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# Predictors of Coparenting Relationship Quality in African American Single Mother Families: An Ecological Model

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## Abstract

Nonmarital coparents, or adults who assist mothers with childrearing, play a significant role in the lives of African American single mothers and their children. Yet relatively little research has examined correlates of the quality of the coparenting relationship in these families. Using a broad ecological framework, the current study examined correlates of maternal-report of coparenting relationship quality in a sample of 242 low-income African American single mother families in the southeastern United States. Cross-sectionally, at each of two time points, neighborhoods characterized by *lower* levels of risk, *higher* levels of lax maternal parenting, and *higher* levels of maternal depressive symptoms were associated with a more compromised coparenting relationship. These findings were partially replicated in longitudinal analyses predicting coparenting relationship quality at Assessment 2 from Assessment 1 variables. Clinical implications and future research directions are discussed.

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**Keywords**

African American, single mother, coparenting, ecological model

Approximately one-half (51%) of African American youth in the United States are currently being raised in single mother homes (U.S. Census Bureau, 2006). Given this demographic shift, researchers interested in the study of African American families have focused on the mother-child dyad with relatively less attention to the role of the other adults and family members who typically assist African American single mothers with parenting (see Jones, Zalot, Foster, Sterrett, & Chester, 2007, for a review). The study of "coparenting," or the processes by which two adults negotiate childrearing, has largely focused on European American parents and various transitions in the family, including the transition to parenthood, children's transition to adolescence, and parental divorce (e.g., Ahrons, 1981; Coiro & Emery, 1998; McHale, 1997). In each of these literatures, compared with parents who have difficulties coordinating their coparenting efforts, parents who more effectively negotiate and coordinate their childrearing responsibilities (i.e., more effectively coparent) have youth with better psychosocial adjustment. More recently, the relevance of the coparenting construct for ethnically diverse (Feinberg, 2002) and single parent (Van Egeren & Hawkins, 2004) families has been highlighted as well (see Jones et al., 2007; McHale, Khazan, & Erera, 2002, for reviews).

Although a growing number of adult African American mothers are "single" by definition of their marital status (see McLoyd, Cauce, Takeuchi, & Wilson, 2000, for a review), relatively few are parenting alone. The majority (97%) of adult African American single mothers identify another adult or family member who assists with childrearing (i.e., a nonmarital "coparent"), including the child's biological father, maternal grandmother, maternal aunt, or other relatives and friends (Jones, Shaffer, Forehand, Brody, & Armistead, 2003). Moreover, the quality of the relationship that adult African American single mothers have with their nonmarital coparent is associated with maternal and child adjustment, as well as family functioning (see Jones et al., 2007, for a review). African American single mothers who experience lower levels of support and greater levels of conflict in their coparenting relationships evidence greater depressive symptomatology and compromises in parenting behavior (Jones, Forehand, Dorsey, Foster, & Brody, 2005; Jones, Shaffer, et al., 2003). More compromised coparenting relationships are, in turn, associated with more psychosocial difficulties for youth from African American single mother homes and appear to moderate the impact of other

risk factors (i.e., neighborhood violence) on child adjustment (Forehand & Jones, 2003; Jones et al., 2005).

Given the importance of coparenting for predicting child and adolescent adjustment, a growing literature has begun to focus on identifying the factors that are associated with higher quality coparenting relationships (e.g., Stright & Bales, 2003). Although these studies were not conducted within an ecological contextual framework, or a framework that considers the interrelationship of multiple contexts or systems (Bronfenbrenner, 1979), *per se*, the body of work to date suggests the relevance of a contextualized perspective. In his ecological model, Bronfenbrenner (1979) posited that human development should be conceptualized as the product of the interaction of a series of four nested systems, each of which influences and is influenced by the other systems. The individual (i.e., most often the child) is the focus of much of the research to date that utilizes an ecological framework (e.g., including the familial and neighborhood contexts, in child adjustment); however, there is also a well-established tradition of using an ecological framework to characterize the systems that shape the individual functioning of adults (e.g., adult mental health; Lloyd & Rossman, 2005; McDonald, Poertner, & Pierpont, 1999), as well as the functioning of subsystems within each of the systems (e.g., the familial context; Crnic, Friedrich, & Greenberg, 1983; Cummings, Davies, & Campbell, 2000; Jones, Forehand, Brody, & Armistead, 2003).

Building on this tradition, the current study aimed to identify an ecological model of coparenting in African American single mother families. Specifically, the aim was to develop a comprehensive ecological model representing those subsystems most proximal to the coparenting relationship, including a continuum of influences from those most distal to the coparenting relationship (i.e., neighborhood factors) to those more proximal (i.e., maternal factors, e.g., Stockhammer, Salzinger, Feldman, Mojica, & Primavera, 2001). Consistent with ecological systems theory, the proposed model also included both structural (e.g., demographic characteristics) and psychological (e.g., individual adjustment; Coulton, Korbin, & Su, 1999) influences within each subsystem. Importantly, such a distinction allows for the examination of relatively static, structural factors relevant to the quality of the coparenting relationship (e.g., maternal), as well as psychological factors potentially more malleable to intervention (e.g., maternal depression). Importantly, the aim of this study was not to identify a particular number of factors at each level of the ecological model (i.e., a balanced model). Rather, the aim was to identify factors that interrelated lines of empirical research highlighted as potentially important to consider when examining coparenting relationships in African American single mother families and to test the

relative role of these multiple, interrelated factors within a comprehensive ecological framework.

### *Influences on the Coparenting Relationship*

One primary aspect of the factors highlighted by ecological systems theory is the community in which families live (Bronfenbrenner, 1979; Forehand & Jones, 2003). Although the role of neighborhood context has yet to be examined in a comprehensive ecological model of coparenting, several separate but interrelated lines of research suggest the likely influence of certain neighborhood risks on coparenting in African American single mother families. For example, a review of studies examining low-income families found that experiencing chronic neighborhood stress and trauma, such as crime or gang activity, compromises family subsystems, including the quality of the relationships between parenting figures (Kiser & Black, 2005). Similarly, related work highlights a link between the characteristics of the neighborhoods in which families reside and aspects of the family that are related to the quality of the coparenting relationship (e.g., family routines, family cohesion). A study of Latino youth and families, for example, found that neighborhood crime, combined with maternal distress and perceived financial strain, was associated with disrupted family routines (Prelow, Loukas, & Jordan-Green, 2007). Lower levels of neighborhood cohesion, or willingness to intervene on behalf of fellow residents, has also been linked to lower levels of family cohesion (Deng et al., 2006). Importantly, urban neighborhoods have been found to possess higher concentrations of many of the community characteristics associated to date with compromised family relationships (e.g., crime, violence; Department of Justice, 2004).

A second aspect considered equally important, and some would argue even more so, to ecological systems theory is the family subsystem or context (Cummings, Davies, et al., 2000). Literature on several aspects of the family context suggests important links with the quality of the coparenting relationship in general, and in African American single mother families, in particular. Given that financial strain has been linked to other domains of impaired family functioning (e.g., Prelow et al., 2007), it is likely that income may influence coparenting in African American single mother families, many of whom reside in poverty (Bishaw & Semega, 2008).

Additional family factors may be related to coparenting in African American single mother families as well. For example, in a study of nonresidential fathers, fewer children in the home was associated with a more positive mother-father coparent relationship (Arditti & Kelly, 1994). In addition to the

income and number of children, both ecological systems (Bronfenbrenner, 1997; Cummings, Davies, et al., 2000) and family systems theories (Nichols & Schwartz, 2005) suggest that relationships within family systems (i.e., family subsystems) influence one another as well (e.g., coparenting and parent-child relationships). Most relevant to an ecological model of coparenting in African American single mother families, Lindahl and Malik (1999) found that conflict between two married parents was associated with lax parenting in their study of Caucasian and Hispanic families.

A final subsystem or context that must be considered is the role of the child who is the focus of the coparenting relationship. Prior research suggests three child factors that may be important to the quality of the coparenting relationship in African American single mother families. First, theoretical and empirical work demonstrate that children's entry into adolescence can put a strain on family relationships, including compromising relationships between parents (e.g., Baril, Crouter, & McHale, 2007; Carter & McGoldrick, 2005; Margolin, Gordis, & John, 2001). Thus, the role of child age deserves attention in investigations of coparenting in African American single mother families. Second, the gender of the child may also impact the nature of the coparenting relationship. Some work suggests that parents of boys may experience more negative relationship dynamics that may tax coparenting relationships (Margolin et al., 2001), and that such conflict may more negatively influence the relationships that parents have with their male children (Jouriles & Norwood, 1995). Third, there is some evidence that youth psychosocial adjustment may impact relationships between caregivers. Youth externalizing problems (e.g., aggression), which African American youth from single mother homes have been found to exhibit at a higher level (Bank, Forgatch, Patterson, & Fetrow, 1993), have been found to predict increases in marital conflict (Jenkins, Simpson, Dunn, Rasbash, & O'Connor, 2005). Similarly, higher levels of internalizing symptoms have been linked to greater family dysfunction in homes of married couples (see Hughes & Gullone, 2008, for a review). As a consequence, the roles of both child structural and psychological factors in the quality of the coparenting relationship in African American single mother families merit consideration.

Finally, the factors most proximal in an ecological model of the coparenting relationship quality are characteristics of the individual parent. Although, this is a relatively new area for empirical investigation, some associations have been highlighted in related literatures. European American parents with higher levels of education have been found to report higher quality coparenting relationships (Stright & Bales, 2003). Given that African Americans are less likely to advance in their education relative to Caucasians (e.g., Allen,

1985; Rovai, Gallien, & Wighting, 2005), the relative role of education in the quality of the coparenting relationship in African American single mother families merits investigation. In addition, among mothers of infants, older mothers have been found to report more positive coparenting relationships (Van Egeren, 2003). Because many African American single mothers have their first child during their teenage or young adult years (Horton, 2006; Jacobs et al., 1994; Talashek, Alba, & Patel, 2006), age may be an important correlate of the quality of the coparenting relationship in African American single mother families. Parental psychological functioning also appears to play a role in coparenting relationship quality. For example, European American parents with fewer psychological problems have been shown to maintain more positive coparenting relationships than parents with more psychological problems (e.g., Belsky, Crnic, & Gable, 1995; Whisman, Uebelacker, & Weinstock, 2004). Similarly, European American parents who experience lower levels of stress enjoy more positive coparenting relationships (e.g., Belsky et al., 1995). Accordingly, the relative role of maternal psychological functioning should be examined in a study of an ecological model of coparenting in African American single mother families as well.

### *Research Question and Hypotheses*

Although the significance of examining correlates of coparenting relationship quality in married families or families of other ethnic groups cannot be discounted, the generalizability of this work to coparenting relationships in African American single mother families is questionable. In addition, the current body of research fails to capture important ecological factors of particular relevance to African American single mother families, including such contextual factors as income (Kiser & Black, 2005) and neighborhood risk (Jarrett & Burton, 1999), considered in the context of each other. Accordingly, the current study examined correlates of coparenting relationship quality in a sample of low-income African American single mother families within a theoretically and empirically driven ecological framework. Extrafamilial (e.g., neighborhood risk), familial (e.g., income), child (e.g., gender), and maternal (e.g., depressive symptoms) contexts were examined. Within these contexts, both structural (e.g., maternal education) and psychological (e.g., maternal depression) variables are investigated.

In an effort to develop an ecological model of coparenting in African American single mother families, we proposed a risk model in which multiple risk factors have unique effects on the quality of the coparenting relationship (e.g., Ackerman, Izard, Schoff, Youngstrom, & Kogos, 1999; Jones, Forehand,

Brody, et al., 2003). It was predicted that the quality of the coparenting relationship would be more compromised in the context of higher levels of ecological risk, across a range of ecological stressors, including extrafamilial (e.g., lower income families; Kiser & Black, 2005), familial (e.g., more compromised parenting; Lindahl & Malik, 1999), child (e.g., greater child behavior problems; Jenkins et al., 2005) and maternal (e.g., lower levels of maternal education; Stright & Bales, 2003) variables. We hypothesize that variables from each subsystem or context (extrafamilial, familial, child, and maternal) and each type of variable within each context (i.e., structural and psychological) will be associated with the quality of the coparenting relationship. However, as the current study is the first study of coparenting in African American single mother families to consider multiple variables within multiple contexts, we do not offer hypotheses about which individual variables will be unique contributors to the coparenting relationship in the full multivariate ecological model. Based on our prior research with other outcome measures (Jones, Forehand, Brody, & Armistead, 2003), we do expect contexts more proximal to the mother and psychological variables to be more strongly associated with the quality of the coparenting relationship than more distal and structural variables.

Families were assessed at each of two time points, separated by 15 months. Thus, the data allowed the opportunity for examination of the hypothesized associations in cross-sectional analyses at each assessment, as well as in longitudinal analyses.

## Method

### Overview

The current study represents secondary analyses of data from a study examining the psychosocial functioning of urban and rural African American single mother-headed families ( $N = 277$ ) with a child (50% female) in the 7- to 15- year-old age range (For a complete description of this study see Forehand, Brody et al., 2000).

### Participants

Of the 277 mother-child dyads who participated in the first assessment, 242 mothers ( $M$  age = 34.01 years,  $SD = 6.82$ ) and their children ( $M$  age = 11.34 years,  $SD = 1.82$ ) completed the second assessment and had complete data for the variables of interest in the current study. The primary reason for participant attrition was reported lack of continued interest in the study. Other

reasons for dropout included family relocation, death of participating parent, and parental incarceration. With one exception, the dropouts did not differ on any of the demographic or major study variables. The one exception is that mothers who participated in the second assessment reported a higher monthly income at Assessment 1 than those who dropped out (monthly means of \$1034 and \$795, respectively,  $t(275) = 2.30, p < .05$ ).

Consistent with the communities from which the families in the larger study were drawn, families had a per capita income of \$3,800 or less, defined by the U.S. Census Bureau (2004) as below poverty level. Accordingly, 97% of participating families received public assistance. Table 1 presents additional demographic variables of the sample.

Of note, coparents did not participate in the current study; rather, mothers reported on the quality of their relationship with the coparent. The identity of the coparent was reported by mothers in a subsample ( $n = 133$ ) of participants: maternal grandmother (31%), father of the child (26%), and maternal aunt (11%) were identified most often.

**Recruitment.** Families were recruited from primarily lower income metropolitan and nonmetropolitan counties in the southeastern United States. Recruitment was targeted to neighborhoods in which 25% or more of the population was African American in order to ensure that a viable African American community existed in the county. Community agencies (e.g., schools) and leaders were provided with the inclusion criteria for the study (African American single mother family with a child 7 to 15 years of age), and, subsequently, referred interested families to project staff, who contacted them.

Serving as interviewers were 16 African American and 5 European American community members and students. Prior to data collection, the interviewers received 1 month of training in administering the interviews. The training involved role-playing scenarios as well as practice sessions with African American parents and children.

## **Procedure**

Mother-child dyads participated in two interviews at each of the two assessments: (a) the sociodemographic interview, during which assent and consent for participation, as well as the family's sociodemographic information, was obtained; and (b) the psychosocial interview, completed within 2 weeks of the sociodemographic interview, in which the psychological and relational variables in the current analyses were obtained. Because of concerns regarding literacy for the mothers, as well as the comprehension of some of the measures by the younger children in the study, self-report questionnaires were administered in an interview format to both mothers and youth. Each

**Table 1.** Demographics and Major Study Variables

Variable	M (SD)	n (%)	Range
<b>Neighborhood</b>			
Urban		138 (50.4)	
Rural		136 (49.6)	
T1 Total neighborhood risk	5.17 (5.44)		0-15
T2 Total neighborhood risk	4.22 (5.10)		0-15
<b>Family</b>			
T1 Monthly income	1000.57 (829.35)		0-8968.00
T1 No. of children	3.22 (1.44)		0-10
<b>Parenting</b>			
T1 Lax parenting	6.05 (2.10)		0-12
T2 Lax parenting	5.72 (1.86)		0-12
<b>Mother</b>			
T1 Age	34.01 (6.02)		25-52
<b>T1 Education</b>			
Less than high school		111 (40.5)	
High school or GED		98 (35.8)	
High school + vocational		27 (9.9)	
High school + some college		13 (4.7)	
College degree		19 (6.9)	
<b>T1 Employment</b>			
Not employed		100 (36.5)	
Part-time		52 (19.0)	
Full-time		116 (42.3)	
T1 Depression	0.39 (0.5)		0-2.5
T2 Depression	0.35 (0.45)		0-1.83
<b>Child</b>			
T1 Age (years)	11.34 (1.82)		7.00-16.00
T1 % Female		139 (51)	
T1 Depressive symptoms	7.62 (6.41)		0-30
T2 Depressive symptoms	7.86 (6.45)		0-30
T1 Aggression	7.82 (6.58)		0-36
T2 Aggression	7.64 (6.47)		0-35
T1 Delinquency	0.56 (1.36)		0-12
T2 Delinquency	0.76 (1.82)		0-12
<b>Relationship quality</b>			
T1	33.87 (6.58)		11-44
T2	33.97 (5.92)		14-44

member of the dyad was interviewed privately by a separate interviewer to ensure confidentiality. Furthermore, cue cards were used for both the mother and child during the second interview at each assessment. These cue cards

contained descriptors (e.g., “not true,” “sometimes true,” and “often true”), their corresponding numeric values (e.g., 0, 1, or 2), and pictorial representations of the descriptors (e.g., thermometers with various portions shaded). Each interview lasted between 1 and 2 hours for the mothers and children.

Approximately 15 months after the first assessment, mothers were contacted and invited to participate with their child in a second assessment. Families were compensated \$50 for their participation in each data-collection session.

### *Measures*

Of particular concern was the availability of instruments to measure the constructs of interest, as most measures of family functioning and child adjustment were developed for use with, and standardized on, European American families. Consequently, the available measures may not describe the ecological processes relevant to African American participants in the study. This issue was resolved through the formation of focus groups composed of African American women and children in the counties from which the sample was drawn. Six focus groups, including a total of 60 women and children (6 to 13 per group) who met the enrollment criteria for the study (i.e., African American single mother, child in 7- to 15-year-old age range), were conducted. Facilitated by the aforementioned interviewers, the focus groups evaluated each instrument to determine whether it was appropriate for use with African American families. Group leaders presented each instrument one at a time, described its purpose, and asked the focus group to review the measure and indicate in a group discussion whether the instrument was a valid assessment for African American families. The focus group members agreed that all the instruments were appropriate for the study population. The groups then reviewed each item on each scale and suggested wording changes, as well as the deletion of items that they perceived as unclear or irrelevant to families and children in their communities. Focus group suggestions were reviewed by the research team and incorporated if the revision was determined to increase the cultural relevance of the scale, without compromising the reliability and validity of the measure. After the data were collected, confirmatory factor analyses were executed to ensure that each scale was composed of a coherent set of items for this study population. Items were retained if they attained a factor loading of .40 or above.

Importantly, no items were deleted from the measures examined in the current study; however, an exploratory factor analysis was performed for each measure that has not typically been used with a similar sample in order

to ensure that each scale was comprised of a coherent set of items for this study's population.

Measures of the constructs of interest for the current study are presented in the order in which they were entered into the regression analyses (i.e., most distal to most proximal variables to the coparenting relationship). Descriptive statistics for all study variables are presented in Table 1.

*Extrafamilial variables.* Extrafamilial factors were defined as factors in the broader neighborhood or community context that may influence family or individual functioning. Two structural extrafamilial factors were examined, based on information collected from mothers during the sociodemographic interview. The first was a set of five questions assessing neighborhood risk. The risks were first identified based on previous studies (e.g. Miller, Forehand, & Kotchick, 2000; Rutter, 1981) and then revised and refined as a result of pilot work with individuals demographically similar to the sample. Subsequently, five risks were selected to form the Neighborhood Risk scale, including the presence in the neighborhood of (a) gangs, (b) physical fighting, (c) shootings or knifings, (d) murders, and (e) drug use and dealing. Mothers were asked to indicate whether each of the five risks was present in her neighborhood, and the total number of items to which each mother responded "yes" was recorded as each family's Neighborhood Risk score (range 0 to 5), with higher scores reflecting greater perceived risk ( $\alpha = .87$ ). The second was a binary variable reflecting whether the family lived in a rural or urban area. Given that specific neighborhood risks have been examined in the coparenting literature to date (e.g., Deng et al., 2006; Kiser & Black, 2005; Prelow et al., 2007) and urban neighborhoods tend to possess higher levels of these risk factors (e.g., crime, violence) than rural neighborhoods (Department of Justice, 2004), geographic region (rural vs. urban) was included as a second measure of level of neighborhood risk.

*Familial factors.* Two structural characteristics of the family, obtained during the sociodemographic interview, were examined, namely, the number of children living in the home and the monthly income of the family.

One psychological familial factor, child report of maternal lax parenting, was assessed using the Children's Report of Parenting Behavior Inventory (CRPBI). The CRPBI is a 30-item child-report instrument that assesses various parenting practices from the child's point of view, and for which discriminant and convergent validity has been established (Schludermann & Schludermann, 1970). The firm/lax behavioral control scale was of particular interest for the current study given research to suggest that lax parenting is associated with greater marital conflict generally, conflict over childrearing in particular, and less optimal overall family functioning (Henry, Robinson,

Neal, & Huey, 2006; Lindahl & Malik, 1999). Sample items of the lax parenting subscale include "My mother lets me go any place I want without asking" and "My mother does not tell me what time to be home." Children and adolescents responded to each item as "a lot like," "somewhat like," or "not like" the target parent. Adequate validity of the scale and reliability of the lax parenting subscale ( $\alpha = .74$ ) have been reported (Schludermann & Schludermann, 1970; Schwartz, Barton-Henry, & Pruzinsky, 1985); however, slight modifications were made in the instructions and items (e.g., adjusting reading level, items presented in second person) to simplify administration. An exploratory factor analysis was conducted and items loading at .40 or above were retained ( $\alpha = .63$ ). Higher scores indicate more lax parenting.

**Child factors.** Two child structural factors, reported during the sociodemographic interview, were examined, namely, age and gender.

In addition, three child psychological factors were investigated: aggression, delinquency, and depression symptoms. The first two of these factors were considered externalizing problems and the third was considered an internalizing problem. Child externalizing problems were assessed using the Aggression and Delinquency subscales of the Youth Self-Report form of the Child Behavior Checklist (CBCL, Achenbach, 1991). These subscales have been shown to have acceptable reliability and validity (Achenbach, 1991). The items are rated on a 3-point scale: 0 (*not true*), 1 (*sometimes or somewhat true*), and 2 (*very or often true*). The alpha coefficients were .87 and .72 for the Aggression and Delinquency subscales, respectively, in this sample. Internalizing problems were examined using the youth-reported Child Depression Inventory (CDI; Kovacs, 1981). The CDI consists of 27 items rated on a 3-point scale. Fitzpatrick (1993) reported adequate reliability (alphas ranging from .71 to .89 in various samples) and validity data with samples similar to the sample in this study, and standardization data are available for youth ranging from 7 to 17 years old. Higher scores on the CDI indicate greater youth-reported symptoms. The alpha coefficient for the current sample was .76.

**Maternal factors.** Three structural maternal factors, also collected during the sociodemographic interview, were assessed: age, highest level of education completed, and employment status.

One psychological maternal factor, depressive symptoms, was assessed using the Depression subscale of the Brief Symptom Inventory (BSI; Derogatis & Spencer, 1982). The BSI is a 53-item inventory that was developed as a global measure of psychological symptomatology. Adequate reliability ( $\alpha = .85$ ) and validity data have been presented for this scale (Derogatis, Rickels, & Rock, 1976; Kremer, Atkinson, & Ignelzi, 1981). Each item was rated on a 4-point Likert-type scale ranging from 0 (*not at all*) to 3 (*extremely*). This

scale represented a modification of the standard BSI, on which individuals rate the items on a 5-point Likert-type scale. The modification resulted from focus group testing that suggested with oral administration of the instrument, a 4-point Likert-type scale was easier to complete than a 5-point Likert-type scale. Additional modifications included minor word and format changes to increase simplicity of verbal administration and comprehensibility. The alpha coefficient was .82 in the current sample.

*Coparenting relationship quality.* Mother-report of the quality of the coparenting relationship was assessed using a revised version of the Parenting Convergence Scale (PCS; Ahrons, 1981). Each mother was first asked whether there was a person who assists her as a caregiver of the participating child. If she answered “yes,” she was administered the PCS. The measure consists of questions tapping three areas of mother–coparent relationship quality: communication (e.g., “How often would you say that you and [coparent] talk about the way the target child acts?”), conflict (e.g., “When you and [coparent] talk about how to raise the target child, how often is the conversation hostile or angry?”), and support (e.g., “How often would you say that [coparent] is a help to you in raising this child?”). Internal reliability in prior work is adequate ( $\alpha = .93$ ); however, this questionnaire was changed for use with the present sample in that directions were modified for verbal administration and the Likert-type scale was reduced from 5 points to 4 points, with endpoints of 1 (*never*) and 4 (*often*). Consistent with prior research (Wood & Lewis, 1990), the full scale score, rather than subscale scores, was used in the current study to assess global coparenting relationship quality. The conflict items were reverse-coded so that higher scores on the measure represent higher relationship quality. The alpha coefficient in the current sample was .79.

## Results

### *Preliminary Analyses*

Descriptive statistics, including means and standard deviations, for all sociodemographic and major study variables are presented in Table 2. Of note, there was essentially no difference between the mean of coparenting relationship quality at Assessment 1 ( $M = 33.87$ ,  $SD = 6.58$ ) and at Assessment 2 ( $M = 33.97$ ,  $SD = 5.92$ ), precluding the opportunity to examine *change* in coparenting relationship quality over time. However, the collection of data at two points does allow for replication of cross-sectional findings, as well as examination of Assessment 1 predictors of Assessment 2 coparenting relationship quality.

**Table 2.** Cross-sectional Regression Analyses Predicting Coparenting Relationship Quality at Assessment 1

	<i>F</i>	$\Delta R^2$	$\beta$	<i>t</i>
Block 1: Structural extrafamilial variables	4.03	.03		
Rural/urban			.18	2.31*
Neighborhood risk			.01	0.11
Block 2: Familial structural variables	2.71	.01		
Monthly income			.07	1.06
Number of children in household			-.08	-1.22
Block 3: Familial psychological variables	4.27	.04		
Lax parenting			-.20	-3.18**
Block 4: Child structural variables	3.74	.02		
Child age			-.14	-2.14*
Child gender			-.00	-0.01
Block 5: Child psychosocial variables	2.79	.01		
Child Depression Index			-.07	-0.95
YSR aggression			.02	0.23
YSR delinquency			-.06	-0.80
Block 6: Maternal structural variables	2.33	.01		
Mother age			-.10	-1.49
Mother's educational level			.02	0.23
Mother's employment status			.02	0.22
Block 7: Maternal psychosocial variables	2.82	.03		
Mother's BSI depressive symptoms			-.20	-2.87**

NOTE: YSR = Youth Self-Report; BSI = Brief Symptom Inventory.

\* $p \leq .05$ . \*\* $p \leq .01$ .

Bivariate associations among all major study variables were also conducted. At Assessment 1, coparenting relationship quality was significantly correlated with neighborhood risk ( $r = .18, p < .05$ ), lax parenting ( $r = -.23, p < .05$ ), maternal depressive symptoms ( $r = -.20, p < .05$ ), and child depressive symptoms ( $r = -.13, p < .05$ ). More compromised coparenting relationships were reported among mothers who resided in neighborhoods characterized by *lower* levels of risk, whose children reported their mothers engaged in *higher* levels of lax parenting, whose children reported *higher* levels of depressive symptoms, and who themselves reported *higher* levels of depressive symptoms.

At Assessment 2, coparenting relationship quality was significantly correlated with geographical region ( $r = .15, p < .05$ ), lax parenting ( $r = -.22, p < .05$ ), child depressive symptoms ( $r = -.15, p < .05$ ), and maternal depressive symptoms ( $r = -.17, p < .05$ ). Mothers who reported more compromised

coparenting relationships were those who resided in *rural* neighborhoods, whose children reported their mothers engaged in *greater* levels of lax parenting, whose children reported *greater* depressive symptoms, and who themselves reported *greater* depressive symptoms.

### Primary Analyses

In order to examine the proposed multivariate ecological model, hierarchical multiple regression analyses were conducted cross-sectionally at each of the two assessments and longitudinally from Assessment 1 to Assessment 2. The predictor variables were entered beginning with those most distal to the mother (i.e., neighborhood factors) and progressing to those most proximal to the mother (i.e., maternal psychosocial functioning). Within each level of predictors, structural predictors were entered before psychological ones, allowing an examination of variables hypothesized to be less influential (i.e., more distal and structural variables) before those hypothesized to be more influential (i.e., more proximal and psychological variables). Accordingly, the variables were entered in the following order: extrafamilial structural variables in the first block, family structural variables in the second block, the family psychological variable in the third block, child structural variables in the fourth block, the child psychological variables in the fifth block, mother structural variables in the sixth block, and maternal psychological variables in the seventh and final block of the regression analyses. For the longitudinal prediction analyses, Assessment 1 variables were entered in this order and coparenting relationship quality at Assessment 2 served as the dependent variable.

Cross-sectionally, at Assessment 1, neighborhood risk, ( $\beta = .17, p < .05$ ), lax parenting ( $\beta = -.16, p < .05$ ), child age ( $\beta = -.14, p < .05$ ), and maternal depressive symptoms ( $\beta = -.16, p < .05$ ) were associated with coparenting relationship quality in the block in which each variable was entered (see Table 2). Contrary to our hypotheses, *lower*, rather than higher, neighborhood risk was associated with more compromised coparenting relationships. Consistent with study hypotheses, *higher* levels of lax maternal parenting, older child age, and higher levels of maternal depressive symptoms were all associated with poorer coparenting relationship quality in the multivariate model at Assessment 1. In the final model (Block 7, when all variables were entered (not displayed in Table 2)), neighborhood risk ( $\beta = .20, p < .05$ ), lax parenting ( $\beta = -.17, p < .05$ ), and maternal depressive symptoms ( $\beta = -.19, p < .05$ ) were significant.

Notably, the findings at Assessment 2 were consistent with the pattern of findings at Assessment 1. That is, rural versus urban neighborhood ( $\beta = .17$ ,

**Table 3.** Cross-sectional Regression Analyses Predicting Coparenting Relationship Quality at Assessment 2

	<i>F</i>	$\Delta R^2$	$\beta$	<i>t</i>
Block 1: Structural extrafamilial variables	2.80	.03		
Rural/urban			-.02	-0.22
Neighborhood risk			.17	2.18*
Block 2: Familial structural variables	1.85	.01		
Monthly income			.02	0.29
Number of children in household			.10	1.33
Block 3: Familial psychological variables	2.56	.02		
Lax parenting			-.16	-2.29*
Block 4: Child structural variables	2.40	.02		
Child age			-.14	-1.98*
Child gender			.00	0.12
Block 5: Child psychosocial variables	1.71	.00		
Child Depression Index			-.04	-0.50
YSR aggression			-.01	-0.10
YSR delinquency			.04	0.45
Block 6: Maternal structural variables	1.56	.01		
Mother age			-.10	-1.27
Mother's educational level			.02	0.25
Mother's employment status			.08	1.05
Block 7: Maternal psychosocial variables	1.81	.02		
Mother's BSI depressive symptoms			-.16	-2.20*

NOTE: YSR = Youth Self-Report; BSI = Brief Symptom Inventory.

\* $p \leq .05$ . \*\* $p \leq .01$ .

$p < .05$ ), lax parenting ( $\beta = -.16, p < .05$ ), child age ( $\beta = -.14, p < .05$ ), and maternal depressive symptoms ( $\beta = -.16, p < .05$ ) were associated with coparenting relationship quality in the multivariate model (see Table 3). Residing in a rural area (which is characterized by lower levels of identified risk factors), greater lax maternal parenting, older child age, and greater maternal depressive symptoms were associated with poorer mother-coparent relationship quality. In the final model (Block 7, when all variables were entered (not displayed in Table 3)), rural versus urban neighborhood ( $\beta = .17, p < .05$ ) and maternal depressive symptoms ( $\beta = -.15, p < .05$ ) were significant.

Longitudinal prediction analyses partially replicated the findings from the cross-sectional analyses (see Table 4). Higher levels of maternal depressive symptoms at Assessment 1 ( $\beta = -.17, p < .05$ ) were associated with less positive coparenting relationship quality at Assessment 2. In addition, there was a trend toward significance for associations between rural versus urban

**Table 4.** Longitudinal Regression Analyses Predicting Coparenting Relationship Quality at Assessment 2 From Predictor Variables at Assessment 1

	<i>F</i>	$\Delta R^2$	$\beta$	<i>t</i>
Block 1: Structural extrafamilial variables	2.56	.02		
Rural/urban			.14	1.74*
Neighborhood risk			.02	0.19
Block 2: Familial structural variables	2.43	.02		
Monthly income			.09	1.25
Number of children in household			-.11	-1.70*
Block 3: Familial psychological variables	1.97	.00		
Lax parenting			-.03	-.43
Block 4: Child structural variables	1.86	.01		
Child age			-.12	-1.68*
Child gender			-.03	0.43
Block 5: Child psychosocial variables	1.45	.01		
Child Depression Index			.03	-.41
YSR aggression			-.07	-0.80
YSR delinquency			-.04	-0.49
Block 6: Maternal structural variables	1.34	.01		
Mother age			-.10	-1.28
Mother's educational level			.04	0.57
Mother's employment status			.06	.71
Block 7: Maternal psychosocial variables	1.71	.03		
Mother's BSI depressive symptoms			-.17	-2.45**

NOTE: YSR = Youth Self-Report; BSI = Brief Symptom Inventory.

\* $p \leq .10$ . \*\* $p \leq .05$ . \*\*\* $p \leq .01$ .

neighborhood ( $\beta = .14, p < .10$ ), children in the household ( $\beta = -.11, p < .10$ ), and child age ( $\beta = -.12, p < .10$ ) at Assessment 1 and coparenting relationship quality at Assessment 2. Residing in a rural area, having more children in the household, and older child age were associated with poorer mother-coparent relationship quality. In the full model including all the predictors (Block 7, not displayed in Table 4), maternal depressive symptoms was a significant predictor ( $\beta = -.17, p < .05$ ) of coparenting relationship quality, and the association with rural versus urban neighborhood showed a trend toward significance ( $\beta = .17, p < .10$ ).

## Discussion

Using an ecological framework, the current study examined correlates of coparenting relationship quality in low-income rural and urban African

American single mother families in the southeastern United States. Cross-sectionally, findings revealed virtually identical models. At each of the two time points, *lower* neighborhood risk (as defined by a measure of risks at Assessment 1 and rural neighborhoods at Assessment 2; Miller, Forehand, & Kotchick, 2000), *higher* levels of lax maternal parenting, *older* child age, and *higher* levels of maternal depressive symptoms were associated with poorer coparenting relationship quality. In the final model when all variables were entered, lower neighborhood risk, lax maternal parenting, and maternal depressive symptoms remained significant correlates. Insufficient change in the quality of the coparenting relationship over time precluded an examination of whether the proposed ecological model predicted *change* in the coparenting relationship over time. However, longitudinal analyses examining Assessment 1 predictors of Assessment 2 coparenting relationship quality partially replicated cross-sectional findings, such that maternal depressive symptoms were a significant predictor of later coparenting relationship quality and rural versus urban neighborhood demonstrated a trend toward significance in the final model.

The association between neighborhood context and coparenting relationship quality was significant cross-sectionally and showed a trend toward significance in longitudinal analyses; however, the direction of the association was contrary to what was expected. Cross-sectionally at Assessment 1, *lower* (rather than higher) neighborhood risk, as defined by a risk index, was associated with *lower* coparenting relationship quality. Cross-sectionally at Assessment 2 and in longitudinal analyses, residing in a *rural* (rather than urban) neighborhood was associated with *lower* coparenting relationship quality. Given that urban rather than rural neighborhoods tend to have more of the risk factors that have been linked to compromised coparenting (Department of Justice, 2004), this finding was at first counterintuitive. However, the results are consistent with a broader neighborhood literature which suggests that there may be greater, rather than less, interdependence among extended family members in lower income, higher risk neighborhoods (e.g., Jarrett & Burton, 1999). Perhaps as a function of their experiences, African American single mothers and their non-marital coparents residing in the higher risk, urban neighborhoods in this study learned that coordination of their parenting efforts (i.e., coparenting) is critical to the well-being and safety of their child. In turn, mothers in higher risk, urban neighborhoods experience higher quality coparenting relationships. Alternatively, it may be that compromises in coparenting are less costly in the lower risk, rural neighborhoods, so mothers and their nonmarital coparents are less motivated to work through differences in their parenting efforts.

Maternal lax parenting was also associated cross-sectionally with coparenting relationship quality, at both time points, although not in longitudinal

analyses. Mothers whose children reported that they engaged in a higher level of lax parenting reported that their relationships with their coparents were more compromised. Although several domains of parenting are likely associated with the quality of the mother–coparent relationship, we viewed lax parenting as particularly important to examine given prior research with ethnically diverse samples suggesting that it is associated with coparenting relationships (Lindahl & Malik, 1999). In response to lax maternal parenting, coparents may feel obligated to step up their parenting responsibilities to compensate for maternal deficits in order to maintain the child's health and well-being. In turn, such compensation may heighten the stress in the mother–coparent relationship and decrease the extent to which the mother feels supported (versus judged) in her parenting efforts. Given that the longitudinal association between lax parenting and coparenting relationship quality was not significant, it may be the case that, over time, the coparent acclimates to essentially compensating for the mother's lax parenting and, in turn, the relationship between the mother and coparent may suffer less.

In addition, child age was negatively associated with coparenting relationship quality cross-sectionally and showed a trend toward significance over time, such that poorer relationships existed between coparents and mothers of relatively older youth. The transition to adolescence is a period that can be particularly challenging for family relationships, as adolescents' rapid cognitive, emotional, and physical development, desire for more independence, and possible engagement in risky behaviors require adjustments in parenting strategies and behaviors (Baril et al., 2007; Preto, 1999). As children in the current study ranged in age from 7 to 15 years, the older ones were transitioning into or were in the adolescent years. The difficulties of parenting these older children may have negatively affected coparenting quality as the coordination of parenting efforts is particularly challenging.

Consistent with prior research linking depression to difficulties in a range of family relationships (see Jones, Beach, & Fincham, 2006, for a review), greater maternal depressive symptoms were also associated with lower levels of coparenting relationship quality, cross-sectionally and over time. Research with married couples indicates depressive symptomology is associated with compromises in marital relationships (Cummings, Keller, & Davies, 2005; Foster, Garber, & Durlak, 2008; Herr, Hammen, & Brennan, 2007). Individuals with depressive symptoms fail to provide support to close others and may seek excessive reassurance and support from close others (Jones et al., 2006), generating stress and conflict in interpersonal relationships (Davila, 2001; Joiner, 2000). In the case of coparenting in African American single mother families, the interpersonal deficits of a mother with

depressive symptomatology may eventually tax the nonmarital coparent who has stepped in to assist with childrearing. It is important to note, however, that mothers reported on both their depressive symptoms and the quality of their coparenting relationship so that the association between these two variables may be inflated, at least to some extent, by the response biases associated with depression. To rule out this possibility, it will be important for future research to include clinician ratings of maternal depressive symptoms, as well as coparent-report and/or observations of coparenting relationship quality.

The findings of this study represent an initial attempt to develop an ecological model of coparenting in African American single mother families; however, the findings must be interpreted within the context of the study's limitations. First, although our focus on African American single mother families can be viewed as a strength given the need for more culturally informed studies of family in general and coparenting in particular, the generalization of the findings to other groups (e.g., African American intact families) should be done with caution. Related to this, the alpha coefficient for the CRPBI was relatively low. Given that the CRPBI has not been normed with an African American sample, future work should explore the validity of measures of child-report of parenting variables with minority samples. In addition, the current study relies entirely on mother- and child-reports of primary study variables. Future research should include other reporters, including the coparent, as well as other methods, such as observation of coparenting relationship quality, to increase confidence in the pattern of findings. Third, we believe that allowing mothers to identify their "coparents" maximizes the external validity of the study (i.e., rather than narrowing our focus to grandmothers or biological fathers); however, subsequent research with larger sample sizes should examine whether the ecological model differs depending on the coparent's relationships to the mother or child (e.g., child's biological father, grandmother) or other potentially important coparent variables that were not available in the current study (e.g., coparent age, coparent residential status). Fourth, the absence of change in mother-reported coparenting relationship quality from Assessment 1 to Assessment 2 precluded analyses of change over time. Accordingly, it may be necessary to conduct longer term follow-ups in order to examine change in mother-coparent relationship quality over time. Finally, future work should consider the bidirectionality of the associations between ecological context and coparenting, as well as the interactions between multiple ecological context variables as they relate to coparenting.

Strengths of the study also merit attention. Consistent with calls in the coparenting literature for greater attention to diverse families (Feinberg, 2002;

McHale et al., 2002; Van Egeren & Hawkins, 2004), this study examined predictors of coparenting relationship quality in African American single mother families. Importantly, findings integrate and extend prior work with families from other racial and socioeconomic groups by demonstrating that multiple ecological contexts are associated with the quality of the coparenting relationships in African American single mother families. Moreover, examining variables from different contexts within the same study allows for the examination of the *relative* contribution of multiple variables that have previously been examined across multiple studies, rather than within a particular sample. As a consequence, our findings provide a better understanding of the correlates of coparenting in the growing number of African American single mother families. For example, while child gender has been found to be a correlate of coparenting in some prior work (e.g., Margolin et al., 2001; Jouriles & Norwood, 1995), our findings suggest that within a broader ecological context child gender may not be as relevant to the coparenting relationships of African American single mothers. The findings were also replicated cross-sectionally at each of two assessments, and partially replicated in longitudinal analyses, building confidence in the pattern of findings. Finally, the analyses were theoretically grounded in both the ecological context and coparenting literatures.

The importance of the coparenting relationship for the psychosocial adjustment of diverse youth, mothers, and families has been discussed in detail elsewhere (Jones et al., 2007; McHale et al., 2002). Although more confident clinical implications of the current study depend on replication with additional samples, the current findings suggest that certain coparenting relationships may be at risk of impairment based on their ecological circumstances and, in turn, would be appropriate targets for prevention and intervention efforts. African American single mothers who are experiencing more depressive symptoms, residing in less risky or rural neighborhoods, and have older children may benefit from prevention and intervention efforts designed to improve parenting coordination (i.e., coparenting). In addition, it may be helpful if parenting interventions include efforts to increase coparenting relationship quality in order to maximize the potential positive benefit to both maternal and adolescent psychological adjustment.

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The authors declared no conflicts of interest with respect to the authorship and/or publication of this article.

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