

Family Structure, Family Functioning, and Well-Being in Adolescence: A Multidimensional Approach

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Abstract

Previous studies investigating the relationship between family structure and adolescent well-being yielded ambiguous results. With regard to family functioning, previous research found that balanced family functioning was connected to well-being, whereas unbalanced family functioning was related to ill-being. The aim of our study was to investigate the relationship between family functioning and dimensions of well-being using the EPOCH model. In our study, 158 adolescents (65 males and 93 females) from differently structured families filled out measures of family functioning and well-being. Participants were 16.61 years old on average ($SD = .87$). Results showed no significant impact of family structure on well-being. Balanced family functioning positively, unbalanced family functioning negatively predicted well-being. Family cohesion predicted affective aspects of well-being, whereas cognitive elements of well-being were predicted by family flexibility. The importance of the family's emotional and relational climate, predictability, and structured family functioning are highlighted as important contributors of adolescent well-being.

Keywords: adolescence; family functioning; circumplex model; well-being; PERMA model

1. Introduction

Individuation – the process of finding balance between belonging to one's family of origin and independence from the same family – is an important developmental task of each developmental stage (Grotevant & Cooper, 1986; Mahler, Bergman, & Pine, 1975). This is the case in adolescence as well, where individuation takes place as developing a growing independence from parents and parental figures and transforming the parent-child relationship to a more mutual and symmetrical one (Allison & Sabatelli, 1988; Grotevant & Cooper, 1986). However, despite independence and peer relationships acquiring more and more importance in adolescence (Steinberg, 2001), family relations still have a profound impact on adolescent development and adjustment (Anderson, Sabatelli, & Kosutic, 2007).

1.1. Conceptualizing well-being in adolescence

Flourishing is a possible conceptualization of good life; i.e., functioning effectively and feeling good (Huppert & So, 2013). As Kern, Benson, Steinberg, and Steinberg (2016) refer to flourishing as positive functioning across multiple bio psychosocial domains. It is also important to stress that positive functioning is not equivalent with the lack of emotional, behavioural, and interpersonal problems, but positive functioning should be characterized by the presence of strengths and wellness (Seligman & Csíkszentmihályi, 2000). This definition follows a noble tradition laid down by the World Health Organization (1948, p.1) with defining health as “a state of complete physical, mental and social well-being and not merely the absence of disease or infirmity”. In 2011, Seligman proposed the PERMA model of well-being. This model sees well-being as comprising of five dimensions: Positive Emotions, Engagement, Relationships, Meaning, and Accomplishment. This model can be viewed as a current widespread theory of well-being, Seligman (2018) argues. However, the PERMA model was developed for conceptualizing adult flourishing and needed to be extended to adolescence. Kern and colleagues (2016) formulated a theoretical model that defines five positive characteristics. These characteristics are suggested to influence the PERMA domains in adulthood. That is, Kern and colleagues' model (EPOCH) focuses on the adolescent precursors of the PERMA model (Seligman, 2011). The five dimensions of the EPOCH model and their corresponding PERMA domains are as follows: Engagement – Engagement, Perseverance – Accomplishment, Optimism – Meaning, Connectedness – Relationships, Happiness – Positive Emotions (for definitions see section 3.2. Measures).

1.2. Family structure, family functioning, and well-being in adolescence

In the past decades with the transformation of social values and norms, family structures became highly varied (Bianchi & Casper, 2000). Different family structures create different economic environments and can have an impact on parental stress or parenting style (Thomson, Hanson, & McLanahan, 1994). These in turn might influence the well-being of adolescents living in these differentially structured families. No matter how appealing this reasoning might sound, empirical evidence is far from equivocal in the field. Demo and Acock (1996) reported that adolescents in first-married families have slightly higher levels of well-being than adolescents from single-parent families or stepfamilies, but admitted that few of the differences were statistically significant. Amato (2005) showed that children growing up with two continuously married parents are less likely to experience a wide range of cognitive, emotional, and social problems than their peers from households with only one biological parent. In contrast to the previously mentioned studies, Vandewater and Lansford (1998) found no well-being differences between the investigated family structure groups.

According to the Circumplex Model of Marital and Family Systems (Olson, Sprenkle, & Russell, 1979), family functioning can be best understood with investigations from three aspects (Olson, 2011). (1) Cohesion refers to the emotional ties between family members. (2) Flexibility refers to the quality of family leadership, organization, roles, rules, and negotiations. (3) Communication consists of the positive communication skills used by family members.

The main hypothesis of this model is that more balanced levels of family functioning are connected to healthy, whereas unbalanced levels to problematic family functioning. With respect to cohesion, unbalanced family functioning can result from either disengagement or enmeshment (Olson, 2000). Disengaged families are characterized by independence, underinvolvement in family issues, and a relative lack of feelings of togetherness. Adolescents from disengaged families show several symptoms of maladjustment: they are more depressed (Bernstein, Warren, Massie, & Thuras, 1999), present more externalizing symptoms (Yahav, 2002) and are less empathic (Kaufman, 2011). In contrast, enmeshed families have members who are overinvolved and leave little private space for each other. Adolescents from enmeshed families can develop psychosomatic symptoms (Minuchin et al., 1975) and foreclosed identity (Campbell, Adams, & Dobson, 1984). Balanced cohesion – a healthy form of family functioning – is characterized by an equilibrium between closeness and privacy. In these families the family is seen as a network of support (Sherbourne & Stewart, 1991). Cohesive family functioning is a potential source of adolescent well-being (McFarlane, Bellissimo, & Norman, 1995; Rask, Åstedt-Kurki, Paavilainen, & Laippala, 2003).

With regard to flexibility, extreme high levels of disorganization or the inability of change are the source of unbalanced family functioning (Olson, 2000). Chaotic families can be described as unstructured with regard to leadership, roles, and discipline. Adolescents from chaotic families report more frequent suicide-related thoughts (Paluszny, Davenport, & Kim, 1991), and are more likely to have externalizing symptoms, such as conduct disorder (Kazdin, 1993) or homicide (Darby, Allan, Kashani, Hartke, & Reid, 1998). Rigid families are characterized by the inability to adapt to changes in the environment or inside the family. In these families parents are authoritarian leaders with strict methods of discipline. Rigidity is connected with inadequate problem solving skills, suicidal ideation, loneliness, and low levels of sense of coherence are frequent in adolescents from rigid families (Carris, Sheeber, & Howe, 1998; Sharabi, Levi, & Margalit, 2012). Balanced flexibility – the healthy form of family adaptation – is characterized by consequent rules, roles and behavioural patterns that can be changed when necessary. Associations can be found between flexible family functioning and adolescent well-being (Rask et al., 2003).

The third major characteristic of family functioning is communication between family members. Several authors (e.g., Eisenberg, Olson, Neumark-Sztainer, Story, & Bearinger, 2004; Satir, 1972; Watzlawick, Bavelas, Jackson, & O'Hanlon, 1967) highlight the importance of open, congruent, and an overall positive communication as a source of development and well-being in family members including adolescents.

2. The present study

Previous research showed that family structure and family functioning are both important family variables influencing well-being in adolescents. In the present study, we would like to contribute to this body of research as follows. Using the EPOCH model of adolescent well-being (Kern et al., 2016), we aimed at investigating the impact of family structure and family functioning on multiple biopsychosocial domains.

Although we wanted to investigate the relationship between family structure, family functioning, and well-being in a multidimensional approach, the absence of previous multidimensional studies prevented us from formulating specified hypotheses. Thus, based on the above reviewed literature, we formulated the following hypotheses.

Hypothesis 1. We expected that adolescents from intact families (living with and raised by both biological parents) showed higher levels of well-being than adolescents from alternatively structured families (e.g., families with stepparent; single-parent families).

Hypothesis 2. We expected that balanced family functioning (cohesion, flexibility), positive family communication, and satisfaction with family life would be positively related to well-being, whereas unbalanced family functioning (disengagement, enmeshment, rigidity, and chaos) would be negatively related to well-being in adolescents.

3. Method

3.1. Participants and procedure

Participants were recruited for the study entitled “Multidimensional measurement of adolescent well-being” from secondary schools in Pécs that is the fifth largest city in Hungary with an approximate population of 150,000 people. After receiving informed consent from both parents and participants, 158 secondary school students (65 males and 93 females) participated in the study. They answered questions about demographic data and filled out the questionnaires described in section 3.2 in their classrooms in the presence of a research assistant. Participants’ average age was 16.61 years ($SD = .87$; ranging from 15 years to 19 years). With regard to family composition, 115 participants came from intact families (living in a household with both biological parents) and 43 participants came from alternatively structured families (e.g., single-parent families, patchwork families). The study received ethical approval (No. 2017/103) from the United Ethical Review Committee for Research in Psychology.

3.2. Measures

To measure perceptions of family functioning we used the Family Adaptability and Cohesion Evaluation Scales IV (FACES IV; Olson, 2011). FACES IV is a 62-item, self-report clinical and research tool designed to measure three main aspects of family functioning according to the Circumplex Model of Marital and Family Systems (Olson et al., 1979): cohesion, flexibility, and communication. Cohesion refers to the emotional bond between family members and was measured by the following three scales: (1) Disengagement – low levels of emotional commitment and high levels of personal autonomy; (2) Cohesion – optimal balance between emotional closeness and personal autonomy between family members; and (3) Enmeshment – emotional closeness with little personal autonomy.

Flexibility refers to the family’s capacity to adapt its functioning to challenges and new situations and was measured by the following three scales: (1) Rigidity – inability to or little capacity for change even when it was required; (2) Flexibility – flexible family rules and roles for optimal adaptation; (3) Chaos – unstructured and inconsequent family rules or roles. Communication refers to the positive, validating form of communication between family members and was measured by a single scale (Communication). A further scale was included to measure participants’ satisfaction with family functioning (Satisfaction). Participants indicated their agreement with statements or satisfaction with aspects of family life on a 5-point Likert scale.

To measure adolescents’ well-being, we used the EPOCH Measure of Adolescent Well-being (EPOCH; Kern et al., 2016). EPOCH is a multidimensional 20-item measure that was designed to assess the adolescent precursors of the components of the PERMA theory of flourishing (Seligman, 2011). Statements referring to the five dimensions of well-being were evaluated on a 5-point Likert scale. The five dimensions of well-being are as follow: (1) Engagement refers to the capacity to focus on what one is doing in the short run, and to interest and involvement in life activities on the long run; (2) Perseverance refers to the capacity of pursuing goals; (3) Optimism refers to a predominant conviction that good things will happen to the person in the future; (4) Connectedness refers to the opportunity of maintaining satisfying relationships with others; (5) Happiness refers to a stable positive mood of the individual. With summing the scores on the five dimensions, an EPOCH Total score was calculated as well.

4. Results

First, we computed means, standard deviations, and internal reliability indices for the measured variables (Table 1). Cronbach α values showed that all scales had good to excellent internal reliability.

With regard to means, we can conclude that our participants came from predominantly optimally functioning families, as indicated by the scores of the Cohesion and Flexibility scales compared to the unbalanced family functioning scales (Disengagement, Enmeshment, Rigidity, and Chaos).

Table 1. Means, standard deviations, and internal reliability indices (Cronbach α s) for the measured variables

Variables			<i>M</i>	<i>SD</i>	Cronbach α
Perceived family functioning (FACES IV)	Cohesion	Disengagement	14.45	4.70	.74
		Cohesion	28.85	5.20	.87
		Enmeshment	15.32	4.32	.69
	Flexibility	Rigidity	17.13	5.37	.77
		Flexibility	26.12	5.73	.82
		Chaos	13.61	4.86	.75
	Communication		39.06	6.73	.82
Satisfaction (with family functioning)		36.86	9.24	.92	
Well-being (EPOCH)	Engagement		14.16	2.93	.75
	Perseverance		15.05	2.65	.68
	Optimism		14.87	3.12	.76
	Connectedness		17.76	2.76	.79
	Happiness		15.87	3.30	.87
	EPOCH Total		77.70	10.43	.88

To test the differences in well-being between adolescents from families with different structures (intact vs. alternatively structured families), we used ANOVAs. According to the results of these ANOVAs (Table 2), we found significant difference between the two groups neither for the EPOCH Total score nor for any dimensions. Thus, family composition had no significant effect on adolescent well-being in our study.

Table 2. Differences between adolescents from intact vs. alternatively structured families on the dimensions of well-being; results of ANOVAs

Variables (EPOCH)	Adolescents from intact families (n = 115)		Adolescents from alternatively structured families (n = 43)		<i>F</i>	<i>p</i>
	<i>M</i>	<i>SD</i>	<i>M</i>	<i>SD</i>		
Engagement	14.16	2.91	14.16	3.02	< .001	.99
Perseverance	15.25	2.56	14.51	2.83	2.47	.12
Optimism	14.90	2.95	14.79	3.58	.04	.85
Connectedness	17.88	2.63	17.44	3.10	.78	.38
Happiness	15.77	3.27	16.12	3.42	.34	.56
EPOCH Total	77.96	10.04	77.02	11.51	.25	.62

To test the relationship between perceived family functioning and adolescent well-being, we used Pearson's correlations and multiple linear regressions. Multiple linear regressions predicting well-being were used in order to control for age, gender, and the potential overlap between scales measuring family cohesion and flexibility. Pearson's correlations (Table 3) showed that adolescents with higher levels of general well-being (EPOCH Total) reported their families to be less disengaged, more cohesive, more enmeshed, more flexible, and less chaotic. More engaged adolescents reported more cohesive and more flexible families; more perseverant adolescents reported less disengaged, more cohesive, more enmeshed, more flexible, and less chaotic families. More positive attitudes towards the future (Optimism) was positively correlated with adolescents' perception of a less disengaged, more cohesive, more enmeshed, more flexible, and less chaotic family. Adolescents who reported more satisfaction with interpersonal relationships (Connectedness) also described their family functioning as less disengaged, more cohesive, more flexible, and less chaotic. Adolescents reporting more positive affect (Happiness) perceived their families to be less disengaged, more cohesive, more enmeshed, more flexible, and less chaotic.

Positive, validating communication and satisfaction with family life were indiscriminately positively correlated with general well-being (EPOCH Total) and each dimension of well-being. The strength of correlations ranged from weak to moderate, except for Enmeshment where all significant correlations were negligible in magnitude ($|rs| < .17$).

Table 3. Relationship between perceived family functioning and well-being; results of Pearson’s correlations (rs)

			Well-being (EPOCH)					
			Engagemen t	Perseveranc e	Optimis m	Connectednes s	Happines s	EPOCH H Total
Perceived family functioning (FACES IV)	Cohesion	Disengagement	-.065	-.222**	-.288***	-.333***	-.307***	-.346**
		Cohesion	.216**	.385***	.423***	.480***	.419***	.545**
		Enmeshment	.061	.167*	.167*	.023	.157*	.165*
	Flexibility	Rigidity	.003	-.004	-.026	-.122	-.089	-.069
		Flexibility	.258**	.441***	.376***	.338***	.339***	.494**
		Chaos	-.153	-.338***	-.329***	-.291***	-.203*	-.369**
	Communication		.234**	.399***	.362***	.345***	.406***	.496**
	Satisfaction (with family functioning)		.198**	.346***	.409***	.355***	.393***	.485**

Note: * $p < .05$; ** $p < .01$; *** $p < .001$.

Multiple hierarchical regressions (Table 4) showed that a significant proportion of variance of general well-being and each dimension of well-being could be explained by age, gender, and family cohesion and flexibility variables. Adolescents reporting emotionally committed family members (Cohesion) and the lack of unstructured and inconsequent family rules and roles (Chaos) reported higher levels of general well-being. With regard to Engagement, adolescents who perceived their families capable to adapt to challenges (Flexibility) reported higher levels of interest and involvement in life activities. Considering Perseverance, adolescents who reported flexible (Flexibility) yet well-structured (lack of Chaos) families were more likely to pursue their long-term goals even when facing obstacles. With regard to Optimism, adolescents reporting the absence of unestablished family rules and roles (lack of Chaos) reported more positive attitudes towards their future. Connectedness was the only dimension of well-being, where demographic variables also emerged as significant predictors. Younger adolescents and girls reported higher levels of relational well-being. With regard to family functioning variables, adolescents who perceived their family members to be more emotionally committed to the family (Cohesion) reported more satisfaction in their relationships in general. The same family variable was predictive of Happiness as well. Adolescents with perceptions of a more cohesive family (Cohesion) reported more positive affect.

Table 4. Perceived family cohesion and flexibility predicting well-being; results of multiple linear regressions (coefficient βs)

	Well-being (EPOCH)					
	EPOCH Total	Engagement	Perseverance	Optimism	Connectedness	Happiness
Age	-.05	.10	.02	-.07	-.16*	-.07
Gender (male → female)	.09	.09	.10	-.08	.25**	-.02
Disengagement	.10	.20	.16	.05	.03	-.05
Cohesion	.37**	.11	.06	.26	.53***	.34*
Enmeshment	.09	< .01	.14	.15	-.08	.10
Rigidity	.05	.05	.06	.03	.04	-.01
Flexibility	.19	.26*	.37**	.09	-.05	.03
Chaos	-.19*	-.12	-.29**	-.22*	-.05	-.01
R ²	.35***	.11*	.28***	.24***	.31***	.19***

Note: * $p < .05$; ** $p < .01$; *** $p < .001$.

5. Discussion

Our study was aimed at investigating the relationship between perceived family functioning and five dimensions of adolescent well-being. Our findings revealed that there was no significant difference in any dimensions of well-being between adolescents from intact and alternatively structured families. This finding is in line with previous research (Demo and Acock, 1996; Vandewater and Lansford, 1998) that reported no or very little difference between the levels of well-being of adolescents living in different family structures. To explain the lack of or the small magnitude of relationship between family structure and adolescent well-being, Demo and Acock (1996) argue that family structure is a distant family variable and more proximal variables (such as family functioning) could account for individual differences in adolescents' well-being.

Balanced family functioning (cohesion and flexibility), positive communication, and satisfaction with family life were positively associated with well-being, whereas unbalanced family functioning – especially disengaged and chaotic family functioning – were negatively associated with well-being. These results echo the findings of previous studies (e.g., Bernstein et al., 1999; Carris et al., 1998; Yahav, 2002), where different forms of maladjustment (e.g. anxiety, externalizing symptoms, suicidal ideation) were related to unbalanced family functioning, whereas well-being was related to balanced cohesion and balanced flexibility in the family. These results highlight the importance of family functioning for adolescent well-being in general. The indiscriminate relationship between family communication, satisfaction with family life, and the different aspects of adolescent well-being might be the function of the generalized nature of the two scales (i.e., Communication and Satisfaction). Whereas the other six scales focus on different forms of family functioning, Communication and Satisfaction are not domain-specific. Thus, they might be permanently present in all biopsychosocial aspects of well-being (Kern et al., 2016).

However, based on the results of multiple linear regressions, findings were more nuanced than expected. On the one hand, some aspects of well-being – such as engagement, perseverance, and optimism – were predicted by family variables reflecting different aspects of flexibility. On the other hand, affective (happiness) and relational (connectedness) aspects of well-being were predicted by family cohesion. The dimensions explained by different groups of variables resemble the two distinct aspects of well-being, namely affective (connectedness and happiness) and cognitive (engagement, perseverance, optimism) aspects of well-being (Hofman et al., 2014). Thus, affective well-being seems to be predicted by family cohesion. This is not surprising, because family cohesion by definition refers to the close relationships and positive affects between family members (Olson, 2011). On the other hand, cognitive elements of well-being seem to be predicted by balanced flexibility and lack of chaos in family functioning. An underlying cause for this can be the relationship between family chaos, dysregulation, and impulsivity (Dankoski et al., 2006; Deater-Deckard et al., 2009; Hardaway et al., 2012). Further, impulsivity is negatively associated with flow proneness (Gyurkovics et al., 2016), and lack of perseverance constitute one of the five factors of impulsivity according to Whiteside and Lynam (2001). Meaning in life – the adult sequel of optimism – was found to be associated with unpredictability as a component of perceived stress (Bauer-Wu & Farran, 2005). Thus, we can conclude that chaotic family functioning with its unpredictability and impulsivity as its consequence are associated with the cognitive aspects of adolescent well-being.

Some limitations of the study have to be mentioned. First, our study design was cross-sectional and relied only on self-reports of adolescents. Thus, we cannot surely establish the direction of causation between the variables. No matter how tempting it is to believe that family functioning led to adolescent well-being, we cannot ignore the other direction between the variables. Adolescent with higher levels of well-being – stemming from source other than family functioning – could have a perceptual bias, leading them to more positive perceptions of the family. Second, the relatively small sample size prevented us to test the relationship between family functioning and well-being separately for boys and girls. This would be important because previous studies found different predictors of well-being for males and females (e.g., Froh, Yurkewicz, & Kashdan, 2009).

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