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Examining Resiliency in College Students from Single-Parent Structures

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**Examining Resiliency in College Students from Single-Parent
Structures**

by

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Dedication

The following work is dedicated to my own amazingly complex and resilient family, including the two strongest and most dynamic women I know – my mother and my wife. Each of my family members have served as pillars for my growth, knowledge, and insight. With each unique perspective, you shaped the way I saw the world, you fueled my curiosity, and you inspired the passion in me to do better both by and for you. This is one significant piece of that continuing journey.

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Examining Resiliency in College Students from Single-Parent Structures

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According to recent data, approximately twenty-seven percent of children under age eighteen live in single-parent households. The majority of research has focused on negative outcomes associated with children and adolescents from one-parent households, including poor academic performance and increased delinquency, comparing them to their two-parent counterparts. The bulk of current literature neglects to consider potentially normative functioning for those whom were raised in a single-parent home, especially psychosocial coping resources for the higher educational setting. Hierarchical regressions examined the role of three psychosocial factors for a number of positive outcomes for 319 college students from single-mother homes. Healthy family functioning was found to be predictive of fewer distressing mental health symptoms, higher levels of life satisfaction, and higher degrees of self-confidence in domains pertinent to college success when controlling for relevant demographic factors. Resiliency and optimism were also found to be predictive of these outcomes, with resiliency having the strongest predictive capabilities of all psychosocial factors. However, psychosocial predictors did not meaningfully predict grade point average (GPA), a measure of academic performance. Moderation analyses revealed that optimism did not serve as a useful moderator between resiliency and life satisfaction or college self-confidence. Study findings suggest interventions to bolster resiliency and coping may benefit students from single-mother

households college success, in a similar fashion to what we would expect to see amongst the general college student population.

Keywords: single-parent, resiliency, college student, college efficacy, subjective well-being, family functioning

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Chapter 1: Introduction

The social structure within the United States in the last several decades has undergone a significant shift regarding composition of families. Greater numbers of American family structures are engaging in alternative forms to the “normative” two-biological-parent household, incorporating the inclusion of step-parents, blended families, same-sex parent households, and cohabitating parents that do not legally marry. Similarly, parental separation, divorce, death of one parent, and partner-free adults are not uncommon familial environments for children in modern society, resulting in a considerable increase of the percentage of children living in single-parent households. According to the U.S. Census Bureau (2012), the percentage of husband-wife family households fell below 50% (approximately 48%) for the first time since data collection on families began. Subsequently, recent estimates suggest single female or male heads of house with at least one child under age 18 comprise nearly 30% of all American households, taking into account parents’ marital statuses of widowed, divorced, separated, or never married (U.S. Census Bureau, 2016). This posed a substantial increase from 18% in 2012, 16% in 2000, and 15% in 1990 (U.S. Census Bureau, 2012). In addition, 27.2% of children under the age of 18 lived with one parent in 2007 (Phillips, 2012). As diverse family structures have slowly surged in prominence since the 1980s, researchers’ interest on this topic has increased accordingly.

Since the 1970s, research of single-parent households has largely focused on the associated negative outcomes (Ford-Gilboe, 2000; Hanson, 1986; Hetherington, Stanley-Hagan & Anderson, 1989). Researcher findings primarily discussed juvenile delinquency, inadequate sex role identification with the single-parent, drug or alcohol abuse, poor school achievement, sexual promiscuity, and limited parental supervision (Hetherington et al., 1989; Barber & Eccles, 1992; Murry, Bynum, Brody, Willert & Stephens, 2001; Rodgers & Rose, 2002; Roberts, Lewis & Carmack, 2011). Negative outcomes associated with solo parenting are not limited though to externalizing and problem behaviors; research has identified poor psychological functioning and depressive symptoms amongst children from single-parent family structures (Björkenstam,

Pebley, Burström, & Kosidou, 2017). Similarly, studies focused on apparent deficiencies of single-parents oftentimes are guided by a value orientation that casts the traditional nuclear family structures as the “gold standard” (Ford-Gilboe, 2000) while perpetuating negative stereotypes of the “broken home” (Barber & Eccles, 1992). Over time, one-parent family structures have come to represent a societal problem riddled with numerous negative outcomes and a social adversity for American children.

These reported shortcomings of single-parent homes when compared to traditional households are likely not as disadvantaged as once suggested. Recent literature demonstrates that after controlling for family income, the prevalence of poor functioning outcomes (e.g., academic success) decreases and lacks significant effect on adolescent well-being (Barber & Eccles, 1992; Rodgers & Rose, 2002; Phillips, 2012). At the same time, one-parent homes encounter unique difficulties and hardships – such as a greater role strain placed on the parent – which frequently is considered detrimental to family success. This approach establishes a false and limiting dichotomy; it neglects to identify the potential strengths that single-parent families possess and undermines the opportunity to utilize cultivated coping skills. In turn, both public policy and clinical intervention strategies aimed at family health promotion lose intrinsic leveraging capabilities due to undervaluation. The broad assumption that all children emerging from these households are unsuccessful is a gross overgeneralization, when in reality many children can have positive experiences (Fergusson & Lynskey, 1996; Ford-Gilboe, 2000; Gilligan, 2000; Chen & George, 2005; Nixon, Greene, & Hogan, 2015; Williams & Bryan, 2013).

Research attention centered on dysfunctional or pathological aspects of the single-parent family structure reinforces harmful narratives that limit the ability to build upon “what works well” in the family. Consequently, the past few decades of research have progressed from investigators conceptualizing the single-parent household as deviant towards normalization instead (Hanson, 1986; Barber & Eccles, 1992; Taylor, Casten & Flickinger, 1993; Rodgers & Rose, 2002; Phillips, 2012). Numerous studies attempt to pinpoint the mechanisms behind individuals’ ability to manage and cope with common adversities in single-parent households. Studies shifting away from a

deficit model of single parenthood are often grounded in positive psychology, a facet of the field that works to build on people's strengths to enhance their well-being. Positive psychology involves "identifying and nurturing [one's] strongest qualities, what they own and are best at, and helping them find niches in which they can best live out these positive qualities" (Seligman, 2002, p. 5). The pivotal construct of resiliency surfaced from the positive psychology orientation and can be instrumental in facilitating understanding the dynamics of the single-parent family structure.

Current researchers view resilience as a psychosocial response and facet of overall wellness in response to hardship. Gilligan (2000) discusses the integral role that parents and other influential adults have on resiliency formation in children, through the stability of the caregiver relationship, alongside reinforcement of self-esteem and self-efficacy. While parents face their own unique set of stressors in working to maintain a single-parent household, their ability to preserve healthy parent-child dyadic relationship behaviors and interactions beneficially contributes towards resiliency factors. Family functioning steered by the sole caregiver, in addition to parental attachment, potentially mitigates many of the conceivable stressors that these families encounter and enhance children's resilience and coping through appropriate modeling.

Although typically parental involvement and resiliency are independently evaluated, they consistently are psychosocial variables of interest for single-parent family structures in the extant empirical work. Mechanisms by which single parents' involvement may positively influence children's long-term coping and resilience remains absent from current research. There remains minimal understanding of the relationship of single-parenthood on well-being beyond studying young children and adolescents. Given rising divorce rates and nonmarital childbirth in the 1980s, 90s, and 2000s, a significant cohort of young adults, ages 18 – 30, now exists. Raised in these diverse family structures, their cognitive maturity provides the grounds for critical reflection on their childhood upbringing. These retrospectives can provide valuable insight into the family interactions and current functioning in single-parent homes. Through appraising positive and negative aspects of their family, young adults can help distinguish amongst the commonalities and differences many single-parent families encounter. Clinically, results can present an improved

comprehensive picture of the adversities families face and behaviors they utilize to adapt accordingly within their family system. Leveraging this useful information could influence development of broad strategies for strength-based interventions for improving adaptive family functioning. Finally, accounting for the population of young adults from single-parent homes currently headed for higher education or already in attendance, college administrations will be better equipped to anticipate needs in efforts to enhance the possibility of effective matriculation for this subsection of students.

Prior empirical work supports the associations of family processes with resiliency coping strategies. Particularly with solo-parent families, healthy family functioning and parenting strategies can ameliorate the negative impact of outcomes commonly associated with cumulative stressors unique to the family structure. Further, resiliency traits are understood as equipping individuals to better cope with difficulties and transitions. Young adults in the college environment are presumably adapting to two significant transitions: (1) living independently and (2) adjusting to the academic, social, and other varied continuous demands of college. This proposed study is an exploratory investigation of resilience in a sample of college-aged young adults with single-parent families of origin.

This research evaluated perspectives on family functioning, in addition to resiliency traits endorsed by participants, to examine the relationship between these two variables and academic performance, perceived college competency, mental health functioning, and overall life satisfaction. Besides the proposed predictors of family functioning and resiliency, two additional unique factors of single-parent structures were analyzed to assess potential influence on positive psychosocial outcomes: parental attachment and optimism. Hierarchical multiple regression analyses sought to examine if and how key demographics, family functioning, resilience, parental attachment, and optimism were predictors of academic performance, college competence, mental health symptom severity, and life satisfaction in young adulthood. Parental attachment and optimism were examined as potential moderators of the relationship between family strengths,

resilience and current overall autonomous functioning in the college environment and satisfaction with life.

Chapter 2: Integrative Analysis

This investigation sought to contribute to the literature by mapping interrelated variables that connect to adaptive coping and students' college success. First, through reviewing the literature, unique facets of the single-parent family, including historical context, common single-parent stressors, and children's experiences lay the groundwork for understanding the influences of family functioning and parental attachment. Further attention was directed to the extant literature on positive psychology, particularly general resiliency trait development and optimism. Through cataloging the dimensions of interest, this work highlights and investigates the gaps in current empirical knowledge regarding relationships between single-parent related variables of interest on college academic performance, college self-confidence, psychological functioning, and life satisfaction.

SINGLE-PARENT FAMILY STRUCTURES

Current estimates indicate that approximately 27% of all U.S. households are headed by single mothers and 8% headed by single fathers that live with their own children (U.S. Census Bureau, 2016). The composition of a single-parent family does not adhere to a singular model of demographic characteristics. Instead, single-parent families can include those parents who chose to separate or divorce, lost a parent due to death, never cohabitated or co-parented, and unpartnered adults who may have elected to children on their own. Single parenthood is a role adopted across the lifespan, including financially, socially, and educationally under-resourced teenagers to older adults in later life who may have a greater number of these resources available alongside emotional maturity and skills. Single parenthood now spans various socioeconomic groups, with profiles of single parents differing amongst resource access, social support structures, job stability, occupations, income levels, and education (Anderson, 2012). In a distinct shift from previous decades, these contemporary complex socioeconomic profiles challenge historical expectations. Similarly, single parenthood is not restricted to gender or normative heterosexual

family contexts, with more single fathers taking on sole parenting responsibilities, alongside gay and lesbian single parents (Anderson, 2012).

Despite these variations, single parenthood is often the result of either childbearing between non-committed individuals or a divorce/separation of two-biological-parents previously partnered. Subsequently, the majority of existing literature focuses on divorced or separated single mothers. Given the multiplicity of family structures encompassed under the categorical term of *single parent*, the diverse experiences contribute to unique “factors of risk and resilience” (Anderson, 2012, p.129), partially accounted for by significant generational and societal attitudinal shifts.

Research history & societal context. Following World War II, rising divorce rates in America drew attention to families that disrupted the conventional nuclear family model and system. Prior to 1960, estimates suggested only one in ten children lived in a single-parent home (Usdansky, 2009). Census and demographer estimates in the 1980s indicated that 50% to 60% of children born during the decade would live in a single-parent family at some point before the age of 18 (Barber & Eccles, 1992; Murry et al., 2001) prompting family researchers to investigate the potential “negative effects of father-absence on male children in single mothers’ homes” (Hanson, 1986, p.125).

From that point, the preponderance of research topics drew connections between single-parent homes and children’s maladjustment in comparison with their dual-parent household peers. The majority of these studies found between-group differences that reported overwhelming negative consequences for children and adolescents originating from a single-parent home, including increased delinquency rates (Anderson, 2002; Boutwell & Beaver, 2010; Putnins, 1984; Steinberg, 1987; Stephenson, Blakely & Nichol, 1973; Touliatos & Lindholm, 1980), poor academic achievement (Rosenthal & Hansen, 1980; Shinn, 1978; Shreeve et al., 1986), and increased drug and alcohol use (Brook, Whiteman & Gordon, 1985; Flewelling & Bauman, 1990; Turner, Irwin & Millstein, 1991). Additionally, early researchers focused on the seemingly disproportionate impact of single parenthood on the African American community, considering

“nearly 53% of African American children under the age of 18 live with a single parent” (Roberts, Lewis & Carmack, 2011, p.311). For example, researchers examined the environmental influences of inner-city and urban settings on African American adolescent development (Ardelt & Eccles, 2001; Brodsky & DeVet, 2000), notably the potential for aggression, delinquency, gang-violence, and adolescent pregnancy (Anderson, 2002; Loeber & Stouthamer-Loeber, 1986). Although many researchers reported positive associations between single parent homes and adolescent violence and delinquency rates, Lipsey & Derzon (1998) found single parenthood to be one of the weakest predictors. However, their work still concluded that compared to adolescents living with two parents, risk of delinquency increased for single-parent adolescents, similar to previous studies of delinquency and family structure (Anderson, 2002).

The racially driven attention shift in specifically targeting African American families following the 1960s was likely accounted for by popular public policy discussions and suggested government changes that granted greater access to social services for Black women (Moynihan, 1965; Usdansky, 2009). For instance, the Moynihan Report (1965) outlined the rapid rise of the Black single-mother household and resultant decline of a “stable Negro family structure” that required immediate government action to address the purported endemic. Through popular narratives such as this started in the 60s, by the mid 1990s, American society had formulated negative stereotype depictions of single-parent homes; female heads of households, typically African American and low income, would produce unsuccessful adolescents with little likelihood of upward mobility, contributing to what was perceived as a growing social problem.

Stigmatization of single parenthood began to decline in the late 90s and early 2000s as normative societal expectations began shifting. Due to increasing prevalence of divorced and nonmarital childbearing parents, a shift in American values and weakening of marital and family social norms occurred (Usdansky, 2009). Yet in a study evaluating depictions of single parenthood found in articles published by U.S. magazines and social science journals, Usdansky (2009) argued that decreased social stigma was likely attributed more to society’s weakening expectations for long-term marital success than it was due to enthusiastic acceptance of single parents. Nonetheless,

continued broad social criticism persisted and focused on the supposed harm to families and children of marital dissolution and nonmarital childbearing.

Following this period, researchers attempted to identify mediating effects that could account for apparent disparities and highlighted the importance of family economics. In particular, proposed differences for single-parent structures and limited academic success were attenuated with the introduction of socio-economic status (Marsh, 1990; Battle, 2002; Phillips, 2012). Literature gravitated towards externalizing factors that could account for negative outcomes of psychosocial development, such as economic deprivation, in lieu of pathologizing the family structure itself.

Murry et al. (2001) argues that historically two paradigms have shaped the field and research. The first suggests that “aspects of family formation that differ from those of never-divorced, two-parent nuclear families are detrimental to children’s development” (Murry et al., 2001, p. 135) prompting studies to focus on proposed deficiencies, disadvantages, and disparities for children in single-parent versus two-parent families. As discussed above, research in the 1960s through 1990s overwhelmingly concentrated in this realm of between-group comparisons. The second paradigm proposes that socio-economic status was a likely culprit that provided the most comprehensive explanation for the differences between the two-family structures. Similarly, this paradigm model noted that past researchers failed to evaluate whether the traditional nuclear two-parent family structure was culturally valued amongst ethnic minority communities that oftentimes have additional kinship support. The majority of the literature discussed thus far conforms to these two paradigm distinctions.

Common hurdles encountered by single-parent homes. Both paradigm approaches emphasize the comparative differences between family structures. Undoubtedly, single-parent families encounter different adversities that two-parent families typically disregard, neglect to even consider, or ever confront as a hurdle. Single-parent families may initially struggle with unrealistic expectations that the family will be able to function in the same capacity as a two-parent

household. Understanding the situational characteristics of single-parent families has implications in identifying risk factors and adaptive capabilities of parents and children alike.

Family economics are oftentimes strained for families undergoing marriage dissolution. For instance, financial blows result from the loss of income previously provided by the non-custodial partner in either a dual-earner household arrangement or if the non-custodial parent was the sole wage-earner (Bakker & Karsten, 2013). The economic well-being of the single-parent home is further impacted by possible divorce expenses and difficulty obtaining regular child support payments (Anderson, 2012; Barber & Eccles, 1992; Bray & Hetherington, 1993; Richards & Schmiede, 1993). Additionally, non-working parents prior to divorce or separation may be confronted with employment difficulties in having to re-enter the workforce. Generally all single parents, regardless of any previous marital status, will also face the difficult task of finding employment positions amendable to needs of their family structure (Bakker & Karsten, 2013; Heath & Orthner, 1999; Minnotte, 2012). Overall job instability and underpaying employment may require welfare support (Barber & Eccles, 1992; Heath & Orthner, 1999; Richards & Schmiede, 1993) and multiple changes of residences (Bray & Hetherington, 1993). With single parents acting as sole income earners, families are likely to face difficult overall economic conditions, impacting other facets of family development.

Single parents typically experience practical challenges in attempts to manage employment and parental responsibilities simultaneously without additional partner support. By and large, single parents handle creating a structured household that contributes to caring for their children while juggling the incidental tasks required of upkeep for every household and family. These duties are in addition to job and financial obligations, and other community/social responsibilities that they may or may not have the spare time to engage in. Independently handling these multiple demands can lead to task overload and role strain (Richards & Schmiede, 1993; Weiss, 1979). This is especially notable for single mothers who typically acquire greater responsibility for childcare than the non-custodial male partner despite any child rearing arrangements (Bray & Hetherington, 1993) and who adopt more work responsibilities without any lessening of caregiving demands

(Bakker & Karsten, 2013). Limited parental supervision and monitoring can occur due to parents' work schedule, which has correlated to higher incidences of adolescent delinquency and risk-taking behavior (Cookston, 1999; Heath & Orthner, 1999).

Single parents are also forced to carefully allocate their time between their various demanding roles and corresponding commitments, leaving little chance for sleep much less leisure-time (Bakker & Karsten, 2013; Richards & Schmiede, 1993). Temporal demands can also make socializing difficult, resulting in possible limitations in social support, increased feelings of isolation, and creating barriers to investing in romantic partners. A study conducted in the Netherlands comparing single and co-parenting mothers' management of work, social and leisure domains demonstrated that single-mothers continuously integrated their childcare responsibilities with their work and leisure demands (Bakker & Karsten, 2013). Researchers concluded that a single mother's function as a caregiver was the most salient and dominant role in her whole identity composite. Yet research indicates that a majority of single parents find that parenting becomes easier over time as they gain greater organizational skills and fall into a family routine (Bray & Hetherington, 1993; Ford-Gilboe, 2000; Richards & Schmiede, 1993). Similarly, previous work has reported that single-parent families regain greater normalcy and routine after two years with overall improved functioning of the family structure (Rodgers & Rose, 2002). This gradual adjustment presumably results from parents developing reasonable expectations and improved functioning competency around *their* family structure instead of adhering to a two-parent model.

Finally, single parents have endured stigma due to negative impressions interwoven in decades long societal discourse. Nonetheless, with the steady increase and stabilizing rates of single-parent families (Minnotte, 2012) and the declining proportion of two-parent households as discussed earlier, there exists an increased likelihood that most Americans have interacted with single parents at some point. Similarly, increasing frequency of divorce over the past forty years has possibly attenuated social stigma (Barber & Eccles, 1992; Nixon et al., 2015; Usdansky, 2009; Walker, Crawford, & Taylor 2008). Increasing complex family structures have contributed to moving single-parent families into the realm of commonplace as contemporary marital

expectations shift to accommodate a broader definition of “family.” Although substantial literature evaluating this proposed trend is lacking (Thornton, 2009; Usdansky, 2009), socially derived strife or shame has conceivably lessened amongst single-parent families with the normalization of the family structure.

Children’s perspectives. The previous accounts of single parenthood originate predominately from quantitative and qualitative studies of parents, alongside analysis of demographer and public policy concerns. Child narratives of growing-up in single-parent family structures are limited. More research is needed on children and adolescents’ perceptions of their roles within their families and overall experiences.

Qualitative information gathered thus far has concentrated on the impact of family stability and divorce (Kurdek & Siesky, 1980; Nixon et al., 2015), parent-child dyadic relationships (Dunn, Davies, O’Connor, Sturges, 2001; Nixon, Greene, & Hogan, 2012), parents engaging in dating (Ferguson & Dickson, 1995; Nixon et al., 2015), new step-family structures (Dunn et al., 2001), experience of poverty (Nixon et al., 2015; Walker et al., 2008), and communicating with peers about their family (Dunn et al., 2001; Nixon et al., 2015; Walker et al., 2008). Aside from these core research concerns, additional studies identified various important themes reported by children such as perceived parental involvement and warmth (Nixon et al., 2015; Walker et al., 2008; Williams & Bryan, 2013), availability of time with parents (Nixon et al., 2015; Walker et al., 2008), extra familial or community support (Dunn et al., 2001; Walker et al., 2008; Williams & Bryan, 2013), and children’s agency and decision making capacity within the family (Dunn et al., 2001; Nixon et al., 2012; Nixon et al., 2015).

The vast majority of studies have focused on examining children’s experiences on a global level, including Ireland (Nixon et al., 2012; Nixon et al., 2015), Germany (Sharma & Sibereisen, 2007), Sweden (Lundberg & Andersson, 2000), and England (Dunn et al., 2001; Walker et al., 2008). Every study noted above focused exclusively on children’s perspectives, predominately using qualitative analysis of interviews as the sole measurement of inquiry. This methodological approach, although nuanced, has severely limited the possibility to conduct large-scale sample

analysis on traits and attitudes, alongside generalizability of findings to children and adolescents. In the course of this literature review, only one study was identified that evaluated college-aged individuals. Researchers examined what resiliency factors contributed to college success for African American students from single-parent homes, despite multiple adverse risk factors they encountered in childhood, including attending a high-poverty high schools and living in low-income households (Williams & Bryan, 2013). Despite attending to one of the shortcomings identified above in single-parent literature by evaluating college students, the work was a qualitative exploratory analysis that only incorporated eight college sophomore participants.

All the aforementioned single-parent studies covered to this point were conducted with children under the age of 18, aside from the one study evaluating educational resiliency in high-achieving African American youth (Williams & Bryan, 2013). Subsequently, attention to retrospective experiences of young adults was not found during review of the literature aside from the singular exception. Cataloging unique characteristics self-reported by children from single-parent families would add depth and clarity in conceptualization of the family's experiences. Simultaneously, further analysis would aid in identifying commonalities and differences amongst single-parent families and how they potentially uniquely function.

FAMILY FUNCTIONING & WELL-BEING

Historically, research has focused on family composition to explain differences in assorted outcome variables for children and adolescents from single-parent homes. Newer research veins have instead gravitated towards examining “the climate and processes operating within the family” (Phillips, 2012, p. 104), which have shown better predictive capabilities on dependent variable concerns such as child well-being than accounted for by family structure alone. In a comparative study of adolescents in two- versus single-parent homes satisfaction with family and well-being outcomes, results supported the assertion that family functioning provides better predictive influence than structure (Phillips, 2012). However, the study was significantly limited in the

method of evaluation used to examine family processes and climate, as there were only two questions – lacking psychometric merit – to assess such a complex construct.

The Beavers Systems Model of Family Functioning (Beavers & Hampson, 1990) defines family functioning as the dual interaction of family style – the interaction styles of relationships within the family – and family competency – flexibility and adaptability in the structure to counteract stress. Healthy and flexible family functioning involves adapting family dynamics to successfully meet individual needs within the structure, paralleling hallmarks of family resiliency within the literature (Newland, 2014). Beavers and Hampson (1990) identified nine family styles ranging from *optimal* to *severely dysfunctional*, organized by five key domains related to family competency, conflict, cohesion, leadership, and emotional expressiveness. Optimal families routinely display mutual respect for diversity of perspectives, support of individual choices, and conflicts that are typically resolved quickly. Conversely, families deemed as severely dysfunctional usually significantly struggle in communication coherence, leading to deficiencies in emotional closeness, adaptation, limited negotiating capabilities, and chaotic or unclear family boundaries and leadership.

The influence of family functioning can have significant impact on various outcomes of interest even later in life after children leave the household. For example, previous work conducted in the Philippines concluded that family problem solving served a functional capability in mitigating significant psychological distress amongst college students originating from low-SES and poverty backgrounds (Reyes & Yujuico, 2014). Further, authors suggested that college success was likely positively associated with family problem solving, acting as a protective buffer against internalized classism concerns. Parental responsiveness, strong supportive family relationships, and family leadership are all considered key features of family functioning and contributors to family resiliency. Bolstering these aspects has been shown to benefit children in well-being and optimism (Moreira & Telzer, 2015; Newland, 2014). The family system provides the opportunity for children early on to acquire skills through both modeling and providing learning experiences. Parenting styles are best defined as interwoven parenting behaviors, goals for childrearing, and

attitudes expressed towards children that create an overall emotional environment (Darling & Steinberg, 1993; Domenech Rodríguez, Donovan & Crowley, 2009) to support skill development aligned to parental values. Parenting style and parents' behavior modeling also contributes to children's perceptions of overall emotional availability, in turn impacting the degree of security in parental attachment.

Parental attachment. While parents may provide instrumental support for their children, they perform emotional functions that contribute to positive family functioning. Proposed by Bowlby (1973), attachment theory asserts that early attachment experiences with parental caregivers provides foundations for future psychological adjustment, distress, and interpersonal connectedness with others. Children who believe they are deserving of love and that others are trustworthy are increasingly likely to develop secure attachments. Individuals with secure attachments are more likely to psychologically flourish, be self-reliant, and have psychological flexibility (Bowlby, 1973; Armsden & Greenberg, 1987).

Young adults' degree of attachment with or separation from parents can impact both personal coping and college adjustment (Moreira & Telzer, 2015; Schwartz & Buboltz, 2004). Alternatively, poor attachment, as demonstrated by greater emotional distance between adolescents and parents, has been associated with poorer academic success (Crosnoe & Elder, 2004). In evaluating the influence of parental attachment relationships on adolescents and college students, Armsden & Greenberg's (1987) findings indicated that secure attachments yielded heightened well-being, self-esteem, and life satisfaction. Likewise, secure attachment divergently predicted negative psychological functioning depression, anxiety, and alienation. Researchers concluded that even after departing the household, the college-aged population's perception of parental relationships affected current functioning and well-being. Secure attachment styles provide a foundation for independence and exploration in college (Armsden & Greenberg, 1987; Rice et al., 1995; Schwartz & Bulboltz, 2004), fostering developmentally healthy separation from parents (Rice et al., 1995; Lapsley & Edgerton, 2002; Schwarts & Bulbotz, 2004). Previous work evaluating the intricate association between attachment and healthy psychological separation in

college students from two-parent homes described a complex mechanism of interactions. Students' reported attachment had been partially mediated by factors such as the degree of positive communication between parents and students, the ability to successfully handle conflict, and the influential role of fathers (Schwartz & Buboltz, 2004). Assessing the influential reach of parental attachment within various family compositions offers new opportunities in understanding the interaction of attachment and young adult outcomes in the college environment. Surveying parenting techniques and behaviors utilized by single parents, given their unique family context, remains an avenue for research development.

Single parenting behaviors. The parenting role for single adults can be complex as they navigate how to best structure their interactions with their children. Single parents must decide how they can facilitate their children's adjustment to partnership dissolution (if another parent had been involved), followed by determining if and how to pursue future romantic interests. Further, the single parent lacks a "tag team" collaborative approach with another adult to provide relief, support, or sharing joint decision-making burdens. Instead, single parents must independently find a suitable parenting style and determine how much they choose to communicate to their children.

As previously discussed, stressors related to divorce or separation include economic instability, decreased parental supervision, and possible increases in conflict (with previous partner or children) due to disruption to the family system. Yet children living in single-parent homes exhibit improved well-being and adjustment compared to their peers from two-parent households that contain ongoing marital strife and conflict (Hetherington et al., 1989; Bray & Hetherington, 1993). Thus, while single-parent structures may face initial transitional difficulties, they have the potential to provide improved emotional family climates in comparison to when the family experienced interpersonal strife and feuding between parents. Parents that can limit children's exposure to acrimonious interactions between separated parents and avoid criticism of the other parent to the child also contribute to healthy adjustment (Bray & Hetherington, 1993). Moreover, adolescent well-being improves with fewer exposures to marital or romantic transitions in single-parent households (Bachman, Coley & Carrano, 2012). While single parents can engage in

romantic relationships, findings emphasized that parental consistency and limiting multiple attachments to other adults better protect children from further disruptive family transitions.

Like most parents, researchers have also found that single parents who authoritatively parent experience improved positive outcomes with their children when compared to other parenting styles. Taylor, Casten & Flickinger (1993) evaluated the influence of kinship support on single-parenting strategies used by African American single mothers. The study determined that when mothers have social support from family, they are more likely to use authoritative practices and engage in more positive interactions with adolescent children. Further, authoritative parenting amongst the African American single mothers was more likely to yield adolescent self-reliance and limit occurrences of problem behavior. Results such as these replicate previous studies. Positive adjustment in children has been associated in families with single mothers and fathers that demonstrate authoritative dimensions of warmth, communication, support and consistent control (Bray & Hetherington, 1993).

Prior work has demonstrated that greater overall health for single parents and their children is associated with improved communication skills and broader social networks (Hanson, 1986). This finding translates into the notion that greater parent and child dyadic alignment promotes mental and physical well-being. Communication has been shown to serve as a protective factor for children in single-parent families. For example, previous research has reported that children spend more time talking with parents in single-parent households in comparison with two-parent families (Roberts, Lewis & Carmack, 2011). Similarly, parent-child communication in a single-parent structure can lead to both strengthening the relationship overall in addition to acting as a protective factor against risk behaviors (Brodsky & DeVet, 2000; Roberts, Lewis & Carmack, 2011).

Decades worth of research results have concluded that higher propensities for risk exist in the single-parent family structure. These vulnerabilities have been attributed both to distal factors, such as the important role of family income or poverty-impacted environments, and proximal factors, such as stress on the sole caregiver and prevalence of family discord. The circumstances of this family structure intuitively seem debilitating. Despite cumulative risk concerns though,

children and adolescents have been demonstrated to still flourish, reducing the likelihood of poor psychosocial outcomes and behaviors. Within this work, resiliency is the proposed psychological mechanism at play contributing to both family dynamics and the child's own personal strengths to adaptively cope.

RESILIENCE

A biopsychosocial process that incorporates multiple influences and interactions (Goldstein & Brooks, 2005), resilience is widely defined as the adaptive ability to recover from negative experiences and situations by utilizing multiple strategies and resources to successfully cope with adversity (Brodsky & DeVet, 2000; Wright & Masten, 2005). Research trends in the field of psychology have shifted towards greater attention and focus on highlighting the strength and adaptive resources of individuals encountering stressful events. This shift is referred to as “positive psychology” (Folkman & Moskowitz, 2000; Seligman & Csikszentmihalyi, 2000), which encompasses the resiliency construct. Resilience is also considered the “achievement of positive developmental outcomes and avoidance of maladaptive outcomes under adverse conditions” that might “impair normal development” (Goldstein & Brooks, 2005, p. 4). Resilience is the culmination of protective factors that allow adaption to occur and supersede risk factors that are present in the adverse situation.

Resilience requires two criteria: first, the presence of a significant threat to an individual's development, and second, that positive adjustment and functioning of the individual resumes despite the presenting risk (Wright & Masten, 2005). Risk factors are defined as characteristics in a situation that predict a negative outcome for a specific criterion, presence of psychopathology. Conversely, protective factors are the “quality of a person or context or their interaction that predicts better outcomes” particularly in the face of risk (Wright & Masten, 2005). Protective characteristics of resiliency that have been identified in previous studies include humor, creativity, insight, independence, and adaptability. Optimism also exists as a primary characteristic and marker of a resilient individual (Gillham & Reivich, 2004; Greeff & Ritman, 2005), in addition to

reportedly high degrees of self-esteem and self-efficacy (Hauser, Vieyra, Jacobson & Wertlieb, 1985; Greeff & Ritman, 2005). Previous studies evaluating characteristics of a resilient nature indicate that resilient adolescents generally demonstrate higher intelligence, greater problem solving skills and positive relationships with peers (Hauser et al., 1985; Fergusson & Lynskey, 1996).

One traumatic event is not automatically associated with poor outcomes but instead the cumulative effects of ongoing stressors evolve into what is considered to be “cumulative risk” (Gilligan, 2000; Goldstein & Brooks, 2005; Wright & Masten, 2005; Chen & George, 2005; Stoddard, Zimmerman & Bauermeister, 2012). Similarly, a divorce does not automatically dictate that children will likely experience negative outcomes. Instead, negative outcomes are attributed to the cumulative risk factors presented by the ongoing stressors that conflict and divorce present, in addition to how well the family structure navigates and adapts to transitions (Ford-Gilboe, 2000; Philips, 2012; Wright & Masten, 2005). In evaluating adolescent development in at-risk youth, Stoddard, Zimmerman and Bauermeister (2012) identified protective factors to determine the extent they mitigated and lessened the likelihood of violent behavior in what were considered high-risk environments. Coping strategies were found to moderate the impact of the negative effects of cumulative risks on violent behaviors, indicating that interventions focused on developing protective factors may assist in counteracting cumulative risks that adolescents are likely to experience.

Instead of focusing on the severity of risk factors and basing functioning on perceived deficiencies, studies in resilience seek to highlight and predict adjustment and stress hardiness, which are perceived as better indicators of overcoming adversity than traditional pathology models. Within wellness models, resilient adaptive functioning aids in the developmental desire to cope and re-establish homeostasis as much as possible, although resilient tendencies are not present in every individual and do not manifest in every situation (Goldstein & Brooks, 2005). Subsequently, individuals can encounter similar life circumstances, but only a portion will utilize resilience mechanisms, depending on various traits and states. Further, there are individual

differences in resilience, including prevalence of certain resiliency traits in cognitive abilities and temperament, such as extraversion and negative affect management (Wang & Deater-Deckard, 2013). Substantial empirical data supports dispositional optimism as a dimension of resiliency that acts as a protective process.

Optimism. Positive adaption to effectively moderate the influence of adverse circumstances on healthy functioning is the foundational mechanism of resilient functioning. Dispositional optimism serves as a facet of resiliency. Gillham & Reivich (p.1, 2004) define optimism as the general “tendency or disposition to expect the best.” Optimists hold the belief structure that good things will happen to them and anticipate positive outcomes. Carver & Scheier (2002) theorized that optimism was the result of persistence and confidence when confronting a challenge, in which optimists assume that difficulties can be managed successfully. This future oriented expectancy to overcome adversity impacts stress coping, alongside the attributions individuals assign to explain past failures (Carver & Scheier, 2002). Individuals who attribute particular contextual circumstances to an experience of failure and externalize the failing (e.g. “*I failed the test because I did not study*”) in comparison to drawing broad conclusions and internalizing the experience (e.g. “*I failed because I am stupid*”) will resultantly modify their behavior for future expectations. Those who make internalized and broad attributions to adversity are more likely to hold pessimistic belief structures and expect bad outcomes going forward.

Compared to their more pessimistically oriented counterparts, optimistic individuals experience lower symptoms of distress and depression (Carver & Scheier, 2002). Individuals who generally maintain an optimistic outlook have been linked to greater overall success in arenas such as work and school, fewer mental health concerns, better physical health, and greater relationship satisfaction (Gillham & Reivich, 2004; Taylor, Larsen-Rife, Conger, Widaman & Cutrona, 2010). Additionally, optimistic individuals are better protected from stressors and possess the ability to draw upon their own resources to functionally adapt to stress (Deater-Deckard, Ivy & Smith, 2005; Taylor et al., 2010). Optimistic individuals leverage problem-solving and emotionally focused coping when times get hard (Carver & Scheier, 2002).

Optimism has been indicated in previous work to be the most salient characteristic contributing to overall resilience for single-parent structures that lost a parent to death (Greeff & Ritman, 2005). Dispositional optimism has also been shown to help moderate the impact of economic adversity on African American single-mother families through bolstering of maternal resiliency (Taylor et al., 2010). Moreover, optimism has been linked to buffering against poorer mental health outcomes amongst undergraduate freshman during the first-year college adjustment period (Brissette, Scheier, & Carver, 2002; Moreira & Telzer, 2015; Pritchard, Wilson, & Yamnitz, 2007). Yet empirical work assessing the influence of optimism in single-parent structures is limited and merits further investigation.

HIGHER EDUCATION CHALLENGES & DEVELOPING COLLEGE SELF-CONFIDENCE

The college environment provides a series of challenges, including college readiness and independent management of multiple rigorous demands. These demands can contribute towards student satisfaction, well-being, and overall continued motivation in college persistence or attrition. Although conquering higher education challenges is a multifactorial process, self-efficacy and self-confidence are considered valuable dimensions amongst many deserving of additional analysis. While self-efficacy is commonly defined as a belief that engaging in a set of behaviors will yield the desired result in a specific domain or task, self-confidence is defined as a broader belief system for success across multiple domains or tasks (Stankov, Kleitman, & Jackson, 2015). In this study, college self-efficacy and confidence is a self-evaluation in one's "competence and skill...perceived capability to deal effectively with various situations" (Shrauger & Schohn, 1995, p. 256) in a domain specific setting (i.e. college) across a broad set of tasks for college success. Self-efficacy and confidence promotes student ability to process and limit distress. This oftentimes including reframing difficulties as positive challenges (Chemers, Hu, & Garcia, 2001), while gaining confidence in critical domains of functioning in the higher education environment.

In their work to further validate a college self-efficacy measure, Barry & Finny (2009) described how college self-efficacy has been linked to increased motivation, increased utilization

of college-appropriate behaviors such as self-regulated learning, decreased affective concerns such as stress and depression, and increased academic achievement. Self-efficacy has also been associated with academic persistence, setting realistic academic expectations, and overall academic performance across time, including predictive power for GPA (Chemers et al., 2001; Krumrei-Mancuso, Newton, Kim & Wilcox, 2013). In further evaluating the associated literature regarding these facets of college self-efficacy, there is also attention given to prior work – and limitations – on students’ reliance on family and the influence of single-parent backgrounds.

Entering into college offers a transitional period for emerging adults who leave their home and family to pursue educational and career interests, to develop independent functioning skills, foster social competence, and engage in ongoing identity formation (Azmitia, Syed, Radmacher, 2013; Conley, Travers, & Bryant, 2013; Mattanah, Lopez & Govern, 2011). This adjustment period can be fraught with new demands and challenges, leaving students vulnerable to emotional stress that negatively impacts mental health and academic success. Students’ functioning decline after matriculation is usually resultant of encountering new interrelated demands on time, managing academic workload, feelings of isolation or homesickness, developing and managing new interpersonal relationships, and cumulative stressors that contribute to mental health concerns (Conley et al., 2013; Galatzer-Levy, Burton, & Bonanno, 2012; Nordstrom, Goguen, & Hiester, 2014; Pittman & Richmond, 2008). To complicate matters further, recent studies indicate that higher education stressors are beginning to multiply with increasing expectations, leaving students struggling to keep up and cope (Galatzer-Levy et al., 2012; Hannum & Dvorak 2004). Studies indicate that a large proportion of undergraduates experience mental health decline – one study finding 15% of a sample of 1100 students reported distressing mental health functioning (Eisenberg, Gollust, Golberstein, & Hefner, 2007) – that can ultimately interfere with their physical (Adams, Wharton, Quilter, & Hirsch, 2008) or psychological functioning, including depression, anxiety, and suicidality (Conley et al., 2012; Eisenberg et al., 2007; Laughlin & Robinson, 2004; Nordstrom et al., 2014). College self-efficacy has been shown to buffer against these difficulties by easing adjustment and lessening stress, as students come to view challenges

as less threatening and adaptively respond (Chemers et al., 2001). Given the magnitude of mental health impact on college success and possible attrition, students' psychosocial functioning is a key indicator and predictor of college thriving.

Increasingly, researchers have mapped the heterogeneous college adjustment and success pathways of young adults. Despite students entering the higher education environment from dissimilar backgrounds, subsections of the student populace will eventually align and parallel each other in adjustment expectations. Alternatively, although students may have comparable starting points (e.g. graduation from similar high performing high schools,) they may still diverge onto differing success pathways over the course of their educational experience (Azmitia et al., 2013; Galatzer-Levy et al., 2012). Young adults from ethnic minority groups, lower socioeconomic backgrounds (Azmitia et al., 2013; Williams & Bryan, 2013), or first-generation students (Garriott, Hudyma, Keene, & Santiago, 2015) routinely face more difficulties than racial majority, better financially equipped, and educationally resourced peers. Despite the several barriers outlined above, the majority of students enter college knowing that "obtaining a bachelor's degree remains one of the most critical pathways to economic and social mobility in the United States" (Garriott et al., 2015, p. 253). Likewise, career and life satisfaction, along with greater assurance of financial security, are closely linked to the college experience (Garriott et al., 2015; Krumrei-Mancuso et al., 2013) in addition to long-term social and civic development (Mattanah, Lopez & Govern, 2011).

While students begin to independently develop their own social support networks in their new environment, ongoing close family support can provide a stable foundation to aid in coping with challenges. For instance, students who have made successful transitions to college reported higher perceived levels of emotional support from parents, which aided in improvement or maintenance of positive mental health during that first year (Azmitia et al., 2013). Research findings have also suggested that the degree of secure attachment and family closeness can have positive effects on undergraduates' self-regulated learning skills (Lee, Hamman, & Lee, 2007), and limiting college related psychosocial distress (Hannum & Dvorak, 2004; Kenny & Rice, 1995;

Moreira & Telzer, 2015). Although extremely limited, research on young adults from single-parent homes has focused on prevalence or absence of maladaptive behaviors (e.g., alcohol consumption) or elevation in psychosocial symptoms (e.g., depression or suicide). Related findings have shown increased likelihood of low academic achievement and attrition (Amato, 2001; Zill, 1996) and low academic self-concept (DeDonno & Fagan, 2013), although the latter study failed to report power and effect size in making this determination between dual and single-parent family structures. Consequently, sparse investigative attention has been allocated towards evaluating competency domains and instances of thriving in the college environment. Extant literature provides improved understanding of student adjustment from divorced and separated parents (DeDonno & Fagan, 2013; Hannum & Dvorak, 2004; McIntyre et al., 2003), but does not increase field knowledge of the perceived capabilities of young adults from single-parent homes. With increasing frequency and generally positive results, researchers have initiated assessing resiliency factors amongst college populations, including student optimism (Chemers et al., 2001; Montgomery, Haemmerlie, & Ray, 2003), coping flexibility (Galatzer-Levy et al., 2012), perceived competence & self-efficacy (DeDonno & Fagan 2013; Garriott et al., 2015; Pittman & Richmond, 2008), social responsibility (McIntyre et al., 2003), and self-esteem (Nordstrom et al., 2014) to determine mitigating and mediating effects in college adjustment and broader success.

Methodological flaws are present in several of these studies though, limiting findings generalizability. For example, although Montgomery and colleagues (2003) examined optimism amongst the college populace and found a positive association with college adjustment, their statistical analysis relied upon simple correlations. This severely limited the ability to begin offering explanations around the mechanisms of optimism in mediating adjustment expectations. In another case, one qualitative exploration of single-parent family impact, determined that African-American high achieving lower-income students were educationally resilient despite backgrounds filled with adverse circumstances (Williams & Bryan, 2013). Participants primarily attributed their success to the external motivating factors of their mother's expectations in conjunction with larger social support. While the study bolsters field knowledge through

identifying behavioral correlates with resiliency and college preparation, conclusions were drawn from only eight participants, exemplifying the current limitations of common population characteristics. College success pathways, associated with college self-efficacy and self-confidence, remain poorly investigated for emerging adults from single-parent homes. Accordingly, the field must expand to identify their psychological vulnerabilities and adaptive responses during a critical period of development in new setting outside the home.

LIFE SATISFACTION & SUBJECTIVE WELL-BEING

Associated to college students' ease in adjusting to the college environment is their perspective on life satisfaction. Pertaining to multiple fields of interest within psychology, most notably positive psychology, life satisfaction is customarily utilized as an outcome measure of subjective and optimal well-being (Weber, Harzer, Huebner, & Hills, 2015). Life satisfaction as a construct consistently is conflated with positive affect, and quality of life, with researchers and the general populace sometimes using the terms interchangeably (Alfonso, Allison, Rader & Gorman, 1996; Weber et al., 2015). Stricter delineations have emerged, as attempts to measure the various constructs have required greater discriminate understanding. For the most part, life-satisfaction is considered a reliable trait across time that utilizes a respondent's cognitive judgment in evaluating their life overall or specific domains of interest, such as family and career (Alfonso et al., 1996; Diener, 1994; Oishi, Diener, & Lucas, 2007; Weber et al., 2015). In comparison, impressions of positive affect rely upon emotional judgments and frequency of positive and negative reaction (Diener, Lucas, & Oishi, 2005; Weber et al., 2015). While these two constructs are related to each other, they differentiate along cognitive and emotional processes.

Subjective well-being provides a "summation of the quality of an individual's life by that person" (Alfonso et al., 1996, p. 276), leaving it completely up to the individual's subjective interpretation and free from outside judgment. Further, subjective well-being provides an intersection of the aforementioned cognitive and emotional domains; it incorporates the cognitive appraisal of satisfaction with life on a broad level and in specific domains of life such as job, while

simultaneously evaluating high or low levels of positive affect (Alfonso et al., 1996; Diener, 1994; Diener et al., 2005; Weber et al., 2015). For the purpose of this study in evaluating holistic well-being and satisfaction amongst young adults, the terms subjective well-being and life satisfaction are used interchangeably.

Prior work has evaluated the association between life satisfaction and some of the aforementioned domains of interest to this study, such as college adjustment and family functioning. Relationships perform an integral function in influencing well-being amongst young adults, particularly interpersonal family interactions. Previous works have found that parental support encouraging college students' autonomy has strong positive associations with academic adjustment, achievement (Duchesne, Ratelle, Larose, & Guay, 2007), and students' subjective well-being (Chirkov & Ryan, 2001; Ratelle, Simard & Guay, 2013). For example, Berkel and Constantine (2005) found that close familial relationships and interdependence in trusted relationships predicted satisfaction and well-being for female African-American and Asian-American college students. Authors concluded that the students' reliance upon family members eased matriculation and adjustment in an environment where young women of color oftentimes feel isolated in their experience amongst racial majority peers.

One study was identified as specifically assessing family structure and young adults' life satisfaction. In an international survey evaluating young adults' subjective well-being, quality of parents' marriage was positively associated with their life satisfaction, while those whose parents divorced reported lower levels (Gohm, Oishi, Darlington, & Diener, 1998). Yet marital status and family structure did not fully explain the difference. Instead, researchers proposed that quality of social relationships and intensity of conflict served as better predictors of well-being. This conclusion was similar to findings in Berkel and Constantine's (2005) work.

Relationship systems have been found to hold a significant sway on well-being. This influence starts with families of origin and reaches into adulthood as young adults begin to create and rely upon interpersonal social networks. Further examining the influence of familial support

and parental attachment would expand current understanding of the transactional processes at play in impacting life satisfaction.

RESILIENCE & SINGLE-PARENT FAMILIES: PROPOSED STRENGTHS FOR COLLEGE COMPETENCE, POSITIVE PSYCHOSOCIAL DEVELOPMENT, & SUBJECTIVE WELL-BEING

Through thorough examination of existing literature, the single-parent family provides an environment that can promote competence, independence, and helps strengthen the individual to cope with later stressors (Barber & Eccles, 1992; Ford-Gilboe, 2000). Parents promote these healthy adaptive functioning mechanisms through modeling resilience characteristics, incorporating those qualities in their parenting behaviors and interactions with their children (Brodsky & DeVet, 2000; Greeff & Ritman, 2005; Sheridan, Eagle & Dowd, 2005). In turn, they may arguably imbue the entire family structure with coping capabilities. Oftentimes, children's sense of self-esteem, autonomy, competency, communication style, and problem solving capabilities are linked to caregivers (Hauser et al., 1985; Best, Hauser & Allen, 1997; Heppner & Lee, 2002), which are all dimensions of successful coping. Along similar lines, earlier bodies of research indicated that adolescents from one-parent homes perceived themselves to have greater self-sufficiency, responsibility, self-reliance, and a larger number of skills than their peers from two-parent families (Barber & Eccles, 1992; Weiss, 1979). Adolescents living with single-parents have also reported possessing greater maturity than their peers, a function of being forced to "grow up" (Hetherington et al., 1989; Weiss, 1979; Williams & Byran, 2013), oftentimes related to the greater number of role responsibilities children of single-parents adopt.

Consequently, through the transmission of flexible coping skills and behaviors, one-parent households can become families of resilience that nurture positive adaptability in youth. To illustrate, parenting strategies and goals of single African-American mothers were described as actively seeking to "teach their children the values, morals, and behaviors that they need to survive and to succeed" (Brodsky & DeVet, 2000) and a desire to "raise a contributing member to society" (Roberts, Lewis & Carmack, 2011). These strength-based narratives are potentially shared values amongst single parents from various backgrounds, and are likely conveyed to their children

through a multitude of interactions in the home. Growing up with a sole parent presents children and adolescents with unique sets of challenges, thus allowing for the development of productive skills and coping strategies.

Despite the strides researchers have taken over the last two decades in improving understanding of single-parent homes, shortcomings remain. Primarily, the impacts of time in a single-parent home, cause of the single-parent status, and an empirical focus on the young adult population is lacking. For example, most prior research fails to capture the total duration of time children lived within a solely headed household. Accordingly, there lacks clear indication of how long children may have been exposed to common contextual risk factors for the family structure developed related adaptive coping skills. Arguably, there may exist previously unidentified distinct differences amongst various outcomes if a child has been living with one parent since birth in comparison to their final formative years of adolescence.

Similarly, African-American mothers raising children alone no longer exists as the popular societal conceptualization of single-parenthood; diverse family structures continue to emerge that aid in dismantling previous stereotypes. The cause of a single-parent status is (e.g. divorce, death, choice not to involve partner) oftentimes goes unmentioned in research, potentially masking heterogeneous differences between families. Single-parents who never had additional partner support after the birth of their children potentially communicate different parenting values, such as increased independence, compared to parents who separate partway through childrearing but continue to co-parent. Along with researchers' lack of analyzing the impetus for sole parenthood, most research does not evaluate outcomes for children in relation to a parent's demographic characteristics. Likely due to small sample sizes, most research does not examine potential gender, sexual orientation, or ethnic identity (aside from African-Americans) differences amongst single-parents. Targeting specific populations, particularly given the rising number of single-fathers, may help elucidate distinctions. The notion of "single-parent" warrants further expansion and investigation in acknowledging that single-parent households are not monolithic.

Finally, the majority of study outcomes are based on young child or adolescent performances on various measures of academic achievement, disciplinary records, substance use, or perceived social relatedness with peers based on teacher and parent reports. Evaluating younger children and adolescents seems insufficient in determining any unique characteristics, skills, or behaviors from single-parent structures that present later in development. Adult children of single-parent homes can likely draw comparative distinctions and articulate how their upbringing may have differed from two-parent peer counterparts.

In reviewing the above paucity of research, knowledge of single-parent families can be expanded further. Most qualitative studies had restricted sample sizes, limiting generalizability of findings. Conversely, quantitative analyses have taken on a narrowed evaluation of exiguous variables of interest. Finally, very few studies have looked at the comprehensive development process spanning from childhood into young adulthood, routinely stopping sample collection at age eighteen. Because single-parenthood has increasingly become more normative and accepted, there now exists a larger population from which to access young adults originating from single-parent structures in order to assess for any defining characteristics. The present study seeks to tap into this population.

Given the rising prominence of single-parent families and their capabilities to successfully cope despite adversity, it should follow that connections exist between family dynamics, parental attachment, resiliency, and optimistic beliefs for young adults. Further, a single-parent environment should also have far reaching influential impact after a child has left the home, particularly on college students' experiences with confidently managing college responsibilities, psychological distress, and subjective well-being. In collectively reviewing the variables of particular interest to single-parent homes, this research looks to expand upon extant literature by answering this research question: How do demographic variables, family functioning, and resilience relate to academic achievement, college self-confidence, mental health, and overall life satisfaction?

Chapter 3: Methodology

STATEMENT OF PURPOSE

This research intended to advance the understanding of resilient functioning of undergraduate students raised in single-parent households. Rooted in positive psychology and prior resiliency theory, this study worked to identify unexplored relationships between childhood experiences of single-parent family functioning, parental attachment, student resiliency, and optimism as they contributed to functioning in the college environment. Previous studies demonstrated that although children and adolescents from single-parent households face increased likelihood of encountering risk concerns unique to the family environment, they also developed resiliency traits that contribute to thriving. Accounting for the historical focus on disadvantages stemming from one-parent households, and the limited empirical examination of independently living young adults, this study hoped to contribute an improved understanding of resiliency and well-being related to the population of interest. In turn, this work also hoped to potentially highlight the strengths of an entire growing adult subsection of society.

The research investigated the relationship that family functioning and resiliency have on college self-confidence, mental health, and global life satisfaction amongst college students raised by one parent. Prior work (Ford-Gilboe et al., 2008) indicated that single-parent households can produce family resiliency strategies that positively correlate with nearly all of the aforementioned variables of interest. Subsequently, college students exposed to healthy family functioning were expected to display increased prevalence of resiliency characteristics. Expanding upon this position, the research was also anticipated to demonstrate that family functioning and student resiliency were consequently related to attitudinal beliefs along with behavioral and cognitive functioning in the college setting, operationalized by academic performance, mental health distress, college self-confidence, and life satisfaction.

After thorough evaluation of the extant literature, a key research question was developed for the purpose of this study to propel research further: How do demographic variables, family functioning, and resilience relate to general academic performance, mental health functioning,

college confidence, and overall life satisfaction? The present study utilized hierarchical regression analyses to evaluate all independent variables of interest in relation to criterion outcome variables. This form of statistical analysis provided the chance for predictive analysis of systemic observations driven by theoretically linked variables of influence. Taking into consideration prior research and theories, the following hypotheses were established for this study.

STUDY HYPOTHESES

Hypothesis 1. It was proposed that there would be positive relationships between predictor variables – specifically family functioning, parental attachment, and resiliency traits – with important college outcome variables of interest – specifically grade point average, self-confidence in college domains, mental health, and life satisfaction.

Hypothesis 2. Academic performance, as measured by cumulative grade point average, was hypothesized to be positively associated with predictor variables of interest after controlling for demographic variables of interest, such as socioeconomic status or total number of years living in a single-parent home.

Hypothesis 2a. It was expected that healthier family functioning would predict grade point average. Specifically, students reporting healthier family functioning would report better grade point averages.

Hypothesis 2b. Parental attachment was anticipated to positively predict student grade point averages. Students with stronger attachment to their parent would also have report higher grade point averages.

Hypothesis 2c. Greater prevalence of resiliency characteristics would positively predict student grade point average. Specifically, students with greater resilience would report better grade point averages.

Hypothesis 2d. Higher optimism scores would positively predict student grade point average. Students with higher dispositional optimism would have higher grade point averages.

Hypothesis 3. Students' family functioning, parental attachment, resiliency, and optimism were hypothesized to predict severity of mental health concerns after controlling for demographic variables of interest.

Hypothesis 3a. Healthy family functioning would positively predict mental health severity. Students with stronger family functioning would report lower levels of mental health concerns.

Hypothesis 3b. Parental attachment would negatively predict mental health severity. Students with higher attachment levels would report fewer mental health symptoms.

Hypothesis 3c. It was expected that greater resiliency trait prevalence would negatively predict mental health severity. Students with greater resilience would report fewer mental health concerns.

Hypothesis 3d. It was expected that greater optimism would negatively predict mental health severity. Students with higher optimism would report fewer mental health difficulties.

Hypothesis 4. College self-confidence, including domains related to academic and social confidence, were expected to be positively associated with predictor variables, after controlling for demographic variables of interest such as total duration of time that students were living in their single-parent home or the gender of their single-parent.

Hypothesis 4a. It was expected that healthier family functioning would positively predict increased overall college self-confidence. Specifically, students reporting healthier family functioning would report higher levels of college self-confidence.

Hypothesis 4b. Parental attachment was anticipated to positively predict college self-confidence. Students with stronger attachment would also have higher college self-confidence.

Hypothesis 4c. Greater prevalence of resiliency characteristics would positively predict college self-confidence. Specifically, students with greater resilience would have greater college self-confidence.

Hypothesis 4d. Higher optimism scores would positively predict college self-confidence. Students with higher dispositional optimism would have higher college self-confidence.

Hypothesis 5. After controlling for demographics, predictor variables were expected to strongly and positively predict student life satisfaction.

Hypothesis 5a. Healthy family functioning would positively predict life satisfaction. Students reporting stronger family functioning would report higher scores on life satisfaction.

Hypothesis 5b. It was expected that parental attachment would positively predict life satisfaction. Students with greater secure attachment would experience increased life satisfaction.

Hypothesis 5c. It was anticipated that greater resiliency would positively predict life satisfaction. Resilient students were expected to report increased life satisfaction.

Hypothesis 5d. Higher degrees of dispositional optimism would positively predict life satisfaction. Students with higher optimism scores would also likely have higher life satisfaction scores.

Hypothesis 6. Two interactions were hypothesized regarding the strength of the predictor variables' relationships with college self-confidence.

Hypothesis 6a. The first interaction proposed that student parental attachment would moderate the association between family functioning and perceived self-confidence in college. Stronger relationships between family functioning and college confidence would be found amongst students with higher parental attachment and would be weaker for those with lower parental attachment.

Hypothesis 6b. Optimism was also expected to moderate the strength of a positive association between resiliency and college confidence. Again, a stronger relationship between resiliency and college competence would exist amongst students reporting greater optimism than students with weaker optimistic attitudes.

Hypothesis 7. It was also hypothesized that two interactions would occur that would influence the strength of the predictor variables' relationships with life satisfaction.

Hypothesis 7a. The relationship between family functioning and life satisfaction would be moderated by students' parental attachment. Particularly, the positive relationship between family

functioning and life satisfaction would be stronger at high levels of parental attachment but weaker at lower levels of attachment.

Hypothesis 7b. Student optimism would moderate the relationship between prevalence of resiliency characteristics and reported life satisfaction. Specifically, the positive relationship between resiliency characteristics and life satisfaction would be stronger at higher levels of optimism but weaker at lower levels of optimism.

With these hypotheses in mind, the research model (Figure 1) highlights the relevant family and individual coping strength that have the potential to predict: (a) student well-being and (b) positive college outcomes when using a hierarchical multiple regression statistical model with stages used to introduce each new set of variables (hypotheses 2 to 5). This includes the final stage in the model evaluating the hypothesized moderating interactions upon the two specific outcomes of interest (hypotheses 6 and 7).

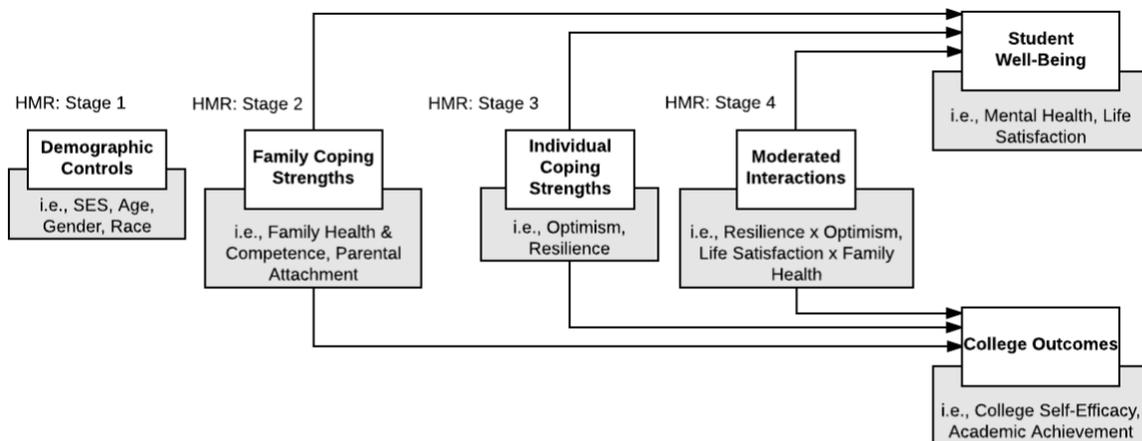


Figure 1. Hypothesis model. By using hierarchical multiple regression (HMR), the research model hypothesized that after controlling for demographic variables (Stage 1), perceived healthy family functions would positively predict student well-being, including life satisfaction, and college outcomes, including college self-efficacy (Stage 2). Additionally, it was proposed that individual coping strengths would account for additional variance and predict student well-being and college outcomes (Stage 3). Finally, the last hypotheses predicted that moderating effects exist between predictor variables of interest, such as resilience and optimism, and would account for higher or lower degrees of resilience characteristics that may have an effect on well-being and college outcomes (Stage 4).

METHODS

Approval by the Human Subjects Committee. This study followed guidelines and standards established by the Institutional Review Board for the Protection of Human Subjects at the University of Texas at Austin.

Procedure. Prospective college undergraduate participants were exclusively recruited through their automatic enrollment in the Department of Educational Psychology subject pool. Participants received course credit for their involvement in the study. Students were invited to take part if they were raised in single-parent family structures for at least two consecutive years or more before the age of 18 years. Given the structural complexities of various configurations of a “single parent family,” participants self-defined their eligibility for study inclusion based upon their own interpretation of single-parent household upbringing (Walker et al., 2008).

Students were provided an overview of study information and a website address to an online survey. Web-based data collection was used to increase overall participation, increased accessibility, and ensure anonymity. All survey measures, including demographic questionnaires, were completed by participants through the online survey from a computer of their choice during the survey access period. Completion of measurements took approximately 25 minutes.

Participants. The final sample for this study used in analyses included 312 student participants. The mean age for participants was 21.01 years old ($SD = 1.56$). The majority of students reported they identified as a woman 64.1% ($n = 200$), followed by 34.3% ($n = 107$) as men, and 1.6% ($n = 5$) as gender non-conforming. Data collected on racial identification and ethnicity indicated that 37.6% ($n = 117$) of the student sample identified as White/European American, 28.6% ($n = 89$) as Hispanic-American/ Latin@, 16.4% ($n = 51$) as Asian American or of Asian Descent, 10.3% ($n = 32$) as Black or African-American, and 7.1% ($n = 22$) as Multiracial. The vast majority of participants identified their sexual orientation as straight/heterosexual (86.8%; $n = 270$), followed by bisexual (6.1%; $n = 19$), gay (3.2%; $n = 10$), queer (1.6%; $n = 5$), lesbian (1.3%; $n = 4$), and asexual (1.0%; $n = 3$). Most students indicated they were of senior class standing (58.7%; $n = 183$), followed by juniors (20.5%, $n = 64$), sophomores (14.1%; $n = 44$), first

year students (5.1%; $n = 16$), and then students who had been in school for longer than the traditional four years (1.6%; $n = 5$). Data collected indicated the mean GPA was 3.15 ($SD = .50$). Using an SES ladder to provide a better indicator of where participants believe they stand in relation to others as either being better off (10) or worse off (1) on a self-report 10-point scale, the sample mean was 5.62 ($SD = 1.75$).

Participants were able to report on the number of years and months that they had spent in a single-parent household. Data indicated the mean was 11.35 years ($SD = 5.82$), with a minimum of 2 and a maximum of 24 years for the sample. Approximately 31% ($n = 98$) of participants spent 5 to 9 years and 30% ($n = 92$) of participants spent 16 to 20 years in a single-parent household. 78.2% ($n = 244$) of participants reported their single-parent household was the result of divorce or separation between two parents, 10.3% ($n = 32$) because of the death of a secondary parent, 7.4% ($n = 23$) because their primary custodial parent never married or partnered to begin with, and 4.2% ($n = 13$) reported “Other” causes. Most participants (52.6%; $n = 164$) reported their single-mother had not repartnered. Most students were considered the only or oldest children of their families (46.1%; $n = 143$). Participant perception of their parent’s socioeconomic class indicated that 44.4% ($n = 138$) of mothers were believed to be middle class, 33.8% ($n = 105$) working class, 17.4% ($n = 54$) upper middle class, and 4.5% ($n = 14$) as upper class or “Other.” Finally, reported highest levels of education suggested that most mothers had completed college (33%; $n = 102$), followed by high school/GED (26.9%; $n = 83$), advanced graduate level education (17.2%; $n = 53$), some college (10%; $n = 31$), less than 12 years of education (7.1%; $n = 22$), and finally technical/vocational degrees or associates degree (5.8%; $n = 18$).

Measures. Measures are included in the Appendix and include the following scales. All surveys’ items were computed and averaged as required by respective scoring guides. Higher scores denoted higher levels of the measured construct, except for Self-Reported Family Inventory: Version II (SFRI-II; Beavers & Hampden, 1990) in which lower scores indicated reflected greater global family competence.

Self-Report Family Inventory II (SFRI-II; Beavers & Hampson, 1990).

Assessing family dynamics exists as a foundational cornerstone of research, focused on establishing the determinant role family functioning plays for all family members. Measures oftentimes offer two distinct means of evaluating functioning: global family functioning that examines the entire structure or dyadic interactions, typically focused on parental attachment or couples' interactions (Currie, 2009). Although the broad domain of family functioning could incorporate numerous indicators, most psychometrically robust measures incorporate core constructs of parental warmth, family communication, and family stability, in addition to evaluation of physical and mental health (Currie, 2009). The two measures selected to assess family dynamic interactions for this study met these criteria.

The SFRI-II is a 36-item Likert-type measure evaluating family functioning in five domains: Health/Competence, Conflict, Cohesion, Directive Leadership, and Expressiveness. The measure can be completed by all members of a family ages 11 and older to provide a multi-perspective appraisal for clinical intervention or research use, based upon the Beavers Systems Model, a theoretical model of family systems functioning. Respondents are asked to rate each item on five-point scale, with (1) indicating "fits our family very well" and (5) "does not fit our family well". Example items include "*We all have a say in family plans*" and "*Our family members touch and hug each other.*" Lower scores represent greater family competence and functioning on all scales. This study utilized the Health/Competence subscale and mean scores were computed for the total subscale score, and ranged from 1 to 5.

Beavers & Hampson (1990) reported a Cronbach's alpha of .94, with coefficients for the entire measure ranging from .84 to .88. Test-retest reliability coefficients are above .85 (Beavers & Hampson, 1990). The SFRI-II has shown strong convergent validity with other measures, including the *Family Assessment Device* (Epstein, Baldwin & Bishop, 1983) and the *Family Adaptability and Cohesion Evaluation Scales [FACES II & III]* (Hampson, Hulgus, & Beavers, 1991). The correlations between the SFRI-II and the FACES II and III ranged from $r=.41$ to $.54$ (Groenenberg, Sharma, Green & Fleming, 2013). Recent research has indicated that out of the

many family assessment scales, the SFRI-II has formidable consistent reliability in measuring inner-city African American and Latino adult populations on the majority of its subscales (Groenenberg et al., 2013). Reliability estimates for this study revealed a Cronbach's alpha of .92.

Inventory of Parent and Peer Attachment (IPPA; Armsden & Greenberg, 1987).

The IPPA revised is a self-report questionnaire including three different scales providing attachment scores for adolescents' and young adults' (ages 16 - 21) attachment with Mothers, Fathers, and Peers. Each scale consists of 25 statements (i.e. "My father understands me") evaluated on a five-point Likert-scale of (1) "almost never or never true" to (5) "almost always or always true", with reverse-scoring for negatively worded items. Higher scores indicate greater attachment.

Based upon attachment theory, three dimensions are incorporated in each scale: degree of mutual trust; quality of communication; and extent of anger and alienation. Armsden & Greenberg (1987) reported 0.93 reliability for parent attachment following three-week test-retest. The revised version's three scales of Mother, Father, and Peer attachment internal reliabilities (Cronbach's α) range from 0.87 to 0.92. During measure development, family functioning scales such as *The Family Environment Scale* were found to have moderate to high convergent validity ($r = 0.56$) along dimensions such as positive family coping and cohesion (Armsden & Greenberg, 1987). For the purpose of this study, participants were only provided the Mother and Father attachment scales. Participants reported on their relationships with their primary custodial parent (the single-parent). The IPPA-R subscale for participant's self-reported attachment to their mother was used for the purposes of this study, in which higher scores indicated greater attachment to their mother. Items were summed to create total sum scores for each participant, and ranged from 32 to 125, with an internal consistency of $\alpha = .96$.

The Resilience Scale for Adults (RSA; Friborg et al., 2003; Friborg et al., 2005).

The RSA is a 33-item scale measuring protective resources that foster resilience in adults as a multidimensional construct. Respondents answer items on a 5-point differential scale, in which

item functions as a stem for respondents to select between two polarized responses (e.g., Stem: “My personal problems”; Response options: “are unsolvable” or “I know how to solve.”) Although the original RSA contained five subscales measured with 37-items, the revised version contains six dimensions: perception of self, planned future, social competence, structured style, family cohesion, and social resources. These six subscales align with three core factors of resilience as identified by early resiliency researchers and theorists: personal/ dispositional attributes, family support, and external support systems (Garmezy, 1993; Werner, 1993.) Although originally developed in Norway (Friborg et al., 2003) the RSA has been cross-culturally validated in countries including Belgium (Hjemdal et al., 2011), Turkey (Basim & Cetin, 2011), and in Iran (Jowkar et al., 2010). The RSA is considered one of the most robust assessments of resiliency from a multidimensional perspective based upon exploratory and confirmatory factor analysis (Prince-Embury, Saklofske, & Vesely, 2015).

Previous estimates of reliability reported strong internal consistency (Chronbach’s α) for the originally developed RSA, with coefficients over 0.83 for four of the five dimensions (Hjemdal et al., 2006) and the revised version alpha coefficients greater than 0.70 for all six subscales (Hjemdal et al., 2006). In a recent study evaluating resilience prevalence in university students across two time points, researchers reported an adequate to high (ranging $\alpha = .76$ to $\alpha = .87$) internal consistency (Dawson & Pooley, 2013). Test-retest correlation coefficients over four months to assess stability with an adult outpatient control sample ranged from $r = 0.69$ to 0.84 (Friborg et al., 2003). Adequate convergent and discriminate validity has been tested with the RSA with positive correlations with all subscales of the Sense of Coherence Scale (SOC; Antonovsky, 1993) (correlations ranged from $r = 0.29$ to 0.75 , $p < 0.01$) with the ‘*personal competence*’ subscales from both respective measures correlating highest ($r = 0.75$, $p < 0.01$) (Friborg, et al., 2003). Similarly, discriminate validity was demonstrated with negative correlations with the Hopkins Symptom Check List-25 (HSCL; Parloff, Kelman & Frank, 1954) (subscale correlations ranged from $r = -0.19$ to -0.61 , all $p < 0.01$) (Friborg, et al., 2003). Scores on this scale were computed by creating

a total sum for all items, and ranged from 66 to 162. Cronbach's alpha for this measure was $\alpha = .92$.

Life Orientation Test-Revised (LOT-R; Scheier, Carver & Bridges, 1994).

The LOT-R is a 10-item measure used to assess individual differences in dispositional generalized optimism, including future-focused and positive expectations. Maintaining the theoretical approach that optimism and pessimism exist on a continuum, there are no "cut-offs" for the measure. Participants respond on a five-point Likert scale of agreement (1 = "I agree a lot" to 5 = "I disagree a lot") on items such as "I hardly ever expect things to go my way." Both the original (Scheier & Carver, 1985) and revised version (Scheier et al., 1994) were validated on large university student samples, with the LOT-R Chronbach α coefficient reported as 0.78, test-retest reliability was $r = 0.68$ at 4 weeks, $r = 0.60$ for 12 weeks, $r = 0.56$ for 24 weeks, and $r = 0.79$ for 28 weeks (Schier et al., 1994). On a previous study investigating maternal optimism in single-mother African American families (Taylor et al., 2010) reliability was reported as $\alpha = 0.69$. Amongst all the assessments of hope and optimism, the LOT-R is one of the most popular scales because of its' broad appraisal of dispositional optimism as a personality trait versus temporary state (Bryant & Harrison, 2015). A total sum score was computed for each participant and scores for this sample ranged from 0 to 24. Cronbach's alpha was $\alpha = .84$.

Personal Evaluation Inventory (PEI; Shrauger & Schohn, 1995).

The PEI is a self-report questionnaire to assess perceived confidence. Developed around common domains of skill related to college student experiences, six specific subscales are assessed: Academic, Appearance, Athletics, Romantic, Social and Speaking. Further, a subscale of general confidence and a subscale to assess mood state at time of testing is also included, resulting in a total of 54 items on a four-point scale from strongly agree (4) to strongly disagree (1). Higher scores indicate grater perceived confidence within each domain and global sense of competence, such as "When I take a new course, I am usually sure that I will end up in the top 25% of the class [Academic subscale]." For the purpose of this study, the Combined subscale was

used, formed by 40-items containing the six domains of importance to college students – self-confidence in academic, athletics, romantic, social, and speaking abilities. Subscale scores rely upon total sums of relevant items, with higher scores indicating greater self-confidence holistically across all six domains.

The PEI demonstrated adequate psychometric properties, including adequate to strong internal consistency coefficients for all subscales ($\alpha = 0.71$ to 0.90) (Shrauger & Schohn, 1995) and test-retest reliabilities ranging from 0.73 to 0.90 on all subscales aside from mood, with a combined content score of 0.87 after a one-month retest (Shrauger & Schohn, 1995). Shrauger and Schohn (1995) relied upon a series of previously evaluated personality, mood and self-esteem measures to establish convergent and discriminant validity, including the NEO Personality Inventory Scales (NEO-PI; Costa & McCrae, 1992) the LOT (Scheier & Carver, 1985) and Beck Hopelessness Scale (BHS; Beck, Weissman, Lester, & Trexler, 1974). Intercorrelations between the various content specific scores and PEI subscale scores were consistently strong ($r = <0.50$) for most subscales for convergence. Negative correlations were found with Depression ($r = -0.52$), Anxiety ($r = -0.50$), and Hopelessness ($r = -0.49$) (Shrauger & Schohn, 1995). Similar studies have found strong divergent validity in construct areas of those listed above in addition to measures of loneliness, feelings of shame, and procrastination (Stankov et al., 2015). The PEI's ability to measure specific facets of confidence and competence in various college skill domains, strong psychometrics, and ability to provide a general assessment of the confidence construct contributes to its' being regarded as a strong cognitive confidence measure (Stankov et al., 2015). Scores ranged from 43 to 155 for the Combined self-confidence subscale. Cronbach's alpha for the study sample was $\alpha = .94$ for the Combined Subscale.

Mental Health Inventory Five-Item (MHI-5; Ware & Sherbourne, 1992).

Considered to be a valid brief screening tool to detect depressive and anxiety symptoms in both general and clinical population, the MHI-5 consists of five-items derived as a subscale derived from an original 36-item Short-Form Health Survey Questionnaire (Ware & Sherbourne, 1992).

Three of the five questions are directed at detecting depressive symptoms and the remaining two questions tease out anxiety symptoms, particularly panic symptom concerns, experienced over the last month. Answers are provided on a six-point scale ranging from 6 = “*all of the time*” to 1 = “*none of the time*.” Scores are summed, after reverse scoring items three and five, and transformed from raw scores into a score on a scale from zero to 100, with higher scores indicating healthier psychological functioning. In a study evaluating the reliability of the MHI-5 with a large community population ($n = 7076$), ages 16 to 64 in the Netherlands, reliability (Cronbach’s α) in the sample was 0.83 (Cuijpers, Smits, Donker, ten Have, & de Graaf, 2009). Additionally, the MHI-5 demonstrated concurrent validity in its ability to detect a range of major depressive disorders including major depression, dysthymia, and bipolar disorder ($r = 0.93, 0.91, \text{ and } 0.88$ respectively) along with generalized anxiety disorder (0.90), panic disorder (0.87), and obsessive-compulsive disorder (0.93) (Cuijpers et al., 2009). As clinicians and researchers move towards lessening respondent burden, the MHI-5 – which takes less than a minute to complete – possesses strong detection capabilities of mental health concerns for both general and clinical populations. Cronbach’s alpha indicated an adequate internal reliability estimate of $\alpha = .76$.

Satisfaction with Life Scale (SWLS; Diener, Emmons, Larsen, & Griffin, 1985).

Designed to assess subjective well-being across a wide range of ages, the SWLS was one of the first psychometrically validated multi-item measures of its kind (Diener et al., 1985) that has had wide reaching impact and utilization. With only five items, the scale does not evaluate specific satisfaction and subjective well-being within domains, such as health or relationships, but instead calls upon respondents to reflect upon their satisfaction from a holistic orientation (Pavot & Diener, 2009). Respondents rate their agreement with each item on a 7-point Likert-type response scale ranging from 1 = “*strongly disagree*” to 7 = “*strongly agree*”. A total score can be obtained by summing the responses to all five items. Scores can be interpreted in terms of relative life satisfaction by comparing individual scores with scores from normative samples, but also absolute score cut off as well (Diener et al., 1985). Aside from Diener and colleagues original

study in survey creation (1985), other studies have utilized the SWLS to create normative data samples of American college students (Pavot & Diener, 1993).

During original survey evaluation, the SWLS demonstrated strong internal reliability with a reported coefficient alpha of 0.87 and a two-month test-retest stability coefficient of 0.82 (Diener et al., 1985). Similarly, in a comprehensive review of psychometric properties of the SWLS and through compiling validity research over the first decade of its use, with strong convergent validity with scales such as the Fordyce Global Scale ($r = 0.55$ to $r = 0.82$) and strong discriminate validity with measures as such as the Beck Depression Inventory ($r = -0.72$) (Pavot & Diener, 2009) in addition to strong convergent validity ($r = 0.42$) between self-reports and informant reports on life satisfaction (Diener, Inglehart, & Tay, 2013). Because the SWLS provides a brief approach to its global perceptions of satisfaction, and its established robust psychometric properties, the SWLS provides a strong foundation for evaluating the complicated construct of subjective well-being and life satisfaction. For this study, total summed scores were computed for the five items, with higher scores indicating greater satisfaction with life. Participants' scores ranged from 5 to 35. Cronbach's alpha for this sample was .91.

Demographic Questionnaire.

The demographic questionnaire developed for this study obtained information for the student regarding participant's assigned sex at birth, gender identity, age, race/ethnicity, perceived socioeconomic standing, academic class standing, self-reported cumulative grade point average, and major. Students were also asked to report on demographic information pertaining to their parent regarding gender of parent, age, race/ethnicity, perceived income bracket, and current employment status. Reports on family structure information included number of years spent in a single-parent arrangement, number of additional siblings, interactions with non-custodial parent, and presences of cohabitating or re-married partner of parent. These demographic characteristics were statistically controlled for as needed in subsequent analyses related to criterion variables.

Chapter 4: Results

ASSUMPTION TESTING

Pearson product-moment correlations and hierarchical multiple regression models were conducted for the primary analyses of this study. Before proceeding with the data analyses, all variables were screened for possible statistical assumption violations, as well as for missing values and outliers, with IBM SPSS. Descriptive statistics were conducted for relevant variables, including demographic information (i.e., age, gender, race/ethnicity) and study measures, to assess means, standard deviations, skewness, and kurtosis. Relevant variables were checked for normal distribution, linearity between variables, and homoscedasticity. For hierarchical multiple regression, the absence of multicollinearity was reviewed along with the normality, linearity, and homoscedasticity. Cronbach's alpha test of reliability was conducted for each scale for internal consistency evaluation and is reported in the methods section. Overall, the scales exhibited good reliability.

Study records were evaluated to identify any participant data that would require removal based upon incomplete study measures or failing to meet study inclusion requirements (i.e., participant reported they had *not* lived in single parent home). In total, nineteen original participants were removed from ongoing analysis. For remaining participant records, additional missing values discovered in the study scales were considered missing completely at random and were subsequently imputed with values using the mean substitution procedure.

The data was assessed for univariate outliers using visual inspection of stem-and-leaf diagrams and box plots for all scale scores. Z-scores were also assessed for possible outliers amongst demographic variables. This revealed outlier records based upon participant's self-report of age (n=6) and total years spent in single parent homes (n=6). Z-score outliers were defined by cases with a value above an absolute value of 3 (Stevens, 2007). Multivariate outliers were screened by computing Mahalanobis distance for each case of the eleven primary continuous variables; two cases were identified as potential outliers, with values four standard deviations over the mean and exceeding the suggested cut off of 45.315 critical value for the Mahalanobis distance

with an alpha level of $p < .001$ (Meyers, Gamst & Guarino, 2013). Identified cases were critically evaluated and three cases related to self-reported age were removed, all six cases related to time spent in single parent homes, and both multivariate outliers were removed. Subsequently, a total of 11 participant reports were removed from final dataset.

Normality of variables were assessed using a variety of methods, which included visual inspection of the data using histograms, normal Q-Q plots, and thorough evaluation of skewness and kurtosis descriptive statistics. Visually representative data (i.e. histograms and normal Q-Q plots) revealed a reasonable normal distribution for most variables. To meet normality assumptions of hierarchical multiple regression, a Shapiro-Wilk analysis of dependent variables was performed and revealed moderate negative skewness for Student GPA, Mental Health, and Life Satisfaction. A square root transformation was used to create a more normal distribution and to better meet the assumptions of parametric techniques, but significantly greater normality was not achieved when attempting transformation for these variables. Because the current study had a sample size larger than 200 participants, skewness was expected to minimally impact analyses (Tabachnick & Fidell, 2013), and non-transformed variables were acceptable.

PRELIMINARY DATA ANALYSES

Preliminary comparison tests for variables were run to investigate possible key differences amongst participants by demographic concerns. Demographic variables were assessed for significant correlation to dependent variables of interest. The originating circumstances for a single-mother household forming (i.e., divorce) or participants' sexual orientation were not significantly related to any variables. However, there were a number of demographic variables that were significantly related to the dependent variables; a participant's perceived socioeconomic standing (i.e., SES ladder) was positively associated with all dependent variables, and their age was positively associated with all variables except for GPA. Simply put, the older that participants were and the better well-off they perceived themselves to be in comparison with others, the greater likelihood they had higher scores in variables of interest such as self-confidence in college.

Similarly, higher levels of educational attainment for student participants (i.e., senior or junior) was uniquely positively correlated with the dependent variables related to self-confidence ($r = .12, p < .05$) and life satisfaction ($r = .16, p < .01$). This also was the case for single-mother's educational attainment, with positive relationships between self-confidence ($r = .13, p < .05$) and life satisfaction ($r = .12, p < .05$) (i.e., higher levels of a mother's education were connected with improved student life satisfaction). Because both parental and individual educational attainment are closely associated with gains in social status, SES status was exclusively used as a control variable in analyses. Further, the total number of years spent in a single-mother household was correlated with participants' GPA ($r = -.14, p < .05$), with higher GPAs being related to fewer years living in a single-mother household.

Finally, participant race and gender were shown to have significant variation pertaining to GPA when using Scheffe's procedure. Subsequently, the duration of time residing in a single-mother household, socioeconomic status, age, race, and gender identities were all controlled for when running the relevant hierarchical regression analyses to explain the variance in each outcome variable of interest.

PRIMARY ANALYSIS

In efforts to address the hypotheses of this study, Pearson Product correlations were performed to assess relationship of predictor and outcome variables of interest. Further, four separate hierarchical multiple regressions were utilized to establish the predictive ability of the independent variables in relation to the dependent variables of interest, which included cumulative student grade point average, mental health functioning, general self-confidence in common college domains of importance, and overall life satisfaction. Stage one of the regression incorporated control variables of interest identified in the preliminary analysis. Stages two and three incorporated measured variables of interest including family functioning, resiliency, and optimism to likely predict dependent variables. Stage four specifically tested Hypotheses 6 and 7, involving an interaction term between optimism and resiliency to test for moderation of relationship strength

between these interaction terms and college self-confidence and life satisfaction. In preparation for the analysis and in accord with the recommendations of Aiken and West (1991) and Cohen et al. (2003), the predictor variables were centered. Centering of predictor variables is suggested by Aiken and West (1991) to better “move the zero value to the mean (the center) of the distribution for both the predictor and moderator variables” (Meyers et al., 2013, p.440). This does not change the relationship amongst variables but helps with model interpretation so that all predictor variables have a shared reference zero value.

Table 1
Correlations Between Student Age, SES, GPA, College Domain Self-Confidence, Mental Health, Life Satisfaction, Family Health, Attachment to Mother, Resiliency, and Optimism (N = 312)

| Variable | M | SD | 1 | 2 | 3 | 4 | 5 | 6 | 7 | 8 | 9 |
|----------------------------|--------|-------|-------|--------|-------|--------|--------|--------|--------|-------|-------|
| 1. Age | 21.02 | 1.56 | | | | | | | | | |
| 2. SES | 5.62 | 1.75 | .07 | | | | | | | | |
| 3. Student GPA | 3.15 | 0.50 | -.07 | .19** | | | | | | | |
| 4. College Self-Confidence | 105.83 | 19.40 | .14* | .23** | .16** | | | | | | |
| 5. Mental Health | 62.01 | 20.10 | .12* | .18** | .09 | .62** | | | | | |
| 6. Life Satisfaction | 22.98 | 6.77 | .16** | .34** | .16** | .63** | .58** | | | | |
| 7. Family Health | 2.53 | 0.77 | .03 | -.29** | -.08 | -.27** | -.26** | -.39** | | | |
| 8. Attachment | 95.17 | 21.57 | .02 | .27** | .12* | .34** | .30** | .47** | -.73** | | |
| 9. Resiliency | 122.05 | 19.73 | .04 | .26** | .20** | .68** | .58** | .66** | -.60** | .61** | |
| 10. Optimism | 13.89 | 5.21 | .10 | .14* | .16** | .62** | .52** | .56** | -.33** | .40** | .66** |

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

Note. Age = participant reported age at last birthday; SES = Scale of Subjective Status; Student GPA = participant reported cumulative grade point average; College Self-Confidence = Personal Evaluation Inventory; Mental Health = Mental Health Inventory-5; Life Satisfaction = Satisfaction with Life Scale; Family Health = Self-Reported Family Inventory: Version II - Family health/competence subscale; Attachment = Inventory of Parent and Peer Attachment-Revised: Mother subscale; Resiliency = Resilience Scale for Adults; Optimism = Life Orientation Scale-Revised.

Hypothesis 1. It was proposed that there would be positive relationships between predictor variables – specifically family functioning, parental attachment, and resiliency traits – with important college outcome variables of interest – specifically GPA, self-confidence in college domains, mental health, and life satisfaction. To first assess the base hypotheses that attachment to mothers, resiliency traits, and optimism traits had a *positive correlation* with participant GPA,

college domain related self-confidence, mental health, and life satisfaction, Pearson Product correlations were conducted. Similarly, due to scale construction with lower scores indicating greater family health and competency, family health was expected to have a *negative correlation* with GPA, self-confidence, mental health, and life satisfaction.

As displayed in Table 1, attachment, resiliency, and optimism were all positively correlated with GPA, college self-confidence, mental health functioning, and life satisfaction. Further, family health was negatively correlated with college self-confidence, mental health functioning, and life satisfaction indicating that fewer occurrences of family difficulties was associated to increased self-confidence, resiliency, and optimism factors. However, family health was not significantly correlated with student grades. Hypothesis 1 was mostly supported.

Because prior Pearson product-moment correlations between parental attachment to mothers and family health revealed a significant correlation above 0.7 ($r = -.73$), they were not both included in the regression models to avoid multicollinearity and to uphold the independence of variables testing assumption for hierarchical multiple regression (Meyers, Gamst & Guarino, 2013). Following family systems theories that indicate dyadic parent-child attachment styles contribute towards the well-being of the whole family structure (Mikulincer & Shaver, 2012) and that family functioning can promote growth for individuals within the system (Walsh, 2003), this study chose family health over attachment in testing the remaining hypotheses.

Hypotheses 2, 3, 4, and 5 proposed that variables associated with family health, resilience, and optimism would account for a significant portion of variability in the prediction of GPA, self-confidence, mental health, and life satisfaction respectively when taking into account demographic correlates of interest such as age. To assess these hypotheses, a series of hierarchical multiple regression analyses were performed for each outcome variable of interest.

Hypothesis 2. A three-stage hierarchical regression analysis was conducted to examine the dependent outcome variable of participant GPA. Following preliminary testing discussed above, socioeconomic status (SES), the number of years spent in a single parent household (Yrs with Single Mother), the participant's reported race coded as either white or non-white (Race), and

participant’s gender coded as identifying as a woman or another gender (Gender) were controlled for in the first stage. Family health was entered at stage two, and resiliency and optimism at stage three. Variables were entered in this order to uphold a chronological assumption that healthy family functioning – otherwise thought of as family system resiliency dynamics – would be present earlier in life and lay the groundwork for modeled behavior and attitudes. Following this assumption, individual resiliency factors develop later and throughout life in response to adaption to ongoing life stressors, and likely influenced by family experiences in childhood. Results for the hierarchical regression statistics are shown in Table 2.

Table 2
Hierarchical Multiple Regression Analyses for Variables Predicting GPA

| Stage and predictors | ΔR^2 | β | <i>B</i> | <i>SE B</i> |
|------------------------|--------------|---------|----------|-------------|
| Stage 1 | .10 | | | |
| SES | | .15** | .04 | .02 |
| Yrs with Single Mother | | -.10 | -.04 | .03 |
| Race | | .15** | .16 | .06 |
| Gender | | .16** | .16 | .06 |
| Stage 2 | .00 | | | |
| Family Health | | -.05 | -.03 | .04 |
| Stage 3 | .03 | | | |
| Resilience | | .17 | .00 | .00 |
| Optimism | | .06 | .00 | .00 |

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

Note. Yrs with Single Mother = Total number of years having lived in a single-mother household; Race = White coded as 1 and Non-white coded as 0 indicating participant racial identity; Gender = Women coded as 1 and Non-women coded as 0 as indicating participant gender identity

Except for time spent in a single mother house, all control demographics entered on the first block significantly contributed to the regression model, $F(4, 293) = 8.08$, $p < .001$ and accounted for 9.9% ($R^2 = .099$, Adjusted $R^2 = .087$) of the variation in GPA. In particular, students that were white, women, and/or reported a higher socioeconomic status were also likely to have higher grades overall. Introducing the family health variable in the second block did not provide

additional explanation in the model and did not produce a statistically significant change in R^2 [$F(5, 292) = 6.58, R^2 = .101, \text{Adjusted } R^2 = .086$], indicating healthy family functioning had no significant impact on GPA. Finally, the addition of resiliency variables in block three provided a 2.9% ($R^2 = .130, \text{Adjusted } R^2 = .109$) contribution to variation in GPA with a significant R^2 change, $F(7, 290) = 6.21, p < .01$. However, despite the significant change, resilience and optimism characteristics did not independently significantly contribute towards predicting academic performance. Similar to family health, increases in resiliency and optimism factors seemed to have no bearing on higher grade attainment. Ultimately, with all seven variables taken together, they only explained 13% of the variance observed in student GPAs, with no significant influence stemming from the predictor variables of interest of family and individual resiliency characteristics. Subsequently, Hypothesis 2 was not supported.

Hypothesis 3. The current work proposed family health, resiliency, and optimism scores would account for a significant portion of variability in the prediction of overall mental health functioning, after taking into consideration important demographic impacts. Resiliency and optimism attitudes were expected to be strong positive predictors of mental health. Family health was expected to have a strong negative prediction of mental health functioning. A three-stage hierarchical multiple linear regression analysis was used to predict the mental health functioning self-reported by participants.

Preliminary testing suggested only age and SES were required in the first block as controls, and were entered simultaneously; in the second block, the perceived degree of healthy family functioning was entered as a predictor; in the third block, participant degree of resiliency and optimism were entered simultaneously. Results of the hierarchical regression analysis are shown in Table 3.

Table 3
*Hierarchical Multiple Regression Analyses for Variables
 Predicting Mental Health*

| Stage and predictors | ΔR^2 | β | <i>B</i> | <i>SE B</i> |
|----------------------|--------------|---------|----------|-------------|
| Stage 1 | .05 | | | |
| Age | | .11 | 1.38 | .73 |
| SES | | .18** | 2.03 | .65 |
| Stage 2 | .05 | | | |
| Family Health | | -.24*** | -6.21 | 1.51 |
| Stage 3 | .29 | | | |
| Resilience | | .50*** | .51 | .07 |
| Optimism | | .21*** | .80 | .24 |

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

The control demographics, entered on the first block, contributed significantly to the regression model, $F(2, 299) = 7.11, p < .001$ and accounted for 4.5% of the variation in mental health. Specifically, greater socioeconomic standing predicted healthier psychological functioning. When the family health variable was added on the second block, the prediction model was statistically significant, $F(3, 298) = 10.63, p < .001, R^2 = .097, \text{Adjusted } R^2 = .088$. Family health functioning explained an additional 5.1% of the variation with a significant change in R^2 . In the second block, growing up in a single mother home with healthy family dynamics significantly predicted ($\beta = -.24$) improved mental health functioning for students.

Finally, the addition of individual resiliency variables in block three substantially increased the predictive power of the model for mental health with a 29.0% significant R^2 change, $F(5, 296) = 37.35, p < .001, R^2 = .387, \text{Adjusted } R^2 = .376$. Together the five independent variables accounted for 38.7% ($R^2 = .387$) of the variance in mental health. When all five independent variables were included in block three of the model, student age and SES were not significant predictors of mental health functioning. The strongest predictor of the set was resilience ($\beta = .50$), which predicted approximately 31% of the variation ($sr^2 = .311$), followed by optimism and then family health.

Generally, with all other variables in the analysis statistically controlled, those with greater resiliency factors, who are more optimistic, and who were raised in a family with healthy interactions reported fewer psychological mood concerns, regardless of their age or socioeconomic background. Hypothesis 3 was supported.

Hypothesis 4. The next study hypothesis proposed that family dynamics and resiliency variables would account for a significant portion of variability in the prediction of self-confidence in college specific domains – including academics and social interactions – after accounting for meaningful demographic influences. Family and individual resiliency factors were expected to be strong predictors of college self-confidence. A three-stage hierarchical multiple regression analysis was conducted to explore this hypothesis, anticipating that the model would predict students' global self-confidence in various behaviors and attitudes foundational to the college setting.

Similar to the previous model, control variables for the first block included age and socioeconomic status. Both demographic control variables were entered simultaneously. Identical to the previous hypothesis regression model, family health was entered in the second block; in the third block, resilience and optimism were entered simultaneously. The hierarchical regression analysis results are shown in Table 4.

Regression analysis revealed that stage one with control demographics contributed significantly to the regression model, $F(2, 300) = 11.28, p < .001$ and accounted for 7.0% of the variation in college self-confidence. Again, socioeconomic status contributed significant variance suggesting that greater socioeconomic standing predicted increased college self-confidence. Introducing family health into the prediction model explained an additional 4.6% variation and had a statistically significant R^2 change, $F(3, 299) = 13.09, p < .001, R^2 = .116, \text{Adjusted } R^2 = .107$. In the second block, student experiences within healthy family systems ($\beta = -.22$) predicted increased self-confidence in a collection of college behaviors and attitudes.

Table 4
*Hierarchical Multiple Regression Analyses for College Self-Confidence and Life Satisfaction
Including Testing Model Interactions*

| Stage and predictors | Self-Confidence | | | | Life Satisfaction | | | |
|-----------------------|-----------------|---------|----------|-------------|-------------------|---------|----------|-------------|
| | ΔR^2 | β | <i>B</i> | <i>SE B</i> | ΔR^2 | β | <i>B</i> | <i>SE B</i> |
| Stage 1 | .07 | | | | .14 | | | |
| Age | | .13* | 1.60 | .70 | | .14* | .60 | .23 |
| SES | | .22*** | 2.47 | .62 | | .33*** | 1.29 | .21 |
| Stage 2 | .05 | | | | .10 | | | |
| Family Health | | -.23*** | -5.68 | 1.44 | | -.33*** | -2.89 | .47 |
| Stage 3 | .44 | | | | .28 | | | |
| Resilience | | .60*** | .58 | .06 | | .48*** | .17 | .02 |
| Optimism | | .28*** | 1.03 | .20 | | .21*** | .27 | .07 |
| Stage 4 | .00 | | | | .00 | | | |
| Resilience x Optimism | | -.03 | -.01 | .01 | | -.03 | -.00 | .00 |

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

Finally, the addition of resiliency variables in stage three contributed an extra 43.6% to variance in college self-confidence and considerably increased the predictive power with a significant R^2 change, $F(5, 297) = 73.19, p < .001$. When all five independent variables were included in block three of the regression model, both control variables entered during stage one remained significant contributors ($p < .05$) to variance in predicting self-confidence, suggesting socioeconomic status and age still play a meaningful role in college self-confidence. The most powerful predictor of self-confidence in college domains was participant resilience ($\beta = .59$), which predicted approximately 37% ($sr^2 = .368$) of self-confidence, followed by student's optimism ($sr^2 = .204$) and then healthy family dynamics ($sr^2 = .159$). Together the five independent variables accounted for 55.2% ($R^2 = .552$, Adjusted $R^2 = .544$) of the variance in observed in the predictive model for self-confidence. Generally, student self-confidence in college domains was reported amongst participants with more resiliency, optimistic, and health family interaction factors. Subsequently, the model suggests significant support for Hypothesis 4.

Hypothesis 5. To address the hypothesis that healthy family systems and resiliency factors would account for a significant portion of variability in the prediction of life satisfaction, another three-block regression model was utilized, with life satisfaction the criterion variable of interest.

Like the prior model, age and socioeconomic status were entered simultaneously in the first block as control variables; in the second block; family health was entered; and in the third block, resiliency and optimism were simultaneously entered. Results of the hierarchical regression model are shown in Table 3.

Regression analysis revealed that stage one with control demographics contributed significantly to the regression model, $F(2, 300) = 23.84, p < .001$ and accounted for 13.7% ($R^2 = .137$, Adjusted $R^2 = .131$) of the variation in life satisfaction. Continuing the pattern identified in prior models, increased socioeconomic status was shown to significantly account for the variance in predicting greater life satisfaction. Stage two had a statistically significant R^2 change of 9.8%, in which inclusion of family health explained additional variance in the model, $F(3, 299) = 30.60, p < .001, R^2 = .235$, Adjusted $R^2 = .227$. A background involving healthier family functioning ($\beta = -.33$) in childhood significantly predicted greater current life-satisfaction amongst participants.

Finally, the addition of resiliency variables in stage three provided a contribution to variation in life satisfaction with a significant R^2 change of 27.5%, $F(5, 297) = 61.68, p < .001$. The most important predictor of life satisfaction was resilience ($\beta = .48$) which predicted approximately 30% ($sr^2 = .301$). Together the five independent variables accounted for 51% ($R^2 = .509$, Adjusted $R^2 = .501$) of the variance in life satisfaction. The hierarchical analysis demonstrated that after statistically controlling for age, SES, and family of origin dynamics, heightened degrees of optimism and resiliency factors could meaningfully predict a student's life satisfaction over and above what the other three variables could offer. The model showed significant support for Hypothesis 5.

Hypothesis 6. This study originally hypothesized two interactions related to college self-confidence. Specifically, that the relationship between family functioning and participant self-confidence in college domains would be moderated by their parental attachment to their mothers. Second, that the relationship between resiliency and self-confidence would be moderated by optimism factors. A four-stage hierarchical multiple regression was run to address the resiliency

and optimism interaction presented in Table 4. However, because of the high intercorrelation between family health and attachment, regression analyses were not conducted to avoid violation of the independence assumption. Subsequently, a portion of the hypothesis was unable to be tested.

Scores for resilience and optimism, as well as their interaction, were used as predictors of self-confidence. In preparation for the analysis and in accord with the recommendations of Aiken and West (1991) and Cohen et al. (2003), the two predictors were centered. Similar to Hypothesis 4, the same control variables were entered at stage one, family health entered at stage two, mean centered variables for resiliency and optimism were entered at stage three, and the interaction term (resilience x optimism) entered at stage four.

Although resilience and optimism were found to provide additional significant contribution towards predicting college self-confidence in block three of the model during testing of Hypothesis 4, this pattern of prediction was not observed in adding the interaction term to this hypothesis model in block four. The resilience x optimism interaction did not significantly predict college self-confidence ($B = -.01$, $\beta = -.03$, $SE = .01$, $p = .52$) and the interaction did not provide a significant independent explanation of variance ($sr^2 = -.03$) in predicting self-confidence over and above the other five predictive variables. This data suggests that differing degrees of resilience does not impact self-confidence amongst students with high or low levels of optimism, with the overall model explaining 55% of the variance in self-confidence for both stage three ($R^2 = .552$, Adjusted $R^2 = .544$, $F(5, 297) = 73.19$, $p < .001$) and stage four following the addition of the interaction term ($R^2 = .553$, Adjusted $R^2 = .544$, $F(6, 296) = 60.94$, $p = .52$). Resilience and optimism did not interact in affecting college self-confidence. Study data suggests Hypothesis 6 was not supported.

Hypothesis 7. Similar to Hypothesis 6, this study hypothesized that two interactions related to life satisfaction would provide greater predictive capabilities. Replicating the statistical analyses above, the first interaction for testing proposed that the relationship between family functioning and students' life satisfaction would be moderated by the degree of attachment to their mothers. Second, that the relationship between resiliency and life satisfaction would be moderated by

optimism factors. Presented in Table 4, a four-stage hierarchical multiple regression was run to address the resiliency and optimism interaction. Again, a model could not be conducted to test family health and parental attachment due to multicollinearity. Subsequently, a portion of the hypothesis was not tested.

Similar to the findings in Hypothesis 6, block three of the model demonstrated resilience characteristics and dispositional optimism were significant predictors of life satisfaction, but additional contributions to the model in block four were not found. The resilience x optimism interaction did not significantly predict life satisfaction ($B = -.00$, $\beta = -.03$, $SE = .00$, $p = .43$) and the interaction term did not provide a significant independent explanation of variance ($sr^2 = -.03$). The data suggests that differing degrees of resilience does not impact life satisfaction amongst students with high or low levels of optimism. Overall, the regression model accounted for 51% of the variance in overall life satisfaction for both stage three ($R^2 = .509$, Adjusted $R^2 = .501$, $F(5, 297) = 61.68$, $p < .001$) and stage four after the addition of the interaction term ($R^2 = .510$, Adjusted $R^2 = .501$, $F(6, 296) = 51.44$, $p = .43$). Resilience and optimism did not interact in affecting life satisfaction. Study data suggests Hypothesis 7 was not supported.

Chapter 5: Discussion

This study sought to explore the question of how demographic variables, family functioning, and resilience relate to and positively predict academic achievement, college self-confidence, mental health, and overall life satisfaction. From a broader standpoint, focus was placed on developing a working understanding of the presence of resilience in a college-aged sub-population, specifically students from sole-parent family structures. Intentionally, sole-parent households were exclusively examined – instead of comparative analysis to two-parent household – to enhance our current working knowledge of the heterogeneous nature of students from these households. Overall, data indicated that college students from single-mother households seemingly demonstrate a substantial degree of resilience and thrive in the higher education environment. These outcomes support the ongoing research trend to move towards a strength-based evaluation model in positive psychology in conducting research with this population and away from the deficit model.

Six core findings arose from this research, three that correspond to family processes relationship with student well-being outcomes and three that correspond to students' coping processes link with well-being outcomes. In the context of family processes, study results suggested that: first, this study contributes towards ongoing support for family processes playing a role in child well-being models; second, self-confidence, mental health, and life satisfaction may be indicators of college thriving for students raised by one parent; and third, family structural characteristics were less influential than expected. Taken together, core findings associated with family processes suggest that one finding aligned with the trend of existing research, the second potentially serves as a unique contribution to the field, and the final finding did not support a proposed study hypothesis. In the context of student coping processes, study results suggest: first, there remains ongoing support that optimism and resilience having strong links to self-confidence, mental health functioning, and life satisfaction; second, optimism seemingly does not substantially impact relationships between students' resilience and their well-being; and third, students' degree

of resiliency and optimism are not associated with academic performance likely due to its distal nature as suggested by extant empirical work. Similarly, altogether the core findings associated with student coping processes suggest that findings one and three aligned with the trend of existing research, but in the context of specifically examining the subpopulation of interest, and that the second finding did not support a proposed study hypothesis.

To date, this is the first study to retrospectively examine reported family behaviors in conjunction with reported current resiliency characteristics for college-aged students from single-mother homes. Study results suggest healthy family functioning has strong associations with improved likelihood of students' positive perceptions of well-being and college self-efficacy. Second, greater degrees of personal coping resources – resiliency characteristics – tends to suggest heightened perceptions of positive well-being and college efficacy experiences across an array of college domains. With a moderate participant sample size, this study helps fills the gap in our knowledge about older cohorts of children from single-parent homes than the field's prior exclusive focus on young children and adolescents. This work shifts the literature towards uniquely surveying young adults from single-mother family systems and revealing that they seemingly possess resiliency strengths similar to what we might expect to see, based upon the extensive prior literature, amongst students from two-parent families. Essentially, single-mother household students appear to normatively function and achieve.

Noted above, the two subsets of findings – family processes and student's individual resiliency utilization – contained interesting and unique results that did not support some study hypotheses, which may suggest ongoing limited understanding of the full-extent of associations between single-mother characteristics in context of student functioning. These surprising findings should also be examined in context of study limitations. Finally, study findings and limitations point towards future research directions that encourage greater detailed exploration of the heterogeneity of single-parent homes and examining students' psychological resources directly associated with originating from their single-parent homes.

FAMILY PROCESSES PREDICTS WELL-BEING & COLLEGE THRIVING

Despite the presumed potential for cumulative risk encountered in single-parent family structures, young adults with resiliency and optimism traits reported improved mental health functioning and life satisfaction. Importantly, this was true even after controlling for sociodemographic background characteristics. Therefore, the observed differences in the perceived positive functioning impacts of mental health, self-confidence, and life satisfaction cannot be totally accounted for simply by the fact that students originated from higher socioeconomic backgrounds or plausible relevant experience stemming from age.

Overall, the perceived degree of healthy interactions within young adults' families of origin were found to significantly predict their overall subjective psychological well-being, including symptoms of psychological distress and life satisfaction. Simply, the first core finding indicated that participants belonging to more competent family systems, in which positive family affect and problem solving occurred, reported stronger life satisfaction and fewer mental health symptoms. The findings from this study suggest that healthy family dynamics may continue to have a strong relationship to student well-being, countering the widely held societal belief that single-parent families are categorically predisposed to improved or worsened outcomes than their two-parent household counterparts. Instead, functional interactions promoting support potentially play a far greater role than the strict number of people – or parents – within the family structure. Previous research has demonstrated that family culture and relational processes have a substantial relationship with child well-being (e.g., Philips, 2012) and college-student well-being outcomes (e.g., Moreira & Telzer, 2015). In the aforementioned studies, findings were seen in single-parent and two-parent households respectively, further exhibiting that family behaviors have been shown to supersede the impact of family structure alone.

As a further point of comparison, Taylor and his colleagues (2016) found relationship distress in the mother-adolescent dyad for African American families predicted lower adolescent emotional well-being and global self-esteem. Within the present study, perceived family health demonstrated significant ability in predicting fewer depressive and anxiety symptoms amongst

participants. The impact of depression and anxiety symptoms on college adjustment and success are well established, with college systems mounting targeted interventions in efforts to prevent student decline. Recent research exploring this concern indicates students struggling with psychiatric difficulties are more likely to experience a spectrum of negative consequences including negative impacts on academic performance (Andrews & Wilding, 2004) and increased physical illness concerns (Adams et al., 2008).

Apart from objective psychological well-being, study results indicated family behaviors are also related to subjective well-being. The quality of healthy relationship dynamics amongst family members served as a direct and significant predictor of student's life satisfaction. Data yielded support for prior findings that suggests healthy family relationships may act as a psychosocial buffer that meaningfully contributes towards life satisfaction. In an earlier study, Coffman & Gilligan (2002) linked higher levels of perceived social support, including from family members, with higher levels of life satisfaction within a first-year college student population. Similar to the emotional mood concerns discussed above, life satisfaction has arisen as another area of interest in the college environment, suggested to contribute to student ease of matriculation involving academic and social adjustment (Garriott et al., 2015). Results in this study may indicate that the psychosocial impact of the family system plays a significant role in emotional welfare even when the student is living independently.

The second key finding from study data suggests adaptive family strategies similarly predicts student perceptions of college efficacy and positive self-concept, possibly suggesting college thriving. As explained in detail above, many of the well-being indicators such as life satisfaction and mental health functioning remains highly influential on healthy positive college experiences. The degree of competent family interactions has prior empirical evidence to suggest parenting relationships may influence personal coping, academic success, and college adjustment. In fact, there is evidence to suggest that healthy family dynamics and student reliance on parental support is not a static but dynamic process during college years that aides in bolstering student optimism and self-esteem (Moreira & Telzer, 2015). The strong link between perceived family

competence and prevalence of student optimism and college self-confidence, suggests the current study may lend further support to the prior posited dynamic nature of family processes remaining relevant in college years after presumably leaving single-mother's home. These results meaningfully contribute to understanding the connection between well-understood family functioning processes and domains of student success from a broader lens, while helping to focus the picture on the relationship with the lesser researched family profile of one-parent households.

Current findings suggest that the family health dynamics amidst sole-parent households may hold a similar predictive role for well-being as we might expect to see in a general college student population given the preponderance of prior research. In many ways, this normative data lends further support to extant field literature, in cases when researchers argued that children and adolescents were not disenfranchised solely due to a single-parent upbringing. Taking the predictive value of healthy family systems into account, quality of family interactions continues to maintain a larger association with emotional well-being than a narrowed view of structure alone.

FAMILY PROCESSES OVER FAMILY STRUCTURE

An unexpected yet compelling third core finding was the prominence of family functioning on all variables of interest over and above family structure considerations. Surprisingly, family demographic characteristics were unrelated to well-being or college efficacy outcomes. Thorough exploration of the data indicated that the total amount of time that students spent within their single parent family structure did not have a relationship with any of the variables of interest – including both predictor and criterion variables. Similarly, the means by which a mother became a single-parent, such as due to divorce or never partnering, did not uniquely help to clarify our understanding of the population.

Relatively limited knowledge is available about the direct and indirect impacts of family structure on various psychosocial outcomes. Current works continue to gravitate towards socioeconomic influences on family psychosocial well-being, routinely findings that non-partnered mothers with low-SES are more likely to report increased distress (Colton, Janzen, &

Laverty, 2015). The influential magnitude of socioeconomics on an array of criterion variables relevant to single-parent structures is well established within empirical investigations thus far, and this work further supports the need to evaluate families after taking various forms of resourcing into account. Putting aside socioeconomic contextual factors, ascertaining influential family arrangements may still be warranted. For example, family structural attributes such as the impact of divorce or parental death on family processes or the number of children in the household are possible indicators of increased emotional and instrumental resource expenditure for the mother, impacting cohesion amongst individual parent-child dyads. Further, both family arrangement issues may impact the child of interest (i.e., study participant) depending upon their expected role within the family to contribute towards responsibility in sibling caretaking or general family functions. In retrospect, the absence of meaningful results may be a function of not evaluating social resourcing availability during childhood. Some evidence suggests that social capital resources such as kinship availability or social network support can strongly predict both single-mother and child psychological functioning (Colton et al., 2015; Taylor et al., 2016; Taylor & Conger, 2017). While the family's competence and health was assessed to provide an improved systemic understanding of the student within the context of their family, there was no evaluation of the family within context of social network support and community.

Limited findings may also be suggestive of participants' self-definition of many of the key demographic components related to family structure. For example, participants were given freedom to self-define having lived in a single-family household, the singular inclusion criteria requiring that they lived with a sole-parent at least two years. Further, participants were not required to stipulate the means of establishment of the single-parent home. For instance, students with an incarcerated or deployed military parent might have considered themselves the product of a single-parent home and opted into the study, further complicating clear demographic and structural understanding of homes. Although identifiable significant outliers were removed, due to the limited restrictions placed upon participant responses and limited forced standardized

responses, lacking findings may be a product of methodological limitations more so than true population characteristics.

No other studies have connected an extensive set of single-parent family living arrangements, as those proposed here, to adolescent or emerging adult outcomes. Consequently, placing these results – or lack thereof – into context remains a difficult endeavor with limited insight on the directional nature of correlations. Strictly speaking, the lack of meaningful relationships is likely a function of limited sample sizes that failed to produce enough distinction amongst subgroups within the heterogeneous single-mother population. Failing that, it could be the overarching well-documented contemporaneous nature of socioeconomic influences. Finally, it may be while there was an extensive array of family structural demographics evaluated, they may not have gone far enough in creating detailed comparable family profiles. Further evaluation of family structures and living arrangements may still further elucidate meaningful subgroups to identify for selective interventions aimed at either risk prevention or competence promotion.

Family dynamics successfully predict a portion of the important college processes at play for students in observed improved mental health, life satisfaction, and efficacy beliefs. Although behaviors and interpersonal relationships within the single-mother family of origin provides valuable insight into projected student college outcomes, these family characteristics do not predict the totality of subjective well-being or successful navigation of the college setting after expanding the model by looking at individual contextual influences. Within all study statistical models, students' individual psychological assets played a pivotal role in the college success indexes, over and above family influences alone. Student self-reported resiliency shaped college adaptation to a greater extent.

INDIVIDUAL RESILIENCE PREDICTS STUDENTS' WELL-BEING & COLLEGE THRIVING

Aside from family processes, resiliency and optimism remained consistent variables significantly associated with all measures, resulting in the first core finding related to participant coping. Students with high resiliency and optimism traits reported fewer depressive and anxiety

symptoms and increased life satisfaction. The findings were consistent with long-standing previous research linking resilience and optimism traits and behaviors with mental health functioning and life satisfaction amongst other populations (Carver & Scheier, 2002; Pritchard, Wilson, & Yamnitz, 2007). Building upon well-established resiliency research, this work hones in on the prevalence of resiliency traits amongst both college students, but further details the experience of students from single-parent homes. Prior works in the field of single-parent family research focused more on the cumulative risk concerns that many families face, with limited studies focusing on the opportunity for adaptive resiliency.

This work helps expand the field further by showcasing the magnitude of resiliency factor characteristics amongst an older cohort of individuals from single-mother households. Study data lends further support to the conclusion of recent works that propose resiliency self-regulation processes, such as problem solving and emotional management, buffer against potentially difficult circumstances associated with maladaptive college adjustment (Park, Edmondson, & Lee, 2012), best observed through mental health incidences and poor subjective well-being. In particular, dispositional optimism incorporates a future-oriented expectation, belief in oneself to overcome difficulties, and an openness to learn from prior failings. This finding replicates similar work examining the role in optimism being positively associated with healthy adaptive psychological mechanisms and life satisfaction for first year undergraduate students (Denovan & Macaskill, 2017). Optimism as a psychological asset appears to dually equip students to better tolerate college-related distress that could exacerbate mood concerns, while the simultaneous positive focus mechanisms nurture life satisfaction. This study demonstrated that even after accounting for other likely contributing variables that influence student well-being, resiliency and optimism contribute the largest explanation for subjective and objective emotional well-being. Similar to findings related directly to family processes, study data suggests that students from single-parent homes have similar resiliency process related outcomes in college-related indicators that we would expect to see from any normative population based on prior research. For students lacking resiliency attributes, experiencing psychopathology, or lacking life satisfaction, helping to

evaluate prior risk exposure and identify any of their adaptive processes may help clarify and promote the mutual process of risk encounter and resiliency development link.

The second set of core findings suggested resiliency and optimism interweave to promote increased college efficacy and confidence. Again, college confidence in this study covered student's perceived cognitive and behavioral efficacy in performing in common and necessary domains for college success, including academic performance, social capabilities, and general confidence. Students that reported greater degrees of resiliency attitudes and optimistic-oriented cognitive frameworks reported more efficacious performance in a combination of college adaptive arenas. Resiliency and optimism are cognitive perspective and behavioral orientations that promote adaptive thinking strategies, problem solving, and the requisite "bounce back" to handle difficulties and stressors. For example, recent work with a Turkish university student sample demonstrated that resiliency characteristics were the largest predictors to student's overcoming cumulative risk concerns in their ease in college adjustment (Rahat & Ilhan, 2016). These results speak to students' apparent abilities to incorporate the necessary independent functioning skills to adjust to the interrelated demands and challenges of managing academic workloads and interpersonal relationships, all within the context of ongoing identity formation (e.g., Azmitia et al, 2013). Given the host of demands, self-efficacy – specifically college self-efficacy – provides a personal resource that emerging adults can draw upon to buffer against potential impairments in emotional, social, and educational functioning. This study contributes towards an understanding of how resiliency characteristics continue to support and protect students – specifically students of single-mother's – from the considerable adjustment difficulties associated with the college environment.

Young adults from adaptive styles of families, and who also possess stress hardiness and psychological competency, demonstrate an increased likelihood to draw upon their own cognitive, behavioral, and emotional resources to functionally adapt to new and dynamic college-specific stressors throughout their educational lifetime. The presence of this adjustment style amongst the populace of interest to experience healthier psychosocial functioning in the college setting appears

to be greater than historical societal expectations focused on limited flourishing for children from single-parent households would posit.

Resilience interactions. Although optimism and resilience turned out to be significant predictors of college self-confidence and life satisfaction, moderating effects of optimism in *relation to* resilience did not meaningfully predict either outcome of interest. This pattern of results is unsurprising but a relevant second core finding related to student resilience in this study; optimism has historically and frequently been considered a conceptual component or considered a sub-construct in operationalizing the multidimensional construct of resilience (Fletcher & Sarkar, 2013). The dearth of associated traits for both resiliency and optimism also makes it difficult to parse out distinct contributions of each respective multifaceted construct. Recent work has indicated that the various multi-dimensional factors of optimism, including positive expectations for the future and sense of invulnerability, may have differing degrees of influence on well-being and psychological distress tolerance (Kleiman et al., 2017). For example, in using the same measures for optimism and resilience as the current study, Dawson and Pooley (2013) found optimism was one of the strongest predictors of resilience for students during the college transition process. They further suggested that students with higher levels of optimism may indirectly influence the utilization of resilient coping strategies and overcoming stress. Within the context of the current study, although both resiliency and optimism were found to be significant predictors of criterion variables, resiliency as the strongest predictor may indicate that resiliency characteristics supersede or incorporate optimistic tendencies. Alternatively, findings may indicate a bidirectional relationship between optimism and resilience, making it all the more likely that high resiliency may be influential in generating high optimism beliefs, which may in turn be beneficial in using resilient cognitive and behavioral coping resources. In the midst of the continued growth of the resiliency research field, this study exemplifies the continued limitations of the resiliency construct definition. Amidst the possibility of inter-reliant concepts of optimism and resiliency, likely a range of resiliency mechanisms impact the psychological mechanisms important to college success.

These study findings merit further investigation to evaluate the specific resiliency mechanisms for this population that influence various forms of students' college adjustment concerns at both the academic and social levels. Further distilling the specific influential resiliency factors, such as autonomy, can generate targeted intervention strategies for increasing college well-being amongst students from single-parent homes. The necessity of ongoing research specifying the unique distinctions between resiliency and optimism characteristics also is indicated. Alternatively, the study may have identified the true relationship amongst these constructs; optimism may not play a tantamount role in changing the relationship between participant resiliency and predicting well-being in the college environment.

COLLEGE SELF-EFFICACY DIFFERS FROM ACADEMIC ACHIEVEMENT

The only objective measure used within this study to approximate college success was students' self-reported cumulative grade point average, but the expected results were not yielded in examination providing the last of the core findings of the study. In attempts to ascertain college success, academic performance defined by student GPA is routinely utilized as an objective indicator and measure of general academic performance behaviors (Awad, 2007). Amongst all examined hypotheses though, student GPAs were the only dependent variable lacking a significant relationship with family functioning or individual resiliency traits. In fact, testing of this hypothesis instead indicated that demographic characteristics – such as identifying as a woman, white, or with a higher socioeconomic status – were all stronger predictors of higher GPAs than any other variable of interest tested. This study converges with prior studies that have indicated social determinants such as these correlate with GPA as a measurement of academic performance (Richardson & Abraham, 2012). Findings suggest that these common demographic factors play a larger contextual role in their relationship to grades than the resilience-based psychosocial resources evaluated in this study. This is likely due to the psychosocial resources afforded to students who may be women, white, and/or from a higher socioeconomic standing that has equipped them to meet educational performance expectations for higher grades. For example,

students possessing one or multiple of these identities may have attended schools that provided better academic training. Additionally, in comparison to a standardized assessment evaluating clear understanding of content standards, such as state assessments or standardized tests, student grades have been found to broadly evaluate the achievement construct by incorporating multiple content areas, classroom behaviors (i.e. attendance, classroom participation), and teachers' subjective grading practices (i.e. curves) and individual interactions with their students (Dickinson & Adelson, 2016).

Subsequently, any relationship between resiliency and grade attainment may be confounded by a multitude of covariance from a number of indirect and directly related processes that both constructs encapsulate. For example, when attempting to explore predictive capabilities of racial identity, academic self-concept, and self-esteem on GPA amongst African American students, Awad (2007) found that academic self-concept was the only significant predictor in the model. In her work, Awad argued that constructs not directly pertaining to academic skills and abilities, such as self-esteem, were likely too distal of factors to predict GPA compared to more proximal cognitive and non-cognitive academic factors such as academic self-concept. Similarly, because of the non-academic nature of the predictor variables of this study – family competency and student resilience traits – they likely were too distal to predict academic performance.

Despite these findings, this study remains consistent with prior work proposing student self-efficacy beliefs are positively associated with their academic satisfaction (Garriott et al., 2015) and academic performance (Richardson & Abraham, 2012). Although not tested for hypothesis purposes within this study, there was a significant positive correlation between perceived college confidence and GPA, lending further support to this important link. In future work, expanding the use of academic-related outcome measures should incorporate predictor variables of greater pertinence related to academic skill or non-cognitive ability (Awad, 2007), such as academic self-concept or academic persistence. Within the context of prior research, these study findings suggest that further investigation of other relevant predictive or outcome academic success variables,

including self-efficacy as a dimension of the resiliency construct, would likely elucidate larger differences unique to the single-mother family framework.

LIMITATIONS AND FUTURE RESEARCH

Several limitations of the current study and recommendations for future study improvements should be recognized. First, the specificity of participant data limits making definitive statements about the direction of observed relationships. Although participants from any single-*parent* household – as self-defined - were invited to participate, in efforts to increase statistical power, single-fathers and non-biological caregivers were removed from analyses due to their limited numbers. Further, dyadic parent-child relationship gender differences (i.e. single-mother parenting distinctions between daughters compared to sons) were not statistically evaluated for impacts on variables of interest. Optimizing larger sample sizes in the future, performing both within-group comparisons amongst all single-parent structures in addition to gender based between-group comparisons that examine family dynamic correlates would help extend our population understanding. As the study stands, generalizability is currently limited to young adults from single-mother households.

Next, students were recruited from a singular highly ranked and competitive educational institution that attracts and retains high academic performers. Subsequently, study participants are likely not representative of a wide array of college students from single-mother homes. Similarly, given the high self-reports of socioeconomic status amongst participants, there is a moderate likelihood that students come from low-risk households. Participants presumably have had a number of relevant socio-economic advantages that have potentially buffered against or mitigated social vulnerability. Aside from collecting data from individuals across the socioeconomic spectrum, placing socioeconomic advantages and disadvantages into context in evaluating the population would benefit future research endeavors. Along this line, estimating cumulative risk (i.e., economic welfare, exposure to violence, parental psychopathology, familial interpersonal

conflict) would provide an improved estimate of the correlation linking cumulative risk exposure and cumulative resilience development within single-parent families.

A second limitation rests in the study's overall design and selection of self-report measures. Although all of the measures possessed adequate psychometric properties, some were limited in published utilization (i.e., Personal Evaluation Inventory; Self-report Family Inventory –II) that would provide improved estimates in establishing the validity and reliability with similar populations of interest. Further, multicollinearity issues arose in analysis, specifically between participant attachment to their mothers and family health and competence in addition to estimates of resiliency and optimism characteristics. As discussed above, although many of these constructs have shared behavioral and attitudinal features along with overlapping definitions, the selected measures of interest likely did not possess enough discriminate validity capacity. Although constructs such as resilience require further fine-tuning in attribute definition for scale construction, future researchers should attempt to assess variables of interest utilizing measures with a greater number of published works examining construct validity. As previously noted above, amongst the selected measures, this study also used a broad construct of college efficacy but did not find support for academic achievement using student grade point averages. Further, this study did not utilize measures to explicitly evaluate college success, transitional adjustment, or related externalizing behaviors. Despite longstanding incorporation of student grades as a measure of cognitive ability and academic achievement in psychological research, a broader definition of college success has been suggested in the literature – particularly because student GPA does not measure student persistence, engagement, or general satisfaction with their educational experience (Krumrei-Mancuso, Newton, Kim, & Wilcox 2013). The current study suggests that adding additional college adjustment measures and an improved functional assessment of psychosocial learning factors, past merely evaluation student grades, would provide further details on how students make advancements in the college environments as related to family and individual resiliency.

Finally, study design was quantitative in nature and thus limited to student self-report at a single point in time. Although a predominant strength of this study was the focus on an older young-adult cohort of children from single-mother homes, qualitative studies have been performed with younger cohort samples, contributing a rich detail in their unique experiences. Despite the number of meaningful correlations between variables, this study lacks in its ability to fully explain the magnitude of influence of being raised by a single-parent. This limitation is especially apparent given the retrospective nature of the study regarding the family measures; providing participants an outlet to discuss the features of their family they felt were particularly meaningful would place their retrospective accounts/appraisals into context. Future research would also be further served in investigating the ongoing influence of the family system's emotional and instrumental support mechanisms while students are enrolled. Supportive family relationships likely contribute towards student coping and adjustment to the constant demands of the college environment. Similarly, further scrutiny and testing should be performed to see what differences emerge from family structure characteristics such as clearly defining the total time raised in a single-parent household, comparison of developmental periods spent in the home (i.e. adolescence versus young children), single-parenthood resultant of death of a parent, or family structure concerns related to the primary parent engagement, or lack thereof, with a significant co-parent(s) through romantic or other involvement throughout child development. Utilizing standardized definitions may enhance statistical sensitivity in delineating population differences.

Aside from qualitative evaluation, experimental and longitudinal designs would contribute in improving our understanding of the possible causal and socialization models that explain the development of resilience in young adults. This work moves the literature forward by providing a distal understanding of college students' thriving and the seeming relationship with single-mother structures, although additional benefits remain from an improved proximal understanding of the family structure effects on the behavioral and cognitive mechanisms at play.

SINGLE-MOTHER FAMILIES AND STUDENT RESILIENCE

Despite study limitations, the current work helps to clarify the understanding we have regarding children who leave single-mother homes and advance into higher education. Notably, the results lend credence to the utilization of positive psychology theories in evaluating the adaptive strategies and successful well-being found amongst children from single parent families. Relationships amongst family members focused on support, affection, problem solving, and appropriate autonomy – all resiliency traits – were associated with a number of indicators of well-being of single-mother households. Some students from these family systems also independently replicated these characteristics and possessed resilience and optimism, involving social competence, autonomy, positive future orientations, and problem solving. By examining single mother families exclusively, this research helps illustrate the presence of common functioning outcomes we would expect to see amongst normative college populations according to research. When working with young adults from single-parent households, it is necessary for researchers and clinicians to better assess for cohesive family dynamics likely present in the home to further reinforce or bolster those processes. Speculatively, encouraging students to reflect upon what personal strengths they have developed over time or were modeled by their single-parent family might contribute towards recognition of emotional and behavioral coping mechanisms, particularly when facing challenges or cumulative risks within the college environment. Ultimately, when healthy emotional and instrumental coping processes were present within competent families or are present in current student functioning, there is improved ability to positively predict their success.

In conjunction with the resiliency framework, the methodology selected for this study provides a unique contribution; the application of hierarchical regression analyses provides a systematic way to evaluate the influences of resilience factors and their unique contributions to total variance utilizing more complex analyses than most studies within the field. Due to the nature of this study focusing exclusively on college-aged participants, this study also helps to expand the current research, moving past common developmentally specific concerns observed in children

and adolescence, instead evaluating young adult independent functioning. There remains a rich array of experiences and distinctive qualities amongst an older cohort of participants who originated from single parent households.

College students from single-mother households use coping mechanisms to negotiate the difficult stressors placed upon them in the college environment – resilience strategies observed to be present during their home life and in their young adulthood. Although seen as relevant for well-being and self-concept, these beneficial mechanisms are not fully understood regarding objective academic success behaviors, requiring further study on how to help bolster academic strides. Further, these results might provide grounds in considering domains for intervention that promote resiliency skill development, targeting vulnerable students from families with limited healthy or competent interactions or students with few resiliency characteristics. Focus on these students can better address their mental health needs, subjective well-being, and college self-efficacy while improving their overall stress hardiness. In accordance to current study data, the direct relationship of being raised within a single-mother household does not lead to negative outcomes. Instead, the indirect relationship of family system availability of adaptive psychological resources can predict thriving despite common likely stressors. Researchers and clinicians elaborating upon cognitive and behavioral resiliency interventions should take into consideration impact of both family of origin and individual resilience characteristics associated with college students' ability to adapt when confronting common college life difficulties after leaving their single-mother households. Helping them understand and amplify any associated strengths of their unique family system is more likely the solution instead of being the problem.

Appendices

SELF-REPORT FAMILY INVENTORY: VERSION II (SRFI-II; BEAVERS & HAMPDEN, 1990)

For each question, mark the answer that best fits how you see your family now. If you feel that your answer is between two of the labeled numbers (the odd numbers), then choose the even number that is between them.

| | | YES: Fit our family very well | | SOME: Fits our family some | | NO: Does not fit our family |
|------|---|-------------------------------------|---|-------------------------------|---|--------------------------------|
| 1. | Family members pay attention to each other's feelings. | 1 | 2 | 3 | 4 | 5 |
| 2.+ | Our family would rather do things together than with other people. | 1 | 2 | 3 | 4 | 5 |
| 3.+ | We all have a say in family plans. | 1 | 2 | 3 | 4 | 5 |
| 4.+ | The parents* in this family understand and agree on family decisions. | 1 | 2 | 3 | 4 | 5 |
| 5. | Parents in the family compete and fight with each other. | 1 | 2 | 3 | 4 | 5 |
| 6.+ | There is closeness in my family but each person is allowed to be special and different. | 1 | 2 | 3 | 4 | 5 |
| 7. | We accept each other's friends. | 1 | 2 | 3 | 4 | 5 |
| 8. | There is confusion in our family because there is no leader. | 1 | 2 | 3 | 4 | 5 |
| 9. | Our family members touch and hug each other. | 1 | 2 | 3 | 4 | 5 |
| 10. | Family members put each other down. | 1 | 2 | 3 | 4 | 5 |
| 11. | We speak our minds, no matter what. | 1 | 2 | 3 | 4 | 5 |
| 12.+ | In our home, we feel loved. | 1 | 2 | 3 | 4 | 5 |
| 13. | Even when we feel close, our family is embarrassed to admit it. | 1 | 2 | 3 | 4 | 5 |
| 14. | We are a lot and never solve problems. | 1 | 2 | 3 | 4 | 5 |
| 15.+ | Our happiest times are at home. | 1 | 2 | 3 | 4 | 5 |
| 16.+ | The parents in this family are strong leaders | 1 | 2 | 3 | 4 | 5 |
| 17.+ | The future looks good to our family. | 1 | 2 | 3 | 4 | 5 |
| 18.+ | We usually blame one person in our family when things aren't going right. | 1 | 2 | 3 | 4 | 5 |
| 19.+ | Family members go their own way most of the time. | 1 | 2 | 3 | 4 | 5 |
| 20.+ | Our family is proud to be close. | 1 | 2 | 3 | 4 | 5 |

Self-Report Family Inventory-II

| | | | | | | |
|------|--|---|---|---|---|---|
| 21.+ | Our family is good at solving problems together. | 1 | 2 | 3 | 4 | 5 |
| 22. | Family members easily express warmth and caring towards each other. | 1 | 2 | 3 | 4 | 5 |
| 23. | It's okay to fight and yell in our family. | 1 | 2 | 3 | 4 | 5 |
| 24.+ | One of the adults in the family has a favorite child. | 1 | 2 | 3 | 4 | 5 |
| 25.+ | When things go wrong we blame each other. | 1 | 2 | 3 | 4 | 5 |
| 26. | We say what we think and feel. | 1 | 2 | 3 | 4 | 5 |
| 27.+ | Our family members would rather do things with other people than together. | 1 | 2 | 3 | 4 | 5 |
| 28.+ | Family members pay attention to each other and listen to what is said. | 1 | 2 | 3 | 4 | 5 |
| 29. | We worry about hurting each other's feelings. | 1 | 2 | 3 | 4 | 5 |
| 30. | The mood in my family is usually sad and blue. | 1 | 2 | 3 | 4 | 5 |
| 31. | We argue a lot. | 1 | 2 | 3 | 4 | 5 |
| 32. | One person controls and leads our family. | 1 | 2 | 3 | 4 | 5 |
| 33.+ | My family is happy most of the time. | 1 | 2 | 3 | 4 | 5 |
| 34. | Each person takes responsibility for his/her behavior. | 1 | 2 | 3 | 4 | 5 |

35.+ On a scale of 1 to 5, I would rate my family as:

1 2 3 4 5

My family functions very well together.

My family does not function well together at all. We really need help.

36.+ On a scale of 1 to 5, I would rate the independence in my family as:

1 2 3 4 5

No one is independent. There are no open arguments. Family members rely on each other for satisfaction rather than on outsiders.)

(Sometimes independent. There are some disagreements. Family members find satisfaction both within and outside of

the family.) (Family members usually go their own way. Disagreements are open. Family members look outside of the family or satisfaction.

*Instances of “grownups” in the measure were replaced with “parents” for the purpose of this study.

+ Indicates Health/Competence Subscale items used in study analyses

INVENTORY OF PARENT AND PEER ATTACHMENT -REVISED (IPPA-R; ARMSDEN & GREENBERG, 1987)

This questionnaire asks about your relationships with important people in your life; your mother and your father. Please read directions to each part carefully.

Part I

Some of the following statements asks about your feelings about your mother or the person who has acted as your mother. If you have more than one person acting as your mother (e.g. a natural mother and a step-mother) answer the questions for the one you feel has most influenced you.

Please read each statement and circle the ONE number that tells how true the statement is for you now.

| | Almost Never or Never True | Not Very Often True | Sometimes True | Often True | Almost Always or Always True |
|--|----------------------------------|------------------------|-------------------|---------------|------------------------------------|
| 1. My mother respects my feelings. | 1 | 2 | 3 | 4 | 5 |
| 2. I feel my mother does a good job as my mother. | 1 | 2 | 3 | 4 | 5 |
| 3. I wish I had a different mother. | 1 | 2 | 3 | 4 | 5 |
| 4. My mother accepts me as I am. | 1 | 2 | 3 | 4 | 5 |
| 5. I like to get my mother's point of view on things I'm concerned about. | 1 | 2 | 3 | 4 | 5 |
| 6. I feel it's no use letting my feelings show around my mother. | 1 | 2 | 3 | 4 | 5 |
| 7. My mother can tell when I'm upset about something. | 1 | 2 | 3 | 4 | 5 |
| 8. Talking over my problems with my mother makes me feel ashamed or foolish. | 1 | 2 | 3 | 4 | 5 |
| 9. My mother expects too much from me. | 1 | 2 | 3 | 4 | 5 |
| 10. I get upset easily around my mother. | 1 | 2 | 3 | 4 | 5 |
| 11. I get upset a lot more than my mother knows about. | 1 | 2 | 3 | 4 | 5 |
| 12. When we discuss things, my mother cares about my point of view. | 1 | 2 | 3 | 4 | 5 |
| 13. My mother trusts my judgment. | 1 | 2 | 3 | 4 | 5 |
| 14. My mother has her own problems, so I don't bother her with mine. | 1 | 2 | 3 | 4 | 5 |
| 15. My mother helps me to understand myself better. | 1 | 2 | 3 | 4 | 5 |
| 16. I tell my mother about my problems and troubles. | 1 | 2 | 3 | 4 | 5 |
| 17. I feel angry with my mother. | 1 | 2 | 3 | 4 | 5 |
| 18. I don't get much attention from my mother. | 1 | 2 | 3 | 4 | 5 |

Inventory of Parent and Peer Attachment

| | | | | | | |
|-----|---|---|---|---|---|---|
| 19. | My mother helps me to talk about my difficulties. | 1 | 2 | 3 | 4 | 5 |
| 20. | My mother understands me. | 1 | 2 | 3 | 4 | 5 |
| 21. | When I am angry about something, my mother tries to be understanding. | 1 | 2 | 3 | 4 | 5 |
| 22. | I trust my mother. | 1 | 2 | 3 | 4 | 5 |
| 23. | My mother doesn't understand what I'm going through these days. | 1 | 2 | 3 | 4 | 5 |
| 24. | I can count on my mother when I need to get something off my chest. | 1 | 2 | 3 | 4 | 5 |
| 25. | If my mother knows something is bothering me, she asks me about it. | 1 | 2 | 3 | 4 | 5 |

Part II

This part asks about your feelings about your father, or the man who has acted as your father. If you have more than one person acting as your father (e.g. natural and step-father) answer the question for the one you feel has most influenced you.

| | | Almost Never or Never True | Not Very Often True | Sometimes True | Often True | Almost Always or Always True |
|-----|---|----------------------------------|------------------------|-------------------|---------------|------------------------------------|
| 1. | My father respects my feelings. | 1 | 2 | 3 | 4 | 5 |
| 2. | I feel my father does a good job as my father. | 1 | 2 | 3 | 4 | 5 |
| 3. | I wish I had a different father. | 1 | 2 | 3 | 4 | 5 |
| 4. | My father accepts me as I am. | 1 | 2 | 3 | 4 | 5 |
| 5. | I like to get my father's point of view on things I'm concerned about. | 1 | 2 | 3 | 4 | 5 |
| 6. | I feel it's no use letting my feelings show around my father. | 1 | 2 | 3 | 4 | 5 |
| 7. | My father can tell when I'm upset about something. | 1 | 2 | 3 | 4 | 5 |
| 8. | Talking over my problems with my father makes me feel ashamed or foolish. | 1 | 2 | 3 | 4 | 5 |
| 9. | My father expects too much from me. | 1 | 2 | 3 | 4 | 5 |
| 10. | I get upset easily around my father. | 1 | 2 | 3 | 4 | 5 |
| 11. | I get upset a lot more than my father knows about. | 1 | 2 | 3 | 4 | 5 |
| 12. | When we discuss things, my father cares about my point of view. | 1 | 2 | 3 | 4 | 5 |
| 13. | My father trusts my judgment. | 1 | 2 | 3 | 4 | 5 |
| 14. | My father has her own problems, so I don't bother her with mine. | 1 | 2 | 3 | 4 | 5 |
| 15. | My father helps me to understand myself better. | 1 | 2 | 3 | 4 | 5 |

Inventory of Parent and Peer Attachment

| | | | | | | |
|-----|---|---|---|---|---|---|
| 16. | I tell my father about my problems and troubles. | 1 | 2 | 3 | 4 | 5 |
| 17. | I feel angry with my father. | 1 | 2 | 3 | 4 | 5 |
| 18. | I don't get much attention from my father. | 1 | 2 | 3 | 4 | 5 |
| 19. | My father helps me to talk about my difficulties. | 1 | 2 | 3 | 4 | 5 |
| 20. | My father understands me. | 1 | 2 | 3 | 4 | 5 |
| 21. | When I am angry about something, my father tries to be understanding. | 1 | 2 | 3 | 4 | 5 |
| 22. | I trust my father. | 1 | 2 | 3 | 4 | 5 |
| 23. | My father doesn't understand what I'm going through these days. | 1 | 2 | 3 | 4 | 5 |
| 24. | I can count on my father when I need to get something off my chest. | 1 | 2 | 3 | 4 | 5 |
| 25. | If my father knows something is bothering me, she asks me about it. | 1 | 2 | 3 | 4 | 5 |

THE RESILIENCE SCALE FOR ADULTS (FRIBORG ET AL., 2005)

Please read the following statements, and complete each statement by selecting the box that best describes your beliefs over the last month.

Personal strength/ Perception of Self

| | | | |
|---|--------------------------------|--|--|
| When something unforeseen happens | I always find a solution | <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> | I often feel bewildered |
| My personal problems | are unsolvable | <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> | I know how to solve |
| My abilities | I strongly believe in | <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> | I am uncertain about |
| My judgments and decisions | I often doubt | <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> | I trust completely |
| In difficult periods I have a tendency to | view everything gloomy | <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> | find something good that helps me thrive |
| Events in my life that I cannot influence | I manage to come to terms with | <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> | are a constant source of worry/concern |

Personal Strengths/ Perception of future

| | | | |
|-----------------------------|--------------------------|--|-------------------------------|
| My plans for the future are | difficult to accomplish | <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> | possible to accomplish |
| My future goals | I know how to accomplish | <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> | I am unsure how to accomplish |
| I feel that my future looks | very promising | <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> | uncertain |
| My goals for the future are | unclear | <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> | well thought through |

Structured style

| | | | |
|-------------------------------------|--|--|----------------------------------|
| I am at my best when I | have a clear goal to strive for | <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> | can take one day at a time |
| When I start on new things/projects | I rarely plan ahead, just get on with it | <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> | I prefer to have a thorough plan |
| I am good at | organizing my time | <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> | wasting my time |
| Rules and regular routines | are absent in my everyday life | <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> | simplify my everyday life |

Social competence

| | | | |
|---|----------------------------|--|---------------------------|
| I enjoy being | together with other people | <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> | by myself |
| To be flexible in social settings | is not important to me | <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> | is really important to me |
| New friendships are something | I make easily | <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> | I have difficulty making |
| Meeting new people is | difficult for me | <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> | something I am good at |
| When I am with others | I easily laugh | <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> | I seldom laugh |
| For me, thinking of good topics for conversation is | difficult | <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> | easy |

Family cohesion

| | | | |
|---|--|--|-----------------------------|
| My family's understanding of what is important in life is | quite different than mine | <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> | very similar to mine |
| I feel | very happy with my family | <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> | very unhappy with my family |
| My family is characterized by | disconnection | <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> | healthy coherence |
| In difficult periods my family | keeps a positive outlook on the future | <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> | views the future as gloomy |
| Facing other people, our family acts | unsupportive of one another | <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> | loyal towards one another |
| In my family we like to | do things on our own | <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> | do things together |

The Resilience Scale for Adults

Social resources

| | | | |
|---|-----------------------------------|---|---|
| I can discuss personal issues with | no one | <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> | friends/family members |
| Those who are good at encouraging me are | some close friends/family members | <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> | nowhere |
| The bonds among my friends is | weak | <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> | strong |
| When a family member experiences a crisis/emergency | I am informed right away | <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> | it takes quite a while before I am told |
| I get support from | friends/family members | <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> | no one |
| When needed, I have | no one who can help me | <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> | always someone who can help me |
| My close friends/family members | appreciate my qualities | <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> | dislike my qualities |

LIFE ORIENTATION SCALE – REVISED (LOT-R; SCHEIER, CARVER & BRIDGES, 1994)

Instructions: Please be as honest and accurate as you can throughout. Try not to let your response to one statement influence your responses to other statements. There are no "correct" or "incorrect" answers. Answer according to your own feelings, rather than how you think "most people" would answer.

| | 1 | 2 | 3 | 4 | 5 |
|-----|--|-------------------------|---|--------------------------------|-------------------------|
| | I agree a lot | I agree a little | I neither agree nor disagree | I disagree a little | I disagree a lot |
| 1) | In uncertain times, I usually expect the best. | | | | 1 2 3 4 5 |
| 2) | It's easy for me to relax | | | | 1 2 3 4 5 |
| 3) | If something can go wrong for me, it will. | | | | 1 2 3 4 5 |
| 4) | I'm always optimistic about my future. | | | | 1 2 3 4 5 |
| 5) | I enjoy my friends a lot. | | | | 1 2 3 4 5 |
| 6) | It's important for me to keep busy. | | | | 1 2 3 4 5 |
| 7) | I hardly ever expect things to go my way. | | | | 1 2 3 4 5 |
| 8) | I don't get upset too easily. | | | | 1 2 3 4 5 |
| 9) | I rarely count on good things happening to me. | | | | 1 2 3 4 5 |
| 10) | Overall, I expect more good things to happen to me than bad. | | | | 1 2 3 4 5 |

*Note: Items 2, 5, 6, and 8 are fillers.

PERSONAL EVALUATION INVENTORY (PEI; SHRAUGER & SCHOHN, 1995)

Below are listed a number of statements that reflect common feelings, attitudes, and behaviors. Please read each statement carefully and think about whether you agree or disagree that it applies to you. Try to respond *honestly* and *accurately*, but it is not necessary to spend much time deliberating about each item. Think about how the item applies to you during the last 2 months unless some other time period is specified. Indicate your degree of agreement with each statement *by marking the appropriate box.

| | | Strongly Agree | Mainly Agree | Mainly Disagree | Strongly Disagree |
|-----|---|--------------------------|--------------------------|--------------------------|--------------------------|
| So+ | 1. I am a good mixer. | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> |
| M- | 2. Several times in the last few days I have gotten down on myself. | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> |
| Ap- | 3. It bothers me that I am not better looking. | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> |
| R+ | 4. I have no difficulty maintaining a satisfying romantic relationship. | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> |
| M+ | 5. I am happier right now than I have been in weeks. | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> |
| Ap+ | 6. I am pleased with my physical appearance. | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> |
| At- | 7. I sometimes avoid taking part in ball games and informal sport activities, because I don't think I am good enough at them. | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> |
| Sp- | 8. Talking in front of a group makes me uncomfortable. | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> |
| So- | 9. I would like to know more people, but I am reluctant to go out and meet them. | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> |
| At+ | 10. Athletics is an area in which I excel. | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> |
| Ac+ | 11. Academic performance is an area in which I can show my competence and be recognized for my achievement. | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> |
| SP+ | 12. I am better looking than the average person. | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> |
| Sp- | 13. I dread the thought of getting up and talking in public. | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> |
| At+ | 14. When I think about playing more sports, I am enthusiastic and eager, rather than the apprehensive and anxious. | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> |
| G- | 15. I often feel unsure of myself in situations I have successfully dealt with in the past. | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> |
| Ac- | 16. I frequently wonder whether I have the intellectual ability to successfully achieve my vocational and academic goals. | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> |
| At+ | 17. I am a better athlete than most people of my age and sex. | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> |
| G- | 18. I lack some important capabilities that may keep me from being successful. | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> |
| Sp+ | 19. When I have to talk about a group of people I usually feel assured that I can express myself effectively and clearly. | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> |
| Ap+ | 20. I am fortunate to be as good looking as I am. | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> |
| Ac- | 21. I have recognized that I am not as good a student as most of the people with whom I am competing. | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> |

| | | | | | | |
|-----|-----|--|--------------------------|--------------------------|--------------------------|--------------------------|
| M- | 22. | I have been more critical of myself in the last few days than I usually am. | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> |
| At- | 23. | Being poor at sports is an important weakness of mine. | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> |
| So+ | 24. | For me, meeting new people is an enjoyable experience that I look forward to. | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> |
| G- | 25. | Much of the time I don't feel as competent as many of the people. | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> |
| So+ | 26. | I almost always feel comfortable at parties or other social gatherings. | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> |
| G+ | 27. | I have fewer doubts about my abilities than most people. | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> |
| R- | 28. | I have more trouble establishing a romantic relationship than most people do | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> |
| M- | 29. | I am more uncertain about my abilities today than I usually am. | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> |
| Ac- | 30. | It bothers me that I don't measure up to others intellectually. | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> |
| G+ | 31. | When things are going poorly, I am usually confident that I can successfully deal with them. | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> |
| Sp- | 32. | I am more concerned than most people about my ability to speak in public. | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> |
| G+ | 33. | I have more confidence in myself than most people I know. | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> |
| R- | 34. | I feel apprehensive or unsure when I think about going on dates. | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> |
| Ap- | 35. | Most people would probably consider me physically unattractive. | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> |
| Ac+ | 36. | When I take a new course, I am usually sure that I will end up in the top 25% of the class. | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> |
| Sp+ | 37. | I am as capable as most people at speaking before a group. | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> |
| So- | 38. | When I go to social gatherings, I frequently feel awkward and ill at ease. | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> |
| R+ | 39. | Usually I have a better love life than most people seem to. | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> |
| Sp- | 40. | I have sometimes avoided taking classes or doing other things because they would require my making presentations before a group. | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> |
| Ac+ | 41. | When I have to come through on important tests or other academic assignments, I know that I can do it. | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> |
| So+ | 42. | I am better at meeting new people than most people seem to be. | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> |
| M+ | 43. | I feel more confident about myself today than I usually do. | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> |
| R- | 44. | At times I have avoided someone with whom I might have a romantic relationship, because I felt too apprehensive around them. | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> |
| Ap- | 45. | I wish I could change my physical appearance. | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> |
| Sp+ | 46. | I am less concerned than most people about speaking in public. | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> |

| | | | | | | |
|-----|-----|--|--------------------------|--------------------------|--------------------------|--------------------------|
| M+ | 47. | Right now I am feeling more optimistic and positive than usual. | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> |
| R+ | 48. | Attracting a desirable boyfriend or girlfriend has never been a problem for me. | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> |
| G- | 49. | If I were more confident about myself, my life would be better. | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> |
| Ac+ | 50. | I seek out activities that are intellectually challenging, because I know I can do them better than most people. | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> |
| R+ | 51. | I can get plenty of dates without any difficulty. | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> |
| So- | 52. | I don't feel as comfortable in groups as most people seem to. | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> |
| M- | 53. | I am less sure of myself today than I usually am. | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> |
| Ap- | 54. | I would be a lot more successful in dating if I were better looking. | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> |

Note: Ac = Academic; Ap = Appearance; At= Athletic; G = General; M = Mood; R = Romantic; So = Social; Sp = Speaking

+ = positively worded item; - = negatively worded item

*Wording changed to reflect administration of measure

Note: All items *except* Mood and General subscale items were used in study analyses to create Combined subscale

MENTAL HEALTH INVENTORY – 5 (MHI-5; WARE & SHERBOURNE, 1992)

Instructions: Please read each question and tick the box by the ONE statement that best describes how things have been FOR YOU during the past month. There are no right or wrong answers.

1. During the past month, how much of the time were you a happy person?

- | | |
|---|---|
| <input type="checkbox"/> All of the time | <input type="checkbox"/> A little of the time |
| <input type="checkbox"/> Some of the time | <input type="checkbox"/> A good bit of the time |
| <input type="checkbox"/> Most of the time | <input type="checkbox"/> None of the time |

2. How much of the time, during the past month, have you felt calm and peaceful?

- | | |
|---|---|
| <input type="checkbox"/> All of the time | <input type="checkbox"/> A little of the time |
| <input type="checkbox"/> Some of the time | <input type="checkbox"/> A good bit of the time |
| <input type="checkbox"/> Most of the time | <input type="checkbox"/> None of the time |

3. How much of the time, during the past month, have you been a very nervous person?

- | | |
|---|---|
| <input type="checkbox"/> All of the time | <input type="checkbox"/> A little of the time |
| <input type="checkbox"/> Some of the time | <input type="checkbox"/> A good bit of the time |
| <input type="checkbox"/> Most of the time | <input type="checkbox"/> None of the time |

4. How much of the time, during the past month, have you felt downhearted and blue?

- | | |
|---|---|
| <input type="checkbox"/> All of the time | <input type="checkbox"/> A little of the time |
| <input type="checkbox"/> Some of the time | <input type="checkbox"/> A good bit of the time |
| <input type="checkbox"/> Most of the time | <input type="checkbox"/> None of the time |

5. How much of the time, during the past month, have you felt so down in the dumps that nothing could cheer you up?

- | | |
|---|---|
| <input type="checkbox"/> All of the time | <input type="checkbox"/> A little of the time |
| <input type="checkbox"/> Some of the time | <input type="checkbox"/> A good bit of the time |
| <input type="checkbox"/> Most of the time | <input type="checkbox"/> None of the time |

SATISFACTION WITH LIFE SCALE (SWLS; DIENER, E. ET. AL, 1985)

Satisfaction With Life Scale

Instructions: Below are five statements that you may agree or disagree with. Using the 1 - 7 scale below, indicate your agreement with each item by placing the appropriate number on the line preceding that item. Please be open and honest in your responding.

| 1 | 2 | 3 | 4 | 5 | 6 | 7 |
|------------------------------|--|------------------------------|---|---------------------------|--------------|---------------------------|
| Strongly Disagree | Disagree | Slightly Disagree | Neither Agree nor Disagree | Slightly Agree | Agree | Strongly Agree |
| 1) | In most ways my life is close to my ideal. | | | | | |
| 2) | The conditions of my life are excellent. | | | | | |
| 3) | I am satisfied with my life. | | | | | |
| 4) | So far I have gotten the important things I want in life. | | | | | |
| 5) | If I could live my life over, I Would change almost nothing. | | | | | |

DEMOGRAPHIC QUESTIONNAIRE

Instructions: Read the items below and circle the letter that best describes you or write in the information that reflects you.

1. Your class standing can be best described as:
 - a. Freshman
 - b. Sophomore
 - c. Junior
 - d. Senior
 - e. Graduate student
 - f. Other (Please Specify) _____

2. Are you an International Student?
 - a. Yes (please specify country) _____
 - b. No

3. Which of the following best describes your race/ethnicity?
 - a. African-American/Black (please specify ethnic group if applicable) _____
 - b. Hispanic-American/Latino/Chicano (please specify ethnic group if applicable) _____
 - c. Native-American (please specify ethnic group if applicable) _____
 - d. Asian-American (please specify ethnic group if applicable) _____
 - e. Caucasian/ European-American (please specify ethnic group if applicable) _____
 - f. Middle Eastern/Arab American (please specify ethnic group if applicable) _____
 - g. Multiracial (Please specify) _____
 - h. Other (please specify) _____

4. What is your religious affiliation?
 - a. Christianity (e.g., Catholic, Orthodox, Baptist, Protestant, etc.) (Please specify denomination) _____
 - b. Islam
 - c. Judaism
 - d. Buddhism
 - e. Hinduism
 - f. Non-religious/secular
 - g. Agnostic
 - h. Atheist

i. Other (please specify) _____

5. What sex were you assigned at birth:
- a. Female
 - b. Male
 - c. Intersex
6. What is your current gender identity:
- a. Woman
 - b. Man
 - c. Transgender woman
 - d. Transgender man
 - e. Gender queer
 - f. Gender non-conforming
7. What is your sexual orientation:
- a. Gay
 - b. Lesbian
 - c. Bisexual
 - d. Asexual
 - e. Heterosexual/straight
 - f. Queer
 - g. A sexual orientation not listed
8. What was your age at your last birthday? _____
9. What do you consider your socioeconomic status to be?
- a. Working class
 - b. Middle class
 - c. Upper middle class
 - d. Upper class
 - e. Other _____

10. The highest number (10) represent the people who are the best off, those who have the most money, most education, and best jobs. At the bottom (1) are the people who are the worst off, those who have the least money, least education, and worst jobs or no job. Circle the number that best reflects your situation.

Lowest 1 2 3 4 5 6 7 8 9 10
Highest

11. What is your college cumulative GPA? _____

12. What is your major?_____

Instructions: Read the items below and (a) circle the letter that best describes **your single/primary parent**, or (b) write in the information that most accurately reflects **your single/primary parent**.

13. Would you consider yourself to have been raised in a single parent household at any point before you turned 18 years old?

- a. I was raised by a single mother
- b. I was raised by a single father
- c. I was raised by a single caretaker/guardian
- d. Not sure
- e. I was not raised by a single parent

14. Sex of your parent:

- a. male
- b. female

15. Which of the following best describes your parent's race/ethnicity?

- a. African-American/Black(please specify ethnic group if applicable)_____
- b. Hispanic-American/Latino/Chicano(please specify ethnic group if applicable)____
- c. Native-American(please specify ethnic group if applicable)_____
- d. Asian-American (please specify ethnic group if applicable)_____
- e. Caucasian/ European-American(please specify ethnic group if applicable)_____
- f. Middle Eastern/Arab American(please specify ethnic group if applicable)_____
- g. Multiracial (Please specify)_____
- h. Other (please specify)_____

16. Parent's age? _____

17. Is this parent biologically related to you?

- a. yes
- b. no

18. What is the highest educational level your parent completed?_____

19. What is your parent's occupation? _____

20. What is your parent's yearly income? _____

Instructions: Read the items below and (a) circle the letter that best describes **your family**, or (b) write in the information that most accurately reflects **your family**.

1. How long did you live with a single parent? ____ Years ____ Months
2. In your best estimate, how old were you when your parent became a single parent? ____
3. What was the reason for your single parent home?
 - a. Divorce or Separation
 - b. Custodial parent never married
 - c. Death of a parent
 - d. Other: _____
4. Did you interact regularly with a non-custodial biological parent?
 - a. Yes
 - b. No
5. If yes, in general, how would you rate the quality of your relationship with the non-custodial other parent?
 - a. Very strong
 - b. Somewhat Strong
 - c. Somewhat Weak
 - d. Very Weak
6. Number of Siblings: ____ Number of Step-Siblings: ____
7. Your birth or adoption order:
__ 1st (Oldest or only child) __ 2nd __ 3rd __ 4th __ 5th __ 6th __ 7th __
8th __ 9th __ 10th or more
8. Did your single-parent re-commit or re-marry while you were still living at home for at least a year in what you would consider to be a significant relationship?
 - a. Yes
 - b. No (If no, please move to skip remaining questions and move to next section)
9. If yes, roughly how long did this relationship last? ____ Years
10. Currently, is your primary parent still with their partner?
 - a. Yes

b. No

11. In general, how would you rate the quality of the relationship between your primary parent and their partner?

- a. Very strong
- b. Somewhat strong
- c. Somewhat weak
- d. Very weak

12. In general, how would you rate the quality of **your** relationship with your primary parent's partner?

- a. Very strong
- b. Somewhat Strong
- c. Somewhat Weak
- d. Very Weak

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Vita

Brittany Linton focuses on tying together systemic concerns and the impact on individuals' daily lives. Over time, this multidimensional inquiry has incorporated policy interests and healthcare improvement. Aside from a research focus on unique family systems, Brittany's additional research domains include gender and ethnic-minority health disparities, reducing barriers to healthcare access, implementation and systemic concerns common to interdisciplinary team-based healthcare, and diverse and inclusive leadership structures. Integrating her research and professional experiences, she has proceeded to work in clinical environments that allow her to pursue evaluating how a patient consumer navigates their health needs through research and program improvement. Passionate about decreasing mental health stigma and improving people's interactions with mental health care, she has found it to be most effective to collaborate with a variety of stakeholders from diverse backgrounds.

Brittany's educational background includes a Ph.D. and M.A. from The University of Texas at Austin in Counseling Psychology, in addition to a B.A. in Sociology from Colorado College in Colorado. Through completing her education, Brittany aims to help all individuals become more resilient in how they navigate the choices in their lives. Correspondence concerning this dissertation should be addressed to Brittany Linton.

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