2018

Mexican-Origin Parents’ Stress and Satisfaction: The Role Of Emotional Support

Tierney K. Popp
Central Michigan University, poppk1tk@cmich.edu

Melissa Y. Delgado
University of Arizona, mydelgado@email.arizona.edu

Lorey Wheeler
University of Nebraska - Lincoln, lorey@unl.edu

Follow this and additional works at: https://digitalcommons.unl.edu/cyfsfacpub

Part of the Bilingual, Multilingual, and Multicultural Education Commons, Child Psychology Commons, Counseling Psychology Commons, Developmental Psychology Commons, Early Childhood Education Commons, Educational Psychology Commons, Family, Life Course, and Society Commons, and the Other Social and Behavioral Sciences Commons


This Article is brought to you for free and open access by the Children, Youth, Families & Schools, Nebraska Center for Research on Children, Youth, Families, and Schools at DigitalCommons@University of Nebraska - Lincoln. It has been accepted for inclusion in Faculty Publications from Nebraska Center for Research on Children, Youth, Families, and Schools by an authorized administrator of DigitalCommons@University of Nebraska - Lincoln.
Mexican-Origin Parents’ Stress and Satisfaction: The Role Of Emotional Support

Tierney K. Popp,1 Melissa Y. Delgado,2 and Lorey A. Wheeler3

1 Central Michigan University, Mt Pleasant, MI
2 University of Arizona, Tucson, AZ
3 Nebraska Center for Research on Children, Youth, Families and Schools, University of Nebraska-Lincoln, Lincoln, NE

Corresponding author — Tierney K. Popp, EHS 412 O, Department of Human Environmental Studies, Central Michigan University Mount Pleasant, MI 48859; email popp1tk@cmich.edu

Abstract
Guided by a process model of parenting and the integrative model, this study examined sources of emotional support (i.e., partner, maternal, paternal) as related to stress and satisfaction resulting from the parenting role in a sample of Mexican-origin young adult parents who participated in the National Longitudinal Study of Adolescent to Adult Health (Add Health) during Wave IV. Participants were male and female parents (26–35 years of age; 59% female; N = 737) who had children and a partner. Results from structural equation modeling revealed support from mothers as salient; high levels of maternal support were associated with high levels of parenting satisfaction. Tests of indirect effects suggested that parenting satisfaction played an intervening role in the link between maternal support and parenting stress. The pattern of results held across levels of linguistic acculturation but varied by gender. Understanding the mechanisms that predict parenting stress and satisfaction within the Mexican-origin population may help in the identification of culturally sensitive intervention strategies.

Keywords: Mexican-origin families, Parenting stress, Parenting satisfaction, Social support
Stress and satisfaction resulting from one’s parenting role varies greatly among individuals. Extant literature suggests that high levels of parenting stress are associated with reduced parental mental health and poor parenting behaviors including maltreatment, less sensitive responsiveness, and child behavior problems (see Crnic & Low, 2002, and Deater Deckard, 2004, for reviews). Similarly, lower parental satisfaction is linked to increased child behavior problems and poor parental well-being (Crnic, Greenberg, Ragozin, Robinson, & Basham, 1983; Rogers & Matthews, 2004). Although the consequences of parenting stress and satisfaction are relatively well understood, there is a paucity of research on precursors and individual differences among these outcomes of parenting (Crnic & Low, 2002).

Scholars have identified social support as an important predictor of parental well-being. Parents with high levels of social support report less stress (Cardoso, Padilla, & Sampson, 2010; Mulsow, Caldera, Pursley, Reifman, & Huston, 2002) and greater satisfaction (Schilmoeller, Baranowski, & Higgins, 1991; Woody & Woody, 2007). However, these relations are not straightforward, with variability based on the type of social support received (Deater Deckard, 2004), source of support (Contreras, López, Rivera-Mosquera, Raymond-Smith, & Rothstein, 1999), and cultural and individual considerations (Cardoso et al., 2010); thus, the need to understand these dynamics is warranted. Furthermore, a majority of research on parenting satisfaction and stress examines these two outcomes independently in direct effects models (Contreras et al., 1999; Rogers & White, 1998), yet some evidence suggests that they influence one another (Dunning & Giallo, 2012). The specific mechanisms either linking emotional support to parenting stress through parenting satisfaction or to parenting satisfaction through parenting stress have not been specifically considered in prior literature. Examining the mechanisms linking support, parenting satisfaction, and stress may provide key information for intervention strategies. Furthermore, beyond understanding general processes, there is a need to identify culturally specific patterns so that practitioners can better accommodate their clients’ needs (Dumka, Lopez, & Carter, 2002). In the past several decades, researchers and practitioners alike have called for knowledge that can inform culturally sensitive prevention and intervention strategies, drawing on family strengths and competencies (Dumka et al., 2002; Parra-Cardona et al., 2012). One of the important pieces of this study is the identification of these processes in a unique sociocultural group (e.g., Mexican-origin families).

Advancing our understanding of parenting for Mexican-origin families is critical for two reasons. First, despite the increase in the U.S.’s Latino population, with those of Mexican origin representing the largest subgroup (64%; Gonzalez-Barrera & Lopez, 2013), much of the parenting research has focused on European American and African American populations (Budd, Holdsworth, & HoganBruen, 2006; Mulsow et al., 2002). Given the evidence
indicating that parenting processes may differ for Latino parents (Cardoso et al., 2010), findings from other ethnic groups may not generalize to parents from Mexican-origin sociocultural backgrounds; they must be studied directly. Second, despite the progress made in including fathers in studies on Latino families (e.g., White, Zeiders, Gonzales, Tein, & Roosa, 2013), it is important to respond to the recent call to continue to include fathers, in particular, in within-group studies that include middle-class Latino families (see Cabrera, Aldoney, & Tamis-LeMonda, 2013, for a review); this study addressed these gaps by focusing on Mexican-origin female and male parents’ stress and satisfaction. As informed by Belsky’s (1984) process model of parenting and García Coll et al.’s (1996) integrative model for the study of developmental competencies in minority children (hereafter “the integrative model”), the goals of the study were as follows: (a) to examine sources of emotional support (i.e., maternal, paternal, partner) as directly associated with parenting stress and satisfaction; (b) to examine the alternative intervening mechanisms (parenting stress or satisfaction) linking support to parenting outcomes, and (c) to explore gender and linguistic acculturation (i.e., language use as a proxy) as potential moderators of these relations.

**Guiding Theoretical Perspectives**

This study integrated essential components of two corresponding theoretical frameworks, Belsky’s (1984) process model of parenting and García Coll et al.’s (1996) integrative model. Belsky’s process model suggests that three main factors influence parenting outcomes: parental psychological functioning, child characteristics, and contextual sources of stress and support. This study focuses primarily on the support dimension of Belsky’s model, as understanding how social support relates to parenting and where this support is derived are essential to understanding parenting experiences. Belsky posited that three related but distinct forms of social support exist (i.e., emotional, instrumental, and social). Previous studies have often examined these forms of support as one general construct (Deater Deckard, 2004), limiting scholars’ abilities to distinguish unique contributions. Indeed, Toomey, Umaña-Taylor, Jahromi, and Updegraff (2013) highlight the importance of examining distinct dimensions of social support for Mexican-origin adolescent mothers. Thus, this study focused specifically on emotional support, measured by young adult parents’ perceived relationship quality/closeness with their mothers, fathers, and partners. Perceptions of the quality of one’s relationship has been conceptualized as an indirect yet important source of emotional support, which is defined as “the love and interpersonal acceptance an individual receives from others, either through explicit statements to the effect, or as a result of considerate and caring actions” (Belsky, p. 87).
Building on Belsky’s model of parenting, this study also was informed by the integrative model (Garcia Coll et al., 1996), which highlights the importance of examining the distinct role of the unique sociocultural contexts of ethnic minority youth and families on normative developmental processes and well-being using ethnic-homogenous research designs. For Mexican-origin parents, in particular, their unique cultural context is likely to contribute to variance in parenting processes. First, research on Mexican families living in the United States indicates that they have a greater tendency to endorse attitudes such as interconnectedness (i.e., maintaining strong emotional bonds with family members, even as adults), familial reciprocity (i.e., providing support to family whenever it is called for; Calzada, Tamis-LeMonda, & Yoshikawa, 2012), and parenting responsibilities shared by extended family (Parra-Cardona et al., 2012). The salience of family and family values may increase the reliance on family-of-origin supports in this group, making it necessary to understand how different sources of familial support may contribute to parental wellbeing, to provide a next step in designing effective intervention strategies. Second, the integrative model theorizes that examining strengths (or positive outcomes) in addition to negative outcomes is important, with positive outcomes not being just the absence of the negative. Thus, we focused on concurrently examining the parenting role outcomes of both satisfaction and stress. Third, it has been suggested that acculturation and gender dynamics are important sources of variability in family processes (Cauce & Domenech-Rodriguez, 2002; Cruz et al., 2014). Thus, this study focused specifically on Mexican-origin families to extend prior literature on the relations between social support and parenting outcomes within this specific cultural context (Cardoso et al., 2010; Contreras et al., 1999), examining linguistic acculturation and gender as important sources of variability in these relations.

**Social Support and Parenting Outcomes**

Scholars studying interpersonal relationships argue that emotional support is a key factor for well-being and that emotional support is one of the most important types of support (see Burleson, 2003, for a review). Emotional support differs from instrumental support (e.g., providing monetary resources or help caring for children), in that it is theorized to create long-term relief from stress and anxiety by helping those in distress work through their feelings and come to a place of self-acceptance (Burleson, 2003). For example, those with high levels of emotional support may recover more quickly from upset, adaptively cope with problems, and look at stressful situations with more positivity, ultimately resulting in more satisfaction with the parenting role (Burleson, 2003). Indeed, partner emotional support, marked by high-quality relationships (measured by an emotional closeness subscale), was
linked to decreased parenting stress in European Americans (Mulsow et al., 2002) and positive child-rearing attitudes in Hispanic and African American female adolescent parents (Brunelli, Wasserman, Rauh, Alvarado, & Caraballo, 1995). In parents of children with disabilities, researchers found that maternal emotional support was associated with positive psychological adjustment and decreased parenting stress for both male and female parents, whereas instrumental support was not (Trute, Worthington, & Hiebert-Murphy, 2008), further highlighting the importance of examining dimensions of support separately. Moreover, these examples highlight that the bulk of the empirical work examining the role of social support on parenting outcomes has focused almost exclusively on stress, with a paucity of research focused on parenting satisfaction.

In addition to isolating dimensions of social support, it also is important to distinguish between sources of support. The identification of important figures in parents’ lives who provide support may have important implications for preventive intervention efforts aimed at identifying others who can help alleviate the negative effects of stressors on parental well-being or enhance positive parental functioning (Umaña-Taylor et al., 2011). Social supports derived from various origins may relate to parenting outcomes in different ways. Belsky (1984) hypothesized that support from partners is most influential on parenting due to the emotional investment and time spent in the relationship. Research with European American samples has supported this supposition (Mulsow et al., 2002; Rogers & White, 1998). As the majority (65%) of Mexican-origin families in the United States include two parents (Gonzalez-Barrera & Lopez, 2013), partner support may also be a salient factor for this population. In addition, the cultural importance of kinship networks suggests that Mexican-origin parents may also draw on family-of-origin supports (Falicov, 2005), potentially as much as or more than partner support. For example, in a sample of Mexican American mothers, Cardoso et al. (2010) found that general social support by individuals other than a partner was associated with lower levels of parenting stress, whereas partner support did not relate to stress. Similarly, Contreras et al. (1999) found that, among Puerto Rican female adolescents, maternal support was related to decreased parenting stress, but partner support was not. These findings suggest that family-of-origin support may be a critical factor, although there is a lack of research on paternal support and work with male parents. As such, we extend this work by including partner, maternal, and paternal support for both male and female parents.

**Intervening Mechanisms Linking Support to Parenting Outcomes**

Although there is reason to believe that social support links directly to both parenting stress and satisfaction (Mulsow et al., 2002; Woody & Woody,
there also is some evidence to indicate that these outcomes are related to one another, and may play an intervening role in linking social support to parental functioning. Previous research has demonstrated that stress has a deleterious relation with parents’ intrapersonal feelings and satisfaction (Crnic et al., 1983; Deater Deckard, 2004) and has found a connection between decreased social support and high levels of parenting stress (Cardoso et al., 2010; McConnell, Breitkreuz, & Savage, 2010; Mulsow et al., 2002). However, to our knowledge, no studies have examined the intervening role of parenting stress on the link between social support and parenting satisfaction. Researchers have identified parenting stress as an intervening factor in the relation between several related constructs and parenting role outcomes. For example, mothers’ parenting stress was found to mediate the links between parental fatigue and parenting satisfaction (Dunning & Giallo, 2012) and the links between parenting social support and optimal parenting (Bonds, Gondoli, Sturge-Apple, & Salem, 2002). Overall, these findings suggest that those who experience lower levels of social support may experience higher levels of stress and subsequently poorer parenting outcomes.

An alternative explanation purports that parenting satisfaction is the intervening variable on the relation between social support and parenting stress. It has been demonstrated that parents feel more satisfied in their parenting role when they experience high levels of social support (Schilmoeller et al., 1991). Research also suggests that parenting satisfaction relates to parents’ emotional well-being (Crnic & Low, 2002). Therefore, it is possible that parents who experience high levels of support perceive more satisfaction in their parenting role, and, thus, feel less stress from parenting. Scholars have not examined this specific indirect relation, but it is an explanation that warrants further investigation. In this study, competing models (e.g., stress vs. satisfaction as intervening variables) were tested to extend the work on processes that link emotional support and parenting satisfaction and stress.

The Role of Young Adults’ Linguistic Acculturation and Gender

Mexican Americans are the largest ethnic group among U.S. immigrants (Gonzalez-Barrera & Lopez, 2013), suggesting that the process of acculturation is salient for these families. The process of acculturation refers to change that occurs in previously internalized cultural patterns (e.g., language, behavior, identity) when individuals enter into a new and different cultural context (Schwartz, Unger, Zamboanga, & Szapocznik, 2010). The use of historical markers such as preferred language as a proxy for acculturation has been associated with mental health outcomes among Latinos (Escobar & Vega, 2000; Schwartz et al., 2010), and, thus, has the potential to be important in the associations between emotional support and parenting outcomes. This study extends the literature by examining the moderating
contribution of linguistic acculturation (i.e., language use) on the associations between emotional support, parenting stress, and satisfaction among Mexican-origin young adult parents.

Gender also may play a significant role in the relations between emotional support and parenting, particularly among Mexican-origin parents who may endorse and engage in traditional gender roles related to parenting (Cauce & Domenech-Rodriguez, 2002). Thus, the role of emotional support as related to males’ and females’ parenting experiences may not be the same (Taylor, Larsen-Rife, Conger, & Widaman, 2012). Furthermore, research has documented more generally and specifically among Latino families that mothers spend more time with their children than fathers (Hossain, Lee, & Martin-Cueller, 2015; Updegraff, Delgado, & Wheeler, 2009) and provide more emotional support and nurturance than do fathers (Crockett, Brown, Russell, & Shen, 2007). Therefore, it is possible that maternal emotional support of adult children will be more salient to parenting outcomes than paternal support in this specific sociocultural group.

**Current Study**

Our first goal was to examine the links between emotional support and parenting stress and satisfaction. We hypothesized that emotional support would be positively associated with parenting satisfaction, negatively related to parenting stress, and that each source of support would be important in this population. Our second goal was to examine the intervening mechanisms (parenting stress or satisfaction) linking support and parenting outcomes (parenting stress or satisfaction). Based on the literature, we examined alternative models testing the following hypotheses: (a) emotional support relates to higher levels of parenting satisfaction, and in turn, to lower levels of parenting stress, and (b) emotional support relates to lower levels of parenting stress, and in turn, to higher levels of parenting satisfaction. Finally, to address potential third-variable influences, we examined young adults’ educational attainment, income, and depressive symptoms, relationship length, partners’ parent status (biological parent or not), living status of young adult’s mother and father, and the average age and number of children in the family that may be linked with parenting processes as covariates (e.g., Bonds et al., 2002; Mulso et al., 2002; Parkes, Sweeting, & Wight, 2015). We used average child age as a proxy measure to control for children’s developmental abilities and needs and parents’ levels of experience with parenting. Furthermore, for families of Mexican origin it has been suggested that language use and gender dynamics are important sources of variability in family processes (Cauce & Domenech-Rodriguez, 2002; Cruz et al., 2014), thus, we examined the moderating role of parents’ language use and gender.
Method

Procedure

This study used data from the Wave IV longitudinal follow-up of the original participants (80.3% reinterviewed) in the National Longitudinal Study of Adolescent to Adult Health (Add Health; http://www.cpc.unc.edu/addhealth), a nationally representative study of 7th through 12th grade adolescents who were first interviewed in 1994 and 1995 across the United States (Harris et al., 2009). The interviews at Wave IV focused on health in young adulthood. The data were collected via in-home computer-assisted interviews conducted in 2008 and 2009 that lasted on average 2 hours and were completed in English. Complete information regarding the Add Health study design and procedures is available from Harris and colleagues. The Institutional Review Board approved this study.

Participants

The purpose of this study was to examine the influence of emotional support, including partners, on parenting outcomes among Mexican-origin young adults. Thus, the analytical sample was comprised of only data from Wave IV in the restricted-use Mexican-origin subsample of young adults who had children and were living with an intimate partner (n = 737). The young adults (59% female) ranged in age from 26 to 35 years (M = 30.59, SD = 1.74). The majority of young adults had completed high school (26%) or some college (36%), with a range of 8th grade or less (less than 1% of sample) to completion of a post baccalaureate professional education (e.g., law school, medical school, nursing school; 0.3% of the sample). Household income level ranged from less than $5,000 (1.5%) to $150,000 or more (2.2% of sample), with the median ranging from $50,000 to $74,999. Most young adults were born in the United States (83%), reported speaking and/or writing Spanish (62%) in addition to English, and were either married and living together (64%) or living with a partner, but not legally married (16%). On average, young adults had been in their intimate relationship for 7.08 years (SD = 4.10; 1–17 years). The majority of young adults’ partners were the biological parent of at least one of their children (69%) and were Latino (73%). Young adults had an average of 1.84 (SD = 1.16; ranged from 1 to 10 children) children living in the home with a mean age of 5.11 (SD = 3.01; ages 0–13). Fourteen percent of young adults were a teen when they had their first child. Most young adults had both parents living (83%; 10% only mother living, 5% only father living, 1% both parents deceased). Of those with parents living, 16% lived with either one (mother only 22%; father only 3%) or both parents (75%).
**Measures**

**Parenting outcomes**

Add Health included four items that represent our parenting outcomes of satisfaction and stress. These items are a subset of the parental stress scale developed by Berry and Jones (1995) rated on a 5-point scale (1 = *strongly agree* to 5 = *strongly disagree*). Two items came from the parental rewards subscale that we used to measure parenting satisfaction, “I am happy in my role as a parent” and “I feel close to my child(ren)”. We reverse coded items such that higher scores represented more parenting satisfaction. The other two items we used to measure parenting stress were from the stressors, “The major source of stress in my life is my child(ren)”, and lack of control, “I feel overwhelmed by the responsibility of being a parent”, subscales. We reverse coded items such that higher scores represented more parenting stress. As prior research with Add Health data have used these four items to represent parental stress (Beaver & Belsky, 2012; $\alpha = .54$), we performed two separate confirmatory factor analyses (CFA) in Mplus Version 7.11 (Muthén & Muthén, 1998–2013) to verify our use of stress and satisfaction separately based on the original work indicating that these items load on different subscales (Berry & Jones). The first CFA included one factor representing parental stress and the second included two factors (as proposed here). The two-factor model ($\chi^2(3) = 17.52, p < .001$; BIC = 6218.05; RMSEA = .08; CFI = .98; SRMR = .03; factors correlated, $r = –.18, p < .001$; factor loadings on respective factors, .74–.93; parenting satisfaction $\alpha = .85$, interitem correlation [IIC] = .74; parenting stress $\alpha = .72$, IIC = .74) fit better than the one-factor model ($\chi^2(5) = 514.10, p < .001$; BIC = 6701.48; RMSEA = .38; CFI = .41; SRMR = .20; factor loadings .51–.69; $\alpha = .64$).

**Emotional support**

Add Health included two items that we used to measure young adults’ parents’ emotional support that were rated on a 5-point scale (1 = *strongly agree* to 5 = *strongly disagree*; reverse coded). These items have been used in prior research to measure social support (e.g., Musliner & Singer, 2014). Items were rated separately about their mothers and fathers (i.e., “You are satisfied with the way your (mother/father figure) and you communicate with each other”). Furthermore, young adults rated on a 5-point scale (1 = *not at all close* to 5 = *very close*) “How close do you feel to your (mother/father figure)”. Higher scores represented more support (maternal: $\alpha = .76$, IIC = .61; paternal: $\alpha = .81$, IIC = .68).
Add Health included three items that we used to measure partner emotional support. Young adults responded to “In general, how happy are you in your relationship to (initials)?” on a 3-point scale (1 = very happy, 2 = fairly happy, 3 = not too happy) that was reverse coded. Young adults rated “How committed are you to your relationship with (initials)?” on a 4-point scale (1 = completely committed to 4 = not at all committed) that was also reverse coded. Finally, young adults were asked to “Select the picture, by entering the number under the picture, which best illustrates how close you feel to (initials)” on a 7-point scale with 1 (nonoverlapping circles) to 7 (close to overlapping circles). Higher scores indicated higher levels of partner emotional support (α = .76, M IIC = .70).

**Background variables**

To rule out third-variable explanations of findings, we considered several covariates. Young adults reported on their gender (1 = male, 2 = female), educational attainment (in years; 1–13), and income (categories 1 = less than $5,000 to 12 = $150,000 or more). They reported whether their current partner was the biological parent of their children (0 = not biological parent, 1 = biological parent), the partner’s ethnicity (0 = not Latino, 1 = Latino), and number of years with partner. Young adults reported on the living status of young adult’s mother and father (0 = deceased, 1 = alive) and whether they were living with a parent (0 = no, 1 = yes). Young adults reported how many children they had and children’s ages (mean score created across all children’s ages). They also reported on their language use, “whether or not they spoke and/or wrote Spanish” (0 = English only—not speaking or writing Spanish, 1 = Bilingual—speaking and/or writing Spanish and English). Age of young adults was calculated based on date of birth and interview date. Age of young adults’ oldest child and age was used to determine if they were a teen (younger than age 20) when they had their first child.

Add Health included five items from the Center for Epidemiological Studies Depression Scale (CES-D; Radloff, 1977) that are recommended for use with ethnic minority samples and have been validated for use with Latinos across generational statuses (Perreira, Deeb-Sossa, Harris, & Bollen, 2005). Nineteen of the 20 original CES–D items were administered at Wave 1 only. At Wave 1, the correlation between the 5-item scale and the 19-item CES–D was high, $r = .86$, $p < .001$, providing additional evidence for the validity of the shortened scale. Young adults reported if during the past 7 days, they “felt bothered by things”, “couldn’t shake off the blues”, “had trouble concentrating”, “felt depressed”, or “felt sad” on a 4-point scale (1 = never or rarely to 3 = most of the time or all of time). Higher scores indicated higher levels of depressive symptoms (α = .78, M IIC = .43).
Analytic Plan

We examined the study goals using a structural equation modeling (SEM) approach with latent variables in Mplus Version 7.11 (Muthén & Muthén, 1998–2013). As currently recommended (Enders, 2010), we used full information maximum likelihood robust (with the assumption that data are missing at random). We used auxiliary variables (i.e., household income, living status of young adult’s mother and father) to improve estimation under conditions of missing data (i.e., study variables at the item level had 0%–15.2% missing data; Enders, 2010). We included young adults’ mothers’ and fathers’ living status as not all youth had living parents and, as such, have missing data on those items. We included household income as an auxiliary variable as it was correlated with missing data ($r = -.13, p = .001$). Several indices were used to evaluate model fit: the chi-square ($\chi^2$) value, the Comparative Fit Index (CFI $> .90$), the Root Mean Square Error of Approximation (RMSEA $< .10$), and the Standardized Root Mean Square Residual (SRMR $< .10$; Hu & Bentler, 1999). Analyses proceeded in two steps. We used CFA to evaluate the fit of the measurement model for the latent constructs. The initial model included all the latent factors (i.e., young adults’ depressive symptoms, maternal support, paternal support, partner support, parenting stress, parenting satisfaction) and allowed for correlations among the latent factors, but did not allow for correlated residual variances. Upon establishing a measurement model with acceptable fit, analyses proceeded with the structural models.

We first estimated our hypothesized model including the full set of theoretical covariates to determine which were significantly associated with the intervening and dependent variables to determine the set of covariates to include in final analyses (Spector & Brannick, 2011). Partners’ biological parent status, living status of young adult’s mother and father, and household income were not significantly ($p < .05$) related to the intervening or dependent variables. Furthermore, our final model (see Figure 1) with only significant covariates (see Table 2 for list) as compared to the model with all covariates had similar fit and produced the same pattern of results (although could not be statistically compared because not nested models), thus we retained our final model as the more parsimonious model. All of the exogenous (independent and control) variables were allowed to correlate. For the first study goal, we estimated the links between emotional support (maternal, paternal, and partner) as predictor variables and parenting stress and parenting satisfaction as criterion variables. For the second study goal, we estimated two alternative models that included the emotional support factors as predictors, either parenting stress or satisfaction as an intervening variable, and either parenting satisfaction or stress as a criterion variable, respectively. To test for indirect relationships, we used the bootstrapping
method with standard errors computed using bias-corrected bootstraps (i.e., 1000) and bias-corrected confidence intervals (Williams & MacKinnon, 2008). As recommended by Williams and MacKinnon, we considered 95% confidence intervals (CI) not containing zero as evidence of an indirect relationship. Lastly, for both study goals, we conducted separate multiple group analyses to examine potential variation by parents’ language use and gender. We first estimated a model that allowed path coefficients to vary freely across groups (e.g., males vs. females). We then estimated separate models that constrained path coefficients that varied (i.e., significant vs. not significant, different signs) across the groups. We conducted model comparisons using chi-square ($\chi^2$) difference tests. Evidence of moderation is described below when the constrained model resulted in a significant change in $\chi^2$, $p < .05$, and fit indices indicated that the unconstrained model fit significantly better than the constrained model (Kline, 1998).

**Results**

**Measurement Model**

The final measurement model demonstrated adequate fit, $\chi^2(98) = 436.70$, $p < .001$; RMSEA = 0.07, 90% CI [0.06, 0.08]; CFI = .91; SRMR = .07. Based on statistical and theoretical considerations, the residual variances between the two CES-D items (i.e., blues and depressed) were allowed to correlate. All items had a significant standardized loading greater than .51 on their respective factors, suggesting that the selected indicators were reasonable representations of the latent constructs. Using this measurement model, we proceeded to test the structural models. Descriptive statistics and correlations are shown in Table 1.

**Structural Models**

*Emotional support as related to parenting stress and satisfaction*

The model testing the hypothesized relations for Goal 1 fit the data well and explained a significant amount of the variance in parenting stress and satisfaction (see Figure 1; Table 2). Young adult parents’ depressive symptoms were related to lower levels of parenting satisfaction and higher levels of parenting stress. Parents’ educational attainment was associated with lower levels of stress. The older children was were on average related to lower levels of satisfaction and stress, whereas more children was associated with higher levels of satisfaction and stress. Older young adults had higher levels of parenting satisfaction, whereas young adults who were teen parents
Table 1. Bivariate Correlations and Descriptive Statistics of Latent and Manifest Study Variables (N = 737)

<table>
<thead>
<tr>
<th>Variables</th>
<th>1</th>
<th>2</th>
<th>3</th>
<th>4</th>
<th>5</th>
<th>6</th>
<th>7</th>
<th>8</th>
<th>9</th>
<th>10</th>
<th>11</th>
<th>12</th>
<th>13</th>
<th>14</th>
</tr>
</thead>
<tbody>
<tr>
<td>1. YA educational attainment&lt;sup&gt;a&lt;/sup&gt;</td>
<td>–</td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>2. YA depressive symptoms</td>
<td>–.09***</td>
<td>–</td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>3. YA children's average age&lt;sup&gt;a&lt;/sup&gt;</td>
<td>–.19***</td>
<td>.10***</td>
<td>–</td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>4. YA number of children&lt;sup&gt;a&lt;/sup&gt;</td>
<td>–.12***</td>
<td>.09***</td>
<td>.11***</td>
<td>–</td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>5. YA age&lt;sup&gt;a&lt;/sup&gt;</td>
<td>.03</td>
<td>–.03</td>
<td>.10***</td>
<td>.00</td>
<td>–</td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>6. YA living with parent(s)&lt;sup&gt;b&lt;/sup&gt;</td>
<td>.08***</td>
<td>–.09***</td>
<td>–.08***</td>
<td>.13***</td>
<td>.04</td>
<td>–</td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>7. YA teen parent (1st child)&lt;sup&gt;a&lt;/sup&gt;</td>
<td>–.08***</td>
<td>.02</td>
<td>.43***</td>
<td>.20***</td>
<td>–.21***</td>
<td>–.01</td>
<td>–</td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>8. YA partner ethnicity&lt;sup&gt;a&lt;/sup&gt;</td>
<td>–.12***</td>
<td>–.03</td>
<td>.09***</td>
<td>.12***</td>
<td>.10***</td>
<td>–.04</td>
<td>.02</td>
<td>–</td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>9. Years with partner&lt;sup&gt;a&lt;/sup&gt;</td>
<td>.04</td>
<td>–.05</td>
<td>.10***</td>
<td>.34***</td>
<td>.22***</td>
<td>.19***</td>
<td>.01</td>
<td>.19***</td>
<td>–</td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>10. Maternal support</td>
<td>–.08*</td>
<td>–.22***</td>
<td>–.05</td>
<td>–.03</td>
<td>.02</td>
<td>–.05</td>
<td>–.04</td>
<td>.07</td>
<td>.00</td>
<td>–</td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>11. Paternal support</td>
<td>–.01</td>
<td>–.20***</td>
<td>–.02</td>
<td>–.07</td>
<td>.10***</td>
<td>–.05</td>
<td>–.07</td>
<td>.07</td>
<td>.05</td>
<td>.54***</td>
<td>–</td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>12. Partner support</td>
<td>.07</td>
<td>–.37***</td>
<td>–.21***</td>
<td>.07</td>
<td>–.03</td>
<td>.18***</td>
<td>–.07</td>
<td>–.01</td>
<td>.15***</td>
<td>.07</td>
<td>.17***</td>
<td>–</td>
<td></td>
<td></td>
</tr>
<tr>
<td>13. YA parenting stress</td>
<td>–.21***</td>
<td>.29***</td>
<td>.01</td>
<td>.18***</td>
<td>–.04</td>
<td>.02</td>
<td>.00</td>
<td>.11***</td>
<td>–.06</td>
<td>–.11***</td>
<td>–.09</td>
<td>–.15***</td>
<td>–</td>
<td></td>
</tr>
<tr>
<td>14. YA parenting satisfaction</td>
<td>.08**</td>
<td>–.19***</td>
<td>–.22***</td>
<td>.16***</td>
<td>.13***</td>
<td>.11***</td>
<td>–.19***</td>
<td>–.02</td>
<td>.09***</td>
<td>.20***</td>
<td>.15***</td>
<td>.21***</td>
<td>–.20***</td>
<td>–</td>
</tr>
<tr>
<td>M</td>
<td>4.66</td>
<td>0.71</td>
<td>5.13</td>
<td>1.84</td>
<td>30.59</td>
<td>.84</td>
<td>.14</td>
<td>.73</td>
<td>7.06</td>
<td>4.50</td>
<td>4.09</td>
<td>2.60</td>
<td>2.20</td>
<td>4.75</td>
</tr>
<tr>
<td>SD</td>
<td>1.96</td>
<td>0.56</td>
<td>3.00</td>
<td>1.16</td>
<td>1.73</td>
<td>.36</td>
<td>.35</td>
<td>.44</td>
<td>4.10</td>
<td>0.72</td>
<td>0.96</td>
<td>0.57</td>
<td>0.85</td>
<td>0.51</td>
</tr>
</tbody>
</table>

YA = young adults'. Living with parents and teen parent coded as 0 = no, 1 = yes. Partner ethnicity coded as 0 = not Latino, 1 = Latino.

<sup>a</sup> Manifest variable.
<sup>b</sup> p < .10 ; ** p = .05 ; *** p < .05
had lower levels of parenting satisfaction. Having a partner who was also Latino was related to higher levels of parenting stress. Partially consistent with our hypotheses, we found that perceptions of maternal support were related to higher levels of parenting satisfaction. For partner and paternal support, the associations with parenting satisfaction were either at the trend level \((p < .10)\) or did not approach significance, respectively. There were no significant predictors of parenting stress beyond our covariates. The moderation analyses revealed variation by gender, \(\Delta \chi^2 (1) = 3.85, p = .05\), but not by language, \(\Delta \chi^2 (1) = .42, p = .517\). The results revealed that for male young adults, \(b = .23, SE = .10, p = .02\), but not females, \(b = .01, SE = .04, p = .76\), partner support was related to higher levels of parenting satisfaction.

**Intervening mechanisms**

The model including parenting stress as an intervening variable had acceptable fit and explained significant variance in parenting stress and satisfaction, \(\chi^2 (179) = 592.23, p < .001\); RMSEA = .06, 90% CI [.05, .06]; CFI = .90; SRMR = .05. There was no evidence for an indirect association between perceptions of emotional support and parenting satisfaction through parenting stress. The only evidence for an association was parenting stress relating to
lower levels of parenting satisfaction, $\beta = -0.18$, $SE = 0.03$, $p < 0.05$. The results held across male, female, English-only, and bilingual young adults as evidenced by no variation in findings across gender in the multiple group model and the chi-square difference test for language for the path from maternal support to parenting stress to parenting satisfaction, $\Delta \chi^2(3) = 2.15$, $p = .542$.

The model including parenting satisfaction as an intervening variable had acceptable fit and explained significant variance in parenting satisfaction and stress (see Figure 2; Table 2). The bias-corrected CI for the indirect relationship indicated that parenting satisfaction played a role in the indirect relation between perceptions of maternal support and parenting stress. In particular, maternal support, but not paternal or partner support, was associated with high levels of parenting satisfaction, which, in turn, was related to low levels of parenting stress. The results held across male, female, English-only, and bilingual parents as evidenced by no variation in findings across the groups in the multiple group models.

**Discussion**

Incorporating Belsky’s (1984) process model of parenting and the integrative model (García Coll et al., 1996), this study extends the literature by simultaneously examining multiple sources of emotional support (i.e., maternal, paternal, and partner) as related to parenting stress and satisfaction among young adult parents of Mexican origin. Competing models of the indirect relations between emotional support and parenting outcomes were
examined. In addition, linguistic acculturation and gender were explored as moderators of these relations. Our strongest findings partially support Belsky’s process model of parenting, suggesting that contextual sources of support (i.e., maternal) relate to parenting satisfaction, but interestingly, not directly to parenting stress. In the test of the indirect relationship, though we found that maternal support related to parenting stress through parenting satisfaction. We also found evidence of variation in the findings, suggesting that the mechanisms linking emotional support and parenting satisfaction differ based on gender, but are similar for English-only speaking and bilingual parents of Mexican origin. The findings from this study are notable in providing preliminary evidence for the processes whereby support links to stress and satisfaction, providing an initial understanding of factors associated with positive adaptation in the parenting role among Mexican-origin parents.

**Direct Links between Emotional Support and Parenting Outcomes**

We found evidence of emotional support relating to high levels of parenting satisfaction, with results varying by source of support received. Maternal
support emerged as the strongest predictor of parenting satisfaction. In contrast to prior work with European American samples, partner support emerged as a predictor for males only. Previous research has not examined the relations between emotional support and parenting satisfaction among Mexican-origin parents. Our investigation provides initial evidence of the importance of maternal support in enhancing young adults’ parenting satisfaction within this specific cultural subgroup. Results may be partially interpreted using a cultural framework. It has been noted that extended family support is important to parenting outcomes among Latinos (Cardoso et al., 2010), and that cultural groups for whom familism is a salient core value may be more likely to draw on family-of-origin support (Falicov, 2005). The prominence of traditional gender roles for families of Mexican origin may contribute to females being sought out as supports more than males. For example, mother–child relationships are particularly salient in this population as mothers tend to be more involved with their children and provide more support and nurturance than do fathers (Crockett et al., 2007). In prior research with foreign-born Latinos, fathers were most often identified as providers, whereas mothers were more likely to be identified as the main source of emotional support for children (Parra-Cardona, Cordova, Holtrop, Villarruel, & Wieling, 2008). Our findings support the idea that young adult parents’ satisfaction relies more on mothers’ emotional support than fathers’. Studies also suggest that Latino fathers tend to express caring and support more indirectly (Crockett et al., 2007), such as working outside of the home to provide resources for the family. These paternal activities were not examined in this study, but should be examined as researchers continue to explore the unique roles of both mothers and fathers in supporting their adult children. It should be noted, however, that traditional views of gender have been shifting among Latinos over the past several decades, with males and females seeking out more egalitarian roles within the family (Parra-Cardona et al., 2008). Because egalitarian gender roles are more prevalent in the dominant U.S. culture, it is possible that those who are more extensively exposed to Anglo beliefs will adopt less traditional attitudes and beliefs around gender roles. As such, they may be more inclined to draw on other sources of support beyond the maternal support that emerged as a predictor in these analyses. Thus, it would be important for future research to include direct measures of cultural attitudes and beliefs (e.g., traditional gender role attitudes, familism values) to understand these sources of variation.

Furthermore, it is possible that the ethnicity of the young adults’ partner influences these relations as well, with different patterns occurring for couples from two different cultural contexts. In this dual-ethnic context, Mexican-origin young adults may rely on different cultural scripts when engaging with their parents as compared to their partners in relation to their parenting role. In this study, partner ethnicity was used as a control variable (i.e.,
there was limited variability, with most partners also being of Latino origin); yet, future investigations should examine how potential differences in parents’ cultural backgrounds contribute to our understanding of these family dynamics.

It is surprising that in this sample, emotional support was not directly associated with parenting stress, particularly as the evidence is fairly robust in indicating that emotional support diminishes parenting stress (Cardoso et al., 2010; McConnell et al., 2010; Mulsow et al., 2002). It is possible that emotional support is not enough to diminish the daily stressors of parenting. Often parenting stress results from a struggle to manage the day-to-day tasks of caregiving (e.g., logistical demands, lack of respite from continuous caregiving), and alleviating the stress associated with these demands could require instrumental support. This study did not examine instrumental support variables (e.g., financial support, childcare), therefore we could not assess whether other types of support are related to decreased stress. One might hypothesize that the co-occurrence of both emotional and instrumental support would be most successful in easing the stress of parenting. Another potential explanation for this null finding can be found in our discussion of the intervening relationship between parenting satisfaction and stress.

**Intervening Mechanisms Linking Support and Parenting Outcomes**

Our examination of two alternate models supports satisfaction, rather than stress, as an intervening variable. Specifically, we found the strongest evidence for maternal support relating to parenting stress indirectly through satisfaction. This finding is of note because it is the first to test the intervening relationship between parenting satisfaction and parenting stress, and in particular, among Mexican-origin young adults. This is consistent with Deater Deckard’s (2004) writing on parenting stress, asserting that external agents, such as social support, do not directly link to stress, but rather link indirectly through parents’ interpretation of their parenting experience (e.g., parenting satisfaction). These findings support the use of a strengths-based approach in that we should work to enhance parents’ satisfaction in their role (as opposed to decreasing stress), which will then have the added impact of reducing parenting stress. It is notable that maternal support remains the strongest predictor of these relations. However, these findings are preliminary, as data were cross-sectional and therefore cannot be interpreted as causal. It is likely that there is feedback between the components in this model, and that other factors (e.g., child temperament or behavior) also may play a role in how this process occurs (Potapova, Garstein, & Bridgett, 2014). Thus, further work is needed to investigate these important relations. This study provides an initial step in understanding these complex processes, providing
preliminary evidence for the importance of including multiple sources of support in testing links to parenting outcomes.

**The Moderating Roles of Linguistic Acculturation and Parent Gender**

Gender moderated the positive relationship between partner support and parenting, with this association emerging for male young adult parents only. This is an interesting finding, for a few reasons. First, it further supports the idea that there is something unique and important about the role of female emotional support in this population. As previously discussed, when families endorse traditional gender roles in this cultural context it is possible that females are more apt to be the primary source of emotional support within the family. Thus, our finding is specific not only to parents' mothers but to female partners, as well. This finding is in contrast to the broader literature on the impact of partners on parenting outcomes, as most research seems to indicate that women's parenting tends to be more heavily influenced by their partners than does men's (Hossain et al., 2015; Yu et al., 2008). However, we find that Mexican-origin males appear more susceptible to partner influences as related to parenting satisfaction. It is possible that within this cultural milieu, mothers serve as the gatekeepers to fathers' relationship with their children (as tends to be the case in other cultural groups as well), ultimately affecting their satisfaction in their role as a parent. Research does indicate that Latina women are more directly involved in the caretaking of their children (Updegraff et al., 2009); therefore, they may be important entry points for fathers to foster positive relationships with their children and ultimately feel satisfaction in the parenting role. Overall, our findings suggest that whereas men's parenting satisfaction is dependent upon both maternal and partner support, women's parenting satisfaction is enhanced by maternal support only, highlighting the importance of a nurturing female support figure in fostering parenting satisfaction. This research demonstrates the importance of additional examinations of within-group variation among ethnic-homogenous subgroups.

Linguistic acculturation did not moderate any of the tested relations in this study. There are mixed findings in the literature on acculturation as related to social support and parenting (Almeida, Molnar, Kawachi, & Subramanian, 2009; Nam, Wikoff, & Sherraden, 2013); this study lends support to those who find that acculturation does not relate to these factors. Conversely, a more sensitive, multidimensional measure of acculturation or a more heterogeneous sample including more variability on acculturation (e.g., we did not have any monolingual Spanish speakers in our sample) potentially could yield different results for parenting dynamics. These are areas for future research.
Limitations and Future Directions

This study has several limitations that should be noted. Although a strength of the study design was its investigation of Mexican-origin young adult parents, the results may not generalize to other Latino subpopulations due to differences in sociocultural contexts. Furthermore, the questionnaires in the Add Health survey were conducted in English, thus excluding monolingual Spanish speakers and making the findings generalizable to bilingual and English-only speaking Mexican-origin parents, potentially excluding those who may be less acculturated. More research is needed using samples with more variation in acculturation level, in addition to adding more nuanced measures of acculturation. In addition, although we examined three potentially important sources of support for Mexican-origin parents, other sources may be important as well. For instance, in Latino cultures godparents (compadres) and fictive kin often take on a special role in the lives of parents and their children (Kana'laupuni, Donato, Thompson-Colón, & Stainback, 2005). As female figures seem particularly important in this population, it would be interesting to explore other female supports, as well. Future studies should explore friends, siblings, godparents, and parents-in-law as potentially significant sources of social support.

Due to availability of data in this secondary analysis, we utilized a cross-sectional design; therefore, our understanding of the direction of relationships and causality is limited. Future studies should investigate the bidirectional nature of satisfaction, stress, and support. Moreover, the chronicity of parenting stress over time seems to be particularly important to parental functioning (Mulsow et al., 2002) and examination of support as it relates to chronic versus episodic parenting stress should be explored. Our measurement of emotional support was not consistent across reporters as the items for maternal/paternal support were different from the items for partner support. The items also focused on the relational component of emotional support (e.g., perceived relationship quality/closeness), which limits to some extent our understanding of this specific mechanism of support. It is not clear if we are in fact measuring a construct more closely related to relationship quality as opposed to support. Future studies would benefit from a more comprehensive measure of emotional support to elaborate further upon these initial findings.

In addition, the constructs in this study were operationalized relying on a smaller set of items, a common limitation of secondary data analysis. While conceptually similar to subsets of items from established measures, our constructs were not measured with the same level of precision as would have been possible with the use of psychometrically validated measures. This may have limited our examination of the full scope of the constructs under study. To account for these limitations, we used structural equation modeling and
latent factors with at least two indicators to model successfully error structures and to reduce systematic bias in our findings related to measurement error. Thus, the results may reflect a conservative estimate of the associations examined. Relatedly, because of the availability of measures, we were only able to rule out relevant factors from the parent domain (i.e., depressive symptoms) but not from the child domain (i.e., child factors such as behavioral problems) that might partially explain the association between emotional support with parental stress and satisfaction. Future studies would benefit from adding measures of children’s behavior as they have been found to significantly influence parenting stress (Chung et al., 2013). Finally, data were from a single respondent, which may result in less objectivity. Despite these limitations, this study took an initial step in understanding mechanisms linking emotional support, parenting stress, and parenting satisfaction among an underrepresented group in the family literature, Mexican-origin parents.

Implications for Practice

The finding for the positive influence that supportive females may have on parenting satisfaction has implications for family therapists who work with this specific cultural group. As a strengths-based approach to therapy is one of the hallmarks of modern practice, it is important to identify factors that enhance positive adaptation. However, therapists also should be reticent to generalize this finding to all Mexican-origin individuals with whom they work, as issues such as gender role beliefs and attitudes, endorsement of familism, and nativity status (to name a few) all may influence how support is experienced (and were not examined here). One also must be sensitive to the unique relationships young adult parents have with their partners and own parents because in some circumstances these relationships may be maladaptive. It is important to adapt any intervention to the specific family dynamic, and seek to collaborate with parents around their preferences that are consistent with their cultural beliefs and values.

Therapists also should be aware of the role strain that is potentially felt by females in more traditionally oriented family structures, as looking to increase the involvement of female kin as a therapeutic support may place undue strain on that individual. Perhaps helping young adult parents to find other nurturing females in their lives to draw on for support will enhance their parenting satisfaction, while not placing primary pressure on any one individual to provide that support (e.g., grandmothers, female partners). Focus also may need to be placed on helping the individuals who are providing support, rather than focusing solely on the adult parent’s experience. This study highlights the importance of focusing on nuclear and extended family dynamics, which may be particularly salient in families from cultural groups who endorse a strong sense of familism.
Conclusions

Results from this study underscore growing clinical and empirical efforts to recognize the cultural-ecological contexts in which families function (e.g., Dumka et al., 2002; García Coll et al., 1996). Several implications for application stem from this study. First, this study provides information related to a specific ethnic group, providing researchers and clinicians with further information that may inform future study and work with Mexican-origin families. Next, we find that maternal support is the strongest predictor of parenting satisfaction among this group, highlighting the need to support this relationship as a means of supporting parenting outcomes. Finally, initial evidence points toward the need to investigate further mechanisms that link emotional support, parenting stress, and satisfaction among Mexican-origin families—it is possible that enhancing emotional supports could help increase parenting satisfaction, thereby reducing parenting stress among a large population of young adults.

Acknowledgments — This research uses data from Add Health, a program project directed by Kathleen Mullan Harris and designed by J. Richard Udry, Peter S. Bearman, and Kathleen Mullan Harris at the University of North Carolina at Chapel Hill, and funded by grant P01-HD31921 from the Eunice Kennedy Shriver National Institute of Child Health and Human Development, with cooperative funding from 23 other federal agencies and foundations. Special acknowledgment is due Ronald R. Rindfuss and Barbara Entwisle for assistance in the original design. Information on how to obtain the Add Health data files is available on the Add Health website (http://www.cpc.unc.edu/addhealth). No direct support was received from grant P01-HD31921 for this analysis. All authors contributed equally to this work.

References


