



Simmons Longitudinal Study

Parent Newsletter: Summer 2004



Simmons College

School of Social Work

Greetings! After this intensely cold winter, we thought the warm weather would never come. We hope this newsletter finds you well and ready to enjoy the upcoming summer! While some of you may be relaxing poolside, the Simmons Longitudinal Study staff are busy writing papers and presenting data at various conferences based on all the information you provided during your most recent interview. Thanks to all of your help, we have a lot of great information on which to report!

In this issue, we provide you with some highlights from the age 30 interviews. In the past, we have received several requests for specific findings from the SLS, so... your wish is our command! In this newsletter you will find an article comparing your life at age 30 to your son's/daughter's life at age 30, an article on social support, and an article on the importance of family.

We would like to thank those of you who returned your Winter 2003 postcards and extend a special congratulations to all the winners of the Winter 2003 Drawing. Each winner was awarded \$100. Don't forget to fill out and return the enclosed postcard and your name could appear in the next newsletter (and you could be \$100 richer)!

Sincerely,

Helen Reinherz, Project Director

\$100 WINNERS!



AGE 30: THEN & NOW

Do you ever wonder how your life at age 30 differs from your son's/daughter's life at age 30? Have the societal expectations for marriage, career, education, and having children changed?

Have you heard the saying "you can't compare apples and oranges?" Similarly, we cannot make exact comparisons between you at age 30 and your son/daughter when they were 30 because the information we have on you and your son/daughter is not *exactly* the same. What we can do is obtain an idea of your life at roughly age 30 compared to your son/daughters' lives at age 30. Let's see how things have changed...or stayed the same...

Parenting

Then: Almost all of you (98%) had made the transition to parenthood by age 30. Only 9 of you had not become a parent by age 30!

Now: By age 30, 36% of your sons/daughters were parents.

Comparison: As you can see, there is quite a dramatic increase in the age at which people are making the transition to parenthood. You may have experienced some societal or familial pressure to settle down and start a family. Today, it seems that most 30-year-olds are afforded the opportunity to experience more of life before they become parents. Societal and personal factors, such as women pursuing their ca-

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THE BENEFITS OF SOCIAL SUPPORT



People need people. How many times in the last week have you relied on someone for a small favor, to lend you something, or for some much needed advice? It turns out that this support is more vital than you may think... especially during emerging adulthood. Some of you may remember the term “emerging adulthood,” from our previous newsletter. To refresh your memory, “emerging adulthood” is the term used to describe the period between adolescence and adulthood (18-30) when individuals feel they are no longer adolescents, but not quite adults yet either. During this stage of life, emerging adults are beginning to establish themselves outside of their families-of-origin as they prepare for adulthood. Creating a social support network of adult friendships, colleague relationships, and intimate partnerships becomes extremely important. During emerging adulthood, social support seems to be particularly influential, even serving as a protective factor.

During these years, emerging adults experience an increase in satisfaction with social support and in overall well-being. However, and not surprisingly, emerging adults who have mental health problems do not fare as well. In general, individuals with mental health problems report lower levels of satisfaction with social support. A closer look at emerging adults with mental health problems reveals two important groups: *remitters* (those who had a mental health problem by age 18, but no problem between 18 and 30) and *persisters* (those who had a mental health problem by age 18, and continued to have a problem between 18 and 30).

The focus of this specific research paper (presented March 14, 2004 at the Society for Research in Adolescence by SLS Senior Research Associate Jennifer Tanner) was to understand what makes remitters different from persisters. Why do some emerging adults recover from a disorder while others continue to experience problems into adulthood? We, as researchers, want to understand these differences so that we can learn what helps people recover from mental health problem(s). Comparisons between the two groups (remitters and persisters), at age 30, revealed several interesting differences. Remitters were more likely to be married, parents, and home-

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reer goals, furthering their educations, and delaying pregnancies to travel or spend time with their partners have all impacted this trend. During your generation, women were not only younger when they started having children, but they also had more children! 20% of you had not only 1, but 4 or more children by age 30!!! Of your sons/daughters who have children, only 7% had 4 or more children (the majority had 2 children).

Work/Career

Then: At age 30, 93% of you (males) and 23% of you (females) were working.

Now: At age 30, 93% of your sons and 84% of your daughters were working.

Comparison: While the percentage of working 30-year-old males has remained the same over the past 25 years, there has been a substantial increase in the number of women in the work force.

Homemakers/Stay-at-Home-Parents

Then: At age 30, 78% of you (females) were homemakers.

Now: At age 30, 10% of your daughters were homemakers.

Result: In the past quarter century, there has been a tremendous shift in homemaker status. Many women are no longer expected or afforded the opportunity to stay home and take care of the children and the house. As illustrated above, more women have joined the work force, which may be due to the increased cost of living as well as women pursuing their career goals.

What will life be like when your grandchildren are 30?

We can only imagine...

FAMILY MATTERS

The word has really been getting out! Recently, Dr. Helen Reinherz, Project Director, summarized and released an overview of findings from the Simmons Longitudinal Study (SLS) that have been published throughout the years. Now, we are bringing the major findings to you – we thought you might be interested in three themes particularly relevant to family: protective family factors, divorce, and working mothers.

Protective Family Factors

The study overview presented by Dr. Reinherz highlights one of the main goals of the Simmons Longitudinal Study: to identify protective family factors that help children, adolescents, and young adults overcome difficult times in their lives. In general, protective factors are the ingredients that help create conditions to assist youth in overcoming issues that otherwise could cause problems in their lives. Data has revealed several interesting findings about what constitutes a protective family factor. Over the years we have found that each of the following serves as a protective factor:

- * *Having a family member to turn to for advice*
- * *Having a family member to confide in*
- * *Having a cohesive (close and supportive) family*

These few factors are related to many positive outcomes.

For example:

- Adolescents who had a *family member they considered a confidant or felt comfortable asking advice from* had fewer behavioral and emotional problems at age 18.
- At age 18, adolescents who *had a family member in whom they could confide* were less likely to develop depression and had fewer behavioral and emotional problems than adolescents who did not have a confidant.
- Adolescents who had *cohesive (close and supportive) families* experienced a number of positive outcomes. They were more likely to receive school and community honors and had higher grade point averages. They

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owners by age 30. On the other hand, persisters were less likely to have made transitions to marriage and parenthood and less likely to own homes. So, what might help explain these differences? One interpretation of the group differences is that by engaging in “stabilizing” roles, such as being a spouse or parent, it is possible that the risk of mental health problems is weakened. By becoming committed to such roles, individuals are sometimes pushed to provide consistent care to others, thus, “stabilizing” their own behaviors and moods.

A second key difference between the two groups was the extent to which remitters and persisters reported interpersonal problems. Dr. Tanner investigated whether the two groups differed on the extent to which they reported the following interpersonal problems:

- * **Reports of not having a close friend/companion**
- * **Reports of not having people you can depend on**
- * **Reports of not seeing enough of the people you feel close to**
- * **Reports of not having enough close friends**
- * **Reports of not having someone who shows you love/ affection**

Over the course of emerging adulthood, from 18 to 30, remitters experienced a decrease in **all** of these interpersonal problems. That is, those who did not experience mental health problems during emerging adulthood seemed better able to resolve interpersonal problems they had previously experienced. In contrast, persisters experienced

either increases in interpersonal problems or their level of problems remained high.

These are striking findings! By resolving interpersonal problems, remitters were able to increase the quality of their social support systems. These findings underscore the tremendous importance of strong social support, especially during emerging adulthood.

The importance of friends, families, colleagues, and intimate partners sometimes goes unrecognized. These results remind us to call our friends and family and thank them for all of their support.

Protective factors are the ingredients that help create conditions to assist youth in overcoming issues that otherwise could cause problems in their lives.



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Return your postcard by July 21



And be entered in a raffle for one of five chances to win \$100

(Or be entered to win by submitting your information via email at sls@simmons.edu)

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were also less likely to experience a number of behavioral and emotional problems.

In sum, the benefits of a close, supportive family are numerous and far-reaching. A close family is a tremendous resource that can support a child or adolescent throughout his/her life.

Divorce

Do you think divorce affects children? Research on whether divorce has negative effects on children is complex. The answer to this question is – in some ways “yes,” and in some ways “no.” Findings from the SLS have helped make the association between divorce and its effects on children a little clearer. At ages 9 and 15, children and adolescents whose parents were divorced experienced more behavioral and emotional problems in the short-term than children and adolescents whose parents were not divorced. However, these effects were only short-term. When a divorce occurs, initially children may need some time to adjust to the changes in their lives. This is quite contrary to the grim outlook for children of divorce painted by some researchers. Parents may feel pressure to stay together “for the sake of the children,” but this is not always the best option. In general, research suggests that *family conflict* affects children’s well-being more than divorce or separation. While divorce may have some negative, temporary effects, divorce, per se, is not as harmful as family conflict.

Working Mothers

Findings from the U.S. Census Bureau indicate that in 1976, 31% of women with a child (age 1 or younger) were involved in the work force. Currently, 59% of mothers work.



Do you think children whose mothers stay at home fare better than children whose mothers work? According to our findings, at age 9, children whose mothers were working performed no worse, and in some cases better, than children whose mothers remained at home. Additionally, children whose mothers returned to school to further their educations showed *improved* performance in school and behavior. Are the findings a bit surprising?

And so, what did Dr. Reinherz conclude from this review of 20 years of study? **Family matters!!!** As this summary of findings describes, the family has a *strong* influence on children’s development and not necessarily in the ways that you might think. Your participation in the Simmons Longitudinal Study has enabled SLS researchers to identify factors that contribute to positive and healthy development in children. These factors will be taken into consideration when planning programs and interventions to prevent children from developing problems.