal relationship with siblings. In addition, both parental warmth and parental monitoring are significantly and positively predicted when emotional support is provided by the primary caregivers without being received from siblings. For emotional support with friends, parental warmth, "telling others positive things about the child", and "praising the child" are significantly and positively predicted by the reciprocal relationship with friends. In addition, parental monitoring is significantly and negatively predicted, when emotional support is received by the primary caregivers without being provided to friends.

The results of overall support reciprocity are different from the results of support reciprocity by social tie. In general, only instrumental support reciprocity significantly predicts both parental warmth and parental monitoring, while both instrumental and emotional support reciprocity predict both "telling others positive things about the child" and "praising the child". When social ties are broken down, the positive effect of instrumental support reciprocity with friends is particularly manifest on parental warmth, "telling others positive things", and "praising".

The effects of emotional support reciprocity are not clear, when all types of social ties are mixed together. After distinguishing the types of social ties, the results demonstrate that emotional support reciprocity is a significant predictor for parental warmth in all three different social ties that includes own mother/father, siblings, and friends. Social tie is a critical factor to be considered. The distinction on social ties assists

us to further understand the importance of emotional support reciprocity on parental warmth.

- H2.1. "The less family financial strain, the more likely parents have supportive parental behaviors" is partially supported by the CDS data. Only parental monitoring is significantly predicted by family financial strain. The less the family financial strain is, the higher the parental monitoring is.
- H2.2. "The higher family income, the more likely parents have supportive parental behaviors" is supported. Family income significantly predicts parental warmth, parental monitoring, "telling others positive things about the child", and "praising the child".
- H3. "The higher the parental education is, the more likely parents have supportive parental behaviors" is partially supported. Parental education significantly predicts parental warmth, parental monitoring, and "telling others positive things about the child".
- H4. "The higher degree of supportive parental behaviors, the higher children's self-esteem" is supported by three supportive parental behaviors that are parental warmth, parental monitoring, and "telling others positive things about the child".

2. Implications

This study reveals that social support, family income, and parental human capital are the important factors to lead to supportive parental behaviors. The pattern of general reciprocity exchange is different from the pattern of reciprocity exchange within different social ties. Reciprocity exchange of social support is sustained by different norms and

patterns of social ties among individual actors (Portes and Sensenbrenner, 1993).

Reciprocity transaction is regarded as the accumulation of 'chits' which actors hope to be reciprocated (Portes and Sensenbrenner, 1993). Actors may pursue social capital directly through reciprocity exchange. However, the norms of reciprocity between giving and receiving still need further investigation in terms of frequency, types of support, social ties, and psychologically central demand and supply for exchange.

According research finding of this study, the supportive parental behaviors contribute to the higher children's self-esteem. It has been argued that the best parenting style should spare the rod or spare the hug. The childrearing style of conservative Protestants has been considered to account for the fact that children growing from the environment of authoritative parental practice are more likely to experience academic success, and less likely to involve in substance abuse and teen pregnancy (Wilcox, 1998). Conservative Protestants support the use of corporal punishment to discipline children, but also emphasize consistent and firm discipline and high levels of parental warmth. No matter we spare the rod or not, the hug should never be spared.

Concerning family financial capital, the research findings show that higher family income predicts the higher likelihood of supportive parental behaviors, but family financial strain neither predicts lower likelihood of supportive parental behaviors nor does higher likelihood of parental harshness. Financial hardship can be as a source to decrease children's self-esteem, when the parent's modeling effects are apparent. In other words, parents are negatively influenced by financial hardship that leads to lower parental competence and the children perceive parental incompetence.

Another possibility is peer comparison. Children can learn norms and values through their friends. Family financial hardship may influence children's characteristics such as the living conditions, social activities, learning resources, and the way they look. Therefore, financial deprivation may lead to children's negative evaluations toward self due to the learned norms from their peer group. It has been argued that forms of capital can be transformed into one another through various institutional mechanisms (Bourdieu, 1985; Fernandez-Kelly, 1995; Portes, 1998). Financial problems are found to be less psychological central to the youth. Parents' reflected appraisals through their expression of warmth, acceptance, and supportiveness to their children are much more psychologically central to the youth's self-evaluation than are other family factors (Whitbeck et al., 1991). In other words, warm and supportive parental behaviors may be backups of family financial hardship.

The major purpose of this study focuses on child psychological well-being rather than socially expected behaviors or achievement. The satisfaction toward oneself is the dynamic of meaningful life, no matter how successful one is. Supportive parental behaviors are critical in shaping one's ability of appreciating oneself in human's early age. When one can appreciate the self, then he/she can appreciate others.

3. Limitations and Future Research

This study confronts three major limitations: the first one is in the measures of specific parental behaviors; the second is related to the downside of social capital; the third is the small values of the R-square of multiple regression and the -2 log likelihood

of logistic regression that indicate small effects from each form of capital to parental behaviors, and from parental behaviors to children's self-esteem. The small size of R-squares and -2 log likelihood values can result from the two former limitations.

First, the measures of specific parental behaviors may not catch the real pattern of daily interactions between the primary caregiver and the child due to the short duration asked in the questionnaire. The primary caregivers were asked to track back to only one week before the interview; probably one month may be more appropriate to present the pattern of one's behaviors.

Second, the prediction of social support may be constrained within the positive side of parental behaviors. In other words, social support is usually in light of the positive effects and its negative effects are frequently neglected. The bi-dimensional characteristic of social support needs further attention. The downside of social capital like family conflict, inconsistent childrearing values between two parents or between two generations may be critical to lead to low parental warmth and harsh parental behaviors. This may be the reason that the prediction from social support to negative parental behaviors is so minimal.

Finally, the small values of the R-square of multiple regression and the -2 log likelihood of logistic regression can be caused by the two former limitations. R-square is affected "by the variability of a given sample on: (1) the variables being studied; (2) the variables not included in the study; (3) the errors of measurement of the dependent variable" (Pedhazur, 1982, p.177). For (1), the prediction of social support is limited by the oversight of its bi-dimensional characteristic. For (2), other variables not included in

the study need to be considered for future research and will be discussed in next section.

For (3), the specific parental behaviors might not be adequately measured due to the short duration of recalling parental behaviors. The variability of a given sample listed above can also be the causes of the small values of the -2 log likelihood.

For future research, some aspects to be taken into account consist of the parent's own socialization experience, intergenerational transmission of parenting, the expression of parental behaviors related to cultural capital, the stage of child development related to parental practice, and further classifying parental behaviors into sub-dimensions such as social, psychological, and physical care.

According to social learning theory, parental behaviors can be learned through socialization associated with former experience of growing. The parent's own socialization experience can influence the conception of parental investment, and lead to different parenting patterns. Intergenerational transmission of parenting and the expression of parental behaviors are also crucial factors to shape parental behaviors. When dealing with both intergenerational transmission and the expression of parental behaviors, a broader research framework based on cultural capital is suggested. Different cultures emphasize different childrearing values and different ways to express affections emotionally and physically, as well as lead to different levels of parental investment.

Concerning the stage of child development related to parental practice, children have different needs in each developmental stage. Nursing and carrying are necessary for infants, but affective sharing and different forms of physical contact are needed by

toddlers and older children. Consequently, parental-child interactions need to be adjusted following children's development.

Finally, current research overwhelmingly focuses on parenting style (e.g. authoritarian, authoritative, and permissive), and general parental behaviors (e.g. support and control). It is necessary to classify parental behaviors into sub-dimensions such as social, psychological, and physical care concerning child development in order to adequately covering all childrearing typologies.

APPENDICES

Appendix A. Interview Procedure

- The following steps were taken in each household (Hofferth, Davis-Kean, Davis, and Finkelstein. 1997. Chapter 2):
 - 1. Take PSID interview.
 - 2. If there is an eligible child, a Child Case is generated by Data Control.
 - 3. Data Control staff print a set of labels, CAI (Computer Assisted Interviewing) Sample Management System (CSMS) checklist, and an information sheet for the household and teacher.
 - 4. The Data Services research assistant prepares and mails the sample line packet (containing coversheets, labels and information sheets) to the interviewer assigned to the case.
 - 5. The interviewer reviews the sample line packet and labels the appropriate questionnaires.
 - 6. The interviewer contacts the household, verifies the primary caregiver selection, explains the study, verifies the mailing address, and sets up an appointment for an in-person interview.
 - 7. The interviewer mails an introductory packet to the household containing a study brochure, introduction letter, and time diaries.
 - 8. The interviewer visits the household and gets written permission to interview the child(ren) from the primary caregiver. The interviewer administers the child assessments and primary caregiver-child questionnaire. The time diaries are reviewed and edited with the primary caregiver (and the child, if appropriate).
 - 9. The interviewer gives the appropriate self-administered questionnaires to the primary caregiver and the other caregiver (if one is in the household).
 - 10. The interviewer obtains written parental permission to contact teachers and caregivers for children in school, preschool, or child care.
 - 11. The interviewer obtains contact information for fathers living outside the home, if applicable.
 - 12. After the interview is completed, the interviewer edits the interviews and enters complete information about the contact and the interview into CSMS.
 - 13. The interviewer mails the school questionnaires to the appropriate teachers, caregivers, and school administrators.
 - 14. The interviewer notifies Ann Arbor via CSMS that the teacher information has been mailed.
 - 15. The interviewer mails an introductory letter to the father living outside the home, if applicable.

- 16. The interviewer contacts and interviews the father living outside the home, if applicable.
- 17. The interviewer edits the father outside the home questionnaires, if applicable.
- 18. The interviewer reports the completed household session to the Team Leader (TL).
- 19. The TL instructs the interviewer to mail the completed questionnaires to Ann Arbor (if no verification is required) or to the TL (for verification and evaluation).
- 20. The interviewer mails completed and edited interviews to Ann Arbor or the TL, as instructed.
- 21. The TL evaluates and verifies the interview, if applicable, gives feedback to the interviewer, and mails completed interviews to Ann Arbor.
- 22. The Ann Arbor staff logs completed questionnaires as they are received from interviewers, primary caregivers, other caregivers, teachers, childcare providers, and administrators.
- 23. The Survey Services Lab (SSL) staff mails reminder postcards one week after the interviewer has mailed the materials to the teachers and administrators.
- 24. The SSL staff conducts reminder calling for nonresponding teachers, caregivers, and administrators beginning two weeks after the interviewer has mailed the materials to the teachers and administrators. A second questionnaire is mailed by the SSL staff if necessary.
- 25. A total of two rounds of 5 calls each will be made before coding the case as final non-response, if the questionnaires are not returned.
- 26. The SSL staff codes and enters the completed time use diaries into the SAS data entry program created by PSID staff.
- 27. The SSL staff enters all completed questionnaires into the SAS data entry program created by PSID staff.
- 28. The SSL conducts check coding on 10% of Home Time Diaries and Home-based Care Time Diaries, and performs double entry verification on questionnaires for quality control purposes.
- 29. Completed questionnaires are stored by PSID staff once the questionnaires are coded and processed.

Appendix B. Questionnaires for the Child Development Supplement and the Possible Modes of Interview for Each Instrument during the Production Phase

Qnaire Booklet	Respondent	Number	Mode
Child Qnaire	Child (3-12)	One per child (age 3-12)	Face-to-Face
Time Diary	Child	Two per eligible child (all ages)	Mail ahead and Face-to- Face or phone
Prim Caregiver-Child Qnaire	Primary Caregiver	One per child (all ages)	Face-to-Face or phone
Prim Caregiver-HH Qnaire	Primary Caregiver	One per primary caregiver	Self-Administered in home (interviewer administered if literacy or language problems)
Other Caregiver-Child Qnaire	Other Caregiver of Child	One per child (for HHs with other caregiver)	Self-Administered in home
Other Caregiver-HH Qnaire	Other Caregiver of Child	One per other caregiver	Self-Administered in home
Father Outside of the Home-Child Qnaire	Father Outside of the Home	One per child (for HHs with a father living outside of the home)	Telephone Interview
Father Outside of the Home-HH Qnaire	Father Outside of the Home	One per father outside of the home	Telephone Interview
Elem/Middle School/Home School Teacher Qnaire	Elem./M.S. English Teacher/Home school teacher	One per child in Elem, middle or home school	Self-Administered mail survey
Elementary/Middle School Administrator Qnaire	Elementary or M.S. School Administrator	One per child in Elem or middle school	Self-Administered mail survey
Preschool/Daycare Teacher Qnaire	Preschool/Day Care Center Teacher	One per child in preschool or day care center	Self-Administered mail survey
Preschool/Daycare Administrator Qnaire	Preschool/Day Care Center Administrators	One per child in preschool or day care center	Self-Administered mail survey
Home-Based Care Qnaire	In-home day care provider	One per child in home- based day care	Self-Administered mail survey

Source: Hofferth, Sandra, Pamela E. Davis-Kean, Jean Davis, and Jonathan Finkelstein. 1997. Table 2. of Chapter 2-Data Collection in *The Child Development Supplement to the Panel Study of Income Dynamics:* 1997 User Guide. Survey Research Center, Institute for Social Research, The University of Michigan. Ann Arbor, MI.

Appendix C. Race and Gender Composition of the Child Development Supplement

	Total Families	Total Children	Male Children	Female Children	% Children by Race
White	1140	1648	827	821	46.03%
Black	997	1467	772	695	40.98%
Hispanic	158	268	134	134	7.49%
Asian	46	63	31	32	1.76%
Native American	12	19	8	11	0.53%
Other	29	107	50	57	2.99%
NA/DK	7	8	4	4	0.22%
Total	2389	3580	1826	1754	100%
Missing	1	6			

Note: a. The numbers in this table are unweighted.

Source: Hofferth, Sandra, Pamela E. Davis-Kean, Jean Davis, and Jonathan Finkelstein. 1997. Table 1. of Chapter 2-Data Collection in *The Child Development Supplement to the Panel Study of Income Dynamics:* 1997 User Guide. Survey Research Center, Institute for Social Research, The University of Michigan. Ann Arbor, MI.

Appendix D. Social Capital: Measures of Support Reciprocity

We are interested in the help and support that you receive from or give to other people who are not living with you in this household.

- 1. In the past month, have you received any help with things like child care, transportation, repairs to your home or car, or other kinds of work around the house? 1. Yes 5. No (GO TO 2.)
 - 1a. Who gave you this help? (Please circle up to 5 relationships. If more than 5 people helped you, choose the five that helped most often.)
 - 1. Former spouse or partner
 - 2. Own mother, father
 - 3. Mother-in-law, father-in-law
 - 4. Own grandmother, grandfather
 - 5. Spouse's grandmother, grandfather
 - 6. Sister, brother
 - 7. Aunt, uncle, cousin
 - 8. Child's other parent
 - 9. Friend
 - 10. Counselor, minister, other clergy
 - 11. Members of church or other organization
 - 12. Co-workers
 - 13. Grown child
 - 97. Other (Specify):
- 2. Have you provided any help with child care, transportation, repair to home or car, or other kinds of work around the house to anyone in the past month? 1. Yes 5. No (GO TO 3.)
 - 2a. Who did you help this way? (Please circle up to 5 relationships. If more than 5 people helped you, choose the five that helped most often.)
 - 1. Former spouse or partner
 - 2. Own mother, father
 - 3. Mother-in-law, father-in-law
 - 4. Own grandmother, grandfather
 - 5. Spouse's grandmother, grandfather
 - 6. Sister, brother
 - 7. Aunt, uncle, cousin
 - 8. Child's other parent
 - 9. Friend
 - 10. Counselor, minister, other clergy
 - 11. Members of church or other organization
 - 12. Co-workers
 - 13. Grown child
 - 97. Other (Specify):

- 3. In the past month, have you received any moral or emotional support such as advice or encouragement from friends or relatives? 1. Yes 5. No (GO TO 4.)
 - 3a. Who gave you this support? (Please circle up to 5 relationships. If more than 5 people helped you, choose the five that helped most often.)
 - 1. Former spouse or partner
 - 2. Own mother, father
 - 3. Mother-in-law, father-in-law
 - 4. Own grandmother, grandfather
 - 5. Spouse's grandmother, grandfather
 - 6. Sister, brother
 - 7. Aunt, uncle, cousin
 - 8. Child's other parent
 - 9. Friend
 - 10. Counselor, minister, other clergy
 - 11. Members of church or other organization
 - 12. Co-workers
 - 13. Grown child
 - 97. Other (Specify):
- 4. In the past month, have you provided moral or emotional support such as advice or encouragement to friends or relatives? 1. Yes 5. No
 - 4a. Who did you support this way? (Please circle up to 5 relationships. If more than 5 people helped you, choose the five that helped most often.)
 - 1. Former spouse or partner
 - 2. Own mother, father
 - 3. Mother-in-law, father-in-law
 - 4. Own grandmother, grandfather
 - 5. Spouse's grandmother, grandfather
 - 6. Sister, brother
 - 7. Aunt, uncle, cousin
 - 8. Child's other parent
 - 9. Friend
 - 10. Counselor, minister, other clergy
 - 11. Members of church or other organization
 - 12. Co-workers
 - 13. Grown child
 - 97. Other (Specify):

Appendix E. Parental Warmth: Measures of Parental Behaviors

About how often in the past month have you:

Would you say not in the past month, one or two times in the past month, about once a week, several times a week, or every day?

- 1. Hugged or shown physical affection to your child?
- 2. Told (CHILD) that you love him/her?
- 3. Spent time with (CHILD) doing one of his/her favorite activities?
- 4. Joked or played with (CHILD)?
- 5. Talked with him/her about thing he/she is especially interested in?
- 6. Told (CHILD) you appreciated something he/she did?

Parental Monitoring: Measures of Parental Behaviors

Thing now about how things are going in general in (child)'s life. Please rate each of the following parts of (child)'s life as either excellent, good, fair, or poor.

- 1. (His/Her) health.
- 2. (His/Her) friendships.
- 3. (His/Her) relationship with you.
- 4. (His/Her) feelings about (himself/herself).
- 5. (His/Her) prospects for the future.
- 6. (His/Her) relationships with brothers, sisters, or other children (he/she) lives with.
- 7. (His/Her) relationships with a teacher or caregiver.
- 8. (His/Her) relationships with the other parent.

Appendix F. Parental Behaviors: Measures of Specific Parental Behaviors

Sometimes kids mind pretty well and sometimes they don't. Sometimes they do things that make you feel good and sometimes they don't.

How many time in the past week have you...

- 1. Grounded (CHILD)?
- 2. Spanked (CHILD)?
- 3. Taken away TV or other privileges?
- 4. Praised (CHILD) for doing something worthwhile?
- 5. Taken away (CHILD)'s allowance?
- 6. Shown (CHILD) physical affection (kiss, hug, stroke hair, etc.)?
- 7. Sent (CHILD) to his/her room?
- 8. Told another adult (spouse, friend, co-worker, visitor, relative) something positive about (CHILD)?

Appendix G. Family Financial Strain

In the last year, have you done any of the following or have any of the following happened as a result of economic problems? (Circle all that apply)

- 1. Sold possessions or cashed in life insurance
- 2. Postponed major purchases
- 3. Postponed medical care
- 4. Borrowed money from friends or relatives
- 5. Applied for government assistance
- 6. Filed for or taken bankruptcy
- 7. Fallen behind in paying bills
- 8. Obtained a loan to consolidate or pay off debts
- 9. Had a creditor call or come to see you to demand payment
- 10. Had your wages attached or garnisheed by a creditor
- 11. Had a lien filed against your property because you could not pay a bill
- 12. Had your home, car or other property repossessed
- 13. Moved to cheaper living quarters
- 14. Moved in with other people
- 15. Sent one or more of your children to live with someone else
- 16. None of the above

Appendix H. Children's Self-Esteem

Now I am going to read some statements. For each, think about whether the statement never applies to you, sometime applies to you, always applies to you, or is somewhere in between. Then give me the number from the booklet after I read each sentence.

- 1. 1 do lots of important things. (never, sometimes, always, or somewhere in between?)
- 2. I like being the way I am.
- 3. Overall, I have a lot to be proud of.
- 4. I can do things as well as most people.
- 5. A lot of things about me are good.
- 6. I'm as good as most other people.
- 7. Other people think I am a good person.
- 8. When I do something, I do it well.

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