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Original article

The Inter-relationship of Adolescent Unhappiness and Parental Mental Distress

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ABSTRACT

Purpose: Substantial evidence supports the hypothesis that parental well-being impacts upon child well-being and that this relationship is bidirectional. Here we explore how, in a large, nationally representative sample, both parents' mental distress relates over time to each other's mental distress and to their adolescent child's unhappiness, and vice versa.

Methods: Analyses were conducted using data from waves one to five (2009/10–2014/15) of Understanding Society, the UK Household Longitudinal Study. Understanding Society collects data on adults' mental distress (General Health Questionnaire), and on youths' (age: 10–15 years) unhappiness in relation to their school work, appearance, family, friends, school, and life as a whole. We use repeated-measures structural equation models to investigate the reciprocal relationships between both parents' distress and their child's unhappiness, using both longitudinal cross-lagged and nonrecursive contemporaneous specifications. The analytic sample is 1,883 triads (adolescent child, mother, and father) with data at two or more consecutive time points. Analyses are stratified by adolescent gender.

Results: Our results show that parental mental distress predicts unhappiness of girls but not that of boys. Reciprocal associations of maternal and paternal mental distress are evident in families with an adolescent daughter. Unhappiness of adolescents does not predict their parents' mental distress. Results are similar whether examined contemporaneously or over time.

Conclusions: Our findings support the suggestion that the family should be considered as a dynamic system, for instance when planning clinical interventions. This is particularly pertinent in families with an adolescent daughter present.

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IMPLICATIONS AND CONTRIBUTION

Adolescent unhappiness does not influence parents' mental distress. Girls' but not boys' unhappiness is affected by parents' mental distress. There are reciprocal effects of parents' mental distress in families with a daughter, but in families with a son the relationship goes from mother to father, and not vice versa.

Adolescence, defined by the World Health Organization as lasting from age 10–19 years, is a pivotal development stage which is second only in the life course to the fetal period and

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infancy in the rate of growth and change throughout the body [1]. It is a time of dramatic brain development, during which individuals mature physically, psychologically, and socially from childhood to adulthood and when the rate of onset of most mental health disorders peaks [2]. As such, it has been proposed that adolescence be considered as a critical or sensitive period in the life course for later health and well-being [1].

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Maintaining well-being among adolescents is a key to ensuring healthy physical and social development and a successful transition to adulthood. Following Bowen's Family Systems Theory [3], in which the family is considered to be a complex, integrated system, family members each have an important role in one another's mental health and well-being. This may be particularly true for family systems which include an adolescent experiencing the changes associated with this developmental stage, which can be disruptive to other family members. The mental health of an adolescent or their parents should not be considered in isolation, but rather in the context of the family as a whole. In this context, we aim to investigate whether there are reciprocal influences of parents' mental distress on early and mid-adolescent children's unhappiness and vice versa.

In recent years, there has been growth in research in this area, particularly in the psychology literature. Examples from this literature consider both the effect of the parent on the adolescent and the reciprocal effect of the adolescent on the parent [4–11] and the effect of both parents on the adolescent [4,6,12–18]. Although some studies analyze longitudinal data [4,6,8–11,13,16], to our knowledge, only two studies use longitudinal data to look at reciprocal effects of adolescents and both parents on one another [4,6].

In their 1995 study, Ge et al. [6] used three waves of annually collected panel data on 368 adolescent-mother-father triads in cross-lagged models, with the aim of investigating the mutual influences on psychological distress. They found that the psychological distress of adolescents and their parents was reciprocally associated over time and that there were gender differences in the associations observed: the strongest effects were between adolescents and their opposite gender parent.

The study by Powdthavee and Vignoles [4] addresses the question of whether parental mental distress influences adolescent life satisfaction, and vice versa, using data from 10 waves of annually collected panel data on 1,175 adolescents and their parents in multilevel multivariate response models. They found that parental distress measured at the previous year predicted adolescent life satisfaction, with boys unaffected by maternal distress levels. In addition, father's, but not mother's, mental distress was predicted by adolescent life satisfaction from the previous year.

Neither of the two existing longitudinal studies which investigated the reciprocal effects that adolescents and both parents have on one another modeled all these effects simultaneously in the same model. In previous work, we have shown that reciprocal effects were present for young children of both sexes [19]. However, parent-adolescent relationships might be quite different and gender differences might be more important at this stage than at younger ages. The existing literature on adolescents supports this hypothesis, with more consistent effects found where the family includes an adolescent girl [4,15,20].

We aim to contribute to the existing literature with analyses of data on adolescent children and their parents in the first five waves (2009/10–2014/15) of Understanding Society, the UK Household Longitudinal Study (UKHLS). The study takes advantage of the repeated measures collected in UKHLS to investigate mental distress of parents and unhappiness of children during the dynamic phase of early and midadolescence. We use repeated-measures structural equation models to simultaneously estimate the following effects: (1) maternal mental distress on adolescent unhappiness; (2) paternal mental distress

on adolescent unhappiness; (3) adolescent unhappiness on maternal mental distress; (4) adolescent unhappiness on paternal mental distress; (5) maternal mental distress on paternal mental distress; and (6) paternal mental distress on maternal mental distress. We investigate these relationships longitudinally and contemporaneously and explore whether the effects differ according to the gender of the adolescent.

Methods

Data and sample

The data used for this work were drawn from waves one to five of UKHLS, a household panel study which sampled around 50,000 households, resulting in a sample at wave one of approximately 41,000 individuals living in 26,000 households across the United Kingdom who have been surveyed annually since 2009/10 [21]. UKHLS and secondary analyses of UKHLS data have been approved by the University of Essex Ethics Committee.

The analytic sample was restricted to adolescent-mother-father triads living in the same household which include a member of the UKHLS youth panel (participants aged 10-15 years) and their natural, adoptive, or step mother and father (N = 4,659), all of whom were members of the UKHLS general population sample. Where a household included more than one member of the youth panel, one member was selected at random.

After these restrictions to the data, we had 7,273 years of outcome data from 4,659 unique triads. Of this, 3,295 years of outcome data from 1,883 unique triads had lagged data on adolescent unhappiness and maternal and paternal mental distress so could be included in our models. Triads included in our analytic sample included adolescents reporting higher unhappiness (mean difference [MD]: .37, 95% confidence interval [CI]: .17—.57), similar maternal 12-item General Health Questionnaire (GHQ-12) (MD: -.01, 95% CI: -.25, .23) and lower paternal GHQ-12 (MD: -.28, 95% CI: -.51, -.05) than excluded triads. All members of the included triads were older (adolescent MD: .71, 95% CI: .64, .78; mother MD: 1.28, 95% CI: 1.04, 1.52; and father MD .98, 95% CI: .69, 1.27), households had higher incomes (*p* < .001), and there were more likely to be other children in the household (*p* < .001).

Of the triads in our final analytic sample, 50% were present for two waves, 29% for three waves, 17% for four waves, and 4% for all five waves, with the main reason for moving in or out of our sample being the child's age since children are only eligible to be in the youth sample from age 10–15 years.

Variables

Maternal and paternal mental distress: at each of waves one to five, adult UKHLS participants (age 16+) answer the GHQ-12 [22] during a computer-assisted personal interview. This is a screening scale designed to identify minor psychiatric disorders in the general population. Each item is scored on a four-point Likert scale, and all responses are summed to give a total score on a scale from 0 to 36, with higher scores indicating greater mental distress.

Adolescent unhappiness: at each of waves one to five, members of the UKHLS youth panel (age 10–15 years) are asked to respond to a paper and pencil self-completion questionnaire in which they are asked about their happiness or unhappiness with various aspects of their lives: their school work, appearance,

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