

Parental Bonds in Cultural Context:

The effects of parent-child bonds and
cultural values on depression and
psychological distress

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Attachment theory: The Beginnings of Parental Bonds

- Attachment is thought of as a biologically driven system by which the infant strives to ***maintain proximity*** to its caregiver
- Attachment theorists also propose that infants also have an innate drive to ***explore and learn*** about their environment
- Secure attachment bonds form when parents and other caregivers sensitively aid a child in balancing these conflicting drives
- Infants create ***internal working models*** from these early interactions, and may come to view the world as a safe place and themselves as worth of care and attention.

Attachment theory: Cultural Implications

- Much of attachment theory is based on the western ideal of Individualism, and focuses on the infant's independent exploration.
- Japanese and Puerto Rican mothers have been shown to emphasize different ideals, such as social engagement, good manners and cooperation. (Rothbaum et al 2000, Harwood Miller & Irizarry, 1995)
- Roughly equal proportions of infants are classified as secure across cultures.
- Types of insecure attachments vary by culture, with Independent cultures having more Ambivalent attachments, and Interdependent cultures having more Avoidant attachments. (Carlson & Harwood, 2003)
- Different parent behaviors are also associated with secure attachments across cultures. (Rothbaum et al 2000, Carlson & Harwood, 2003)
- In summary, Attachment may be better understood as a caregiving behavioral system aimed at teaching children a culturally optimal balance of autonomy and relatedness. (Harwood Miller & Irizarry, 1995)

Parental Bonds Beyond Infancy: The PBI

- Parent-child relationships continue to develop throughout childhood, and can be measured more conveniently, through paper and pencil measures.
- One such instrument is Parker, Tupling and Brown's (1979) Parental Bonding Instrument
- Created through factor analysis of existing scales, children and adults rate each of their parents across two scales:
- **Care:** Consists of items relating to parents emotional warmth, attention, display of affection, understanding, and assistance when needed
- **Overprotection:** Consists of items relating to parental control, intrusiveness, and encouragement of dependency, as well as permissiveness and encouragement of autonomy.

The PBI and Attachment: Perceptions of Caretaking

- Several researchers have used the PBI as an index of attachment. Validation for this approach is weak
- Other researchers have found strong correlations between the PBI and paper-and-pencil measures of adult attachment and related constructs
- One study (Manassis et al 1999) compared the PBI with the adult attachment interview. They found:
- High Care and low Overprotection are associated with Secure attachments
- There is no direct mapping between PBI quadrants and attachment classification
- PBI scores do not account for idealization or anger, and are thus not as accurate as the AAI.
- Conclusion: Parental bonds are related to attachment, but are not the same construct. Particularly, they are vulnerable to biases in the recall of respondents

The PBI and Mental Health

- Depression: 34 studies to date show a connection between low Care, high Overprotection, and depression. This has been shown in both community and clinical samples in the US and Australia, as well as in Japan.
- Anxiety: 11 studies show a link between low Care, high Overprotection and anxiety symptoms and disorders.
- Other disorders: A handful of studies also show links between low Care, high Overprotection and:
 - Schizophrenia (Parker et al 1992)
 - Eating disorders (Romans et al 2001, Rhodes & Kroger, 1992, Fowler & Bulik, 1997)
 - Disruptive behavior disorders (Rey & Plapp, 1990)
 - Personality disorders (Norden et al, 1995)
- No single disorder has shown a consistently stronger relationship with the PBI, when compared to other disorders.

Parental Bonds in Immigrant samples

- As with attachment, researchers have found differences in parental bonds across cultures. Most studies examine immigrants to western nations.
- Vietnamese immigrants in both Australia and the USA report lower Care and greater Overprotection than their native Caucasian peers.
- Parental bonds characterized by low Care and high Overprotection were associated with low wellbeing, self-esteem and social support
- Indian and Pakistani women in the UK report greater Overprotection than Caucasian women. Some samples also report lower Care
- High Overprotection was associated with high conflict with parents

Parental Bonds in Cross-cultural samples

- Two researchers have examined parental bonds with participants living in non-western nations
- Pakistani women reported greater Overprotection than Caucasian British women, but less than Immigrant Pakistanis living in the UK (Mujtaba & Furnham, 2001)
- Israeli youths reported greater Care and less Overprotection than original Australian norms
- In general, parental bonds appear “healthier” by western standards in non-immigrant groups. Much of the effects seen in immigrant samples may be due to pressures of immigration, not cultural differences.

Parenting and Culture: Definition and Measurement

- Knowing that parent-child relationships differ across cultures does not explain the meaning of these differences. We need to understand the purpose these differences serve within the culture.
- Culture is a multi-faceted construct, consisting of knowledge, attitudes, values, goals, beliefs and practices.
- An individual can belong to many cultural subgroups, and can display different aspects of these cultures in different settings
- Any valid measurement of culture must account for at least some of this variation in culture across individuals.
- Culture exists to organize behavior and knowledge in a way that allows for meaningful social interaction.
- Parenting is not only a social relationship, but also the primary vehicle for the transmission of culture to the next generation

Remaining Research Questions

- It is unclear what causes the link between the PBI and so many varieties of psychopathology. A common factor, such as a tendency towards psychological distress in general, might better account for this relationship.
- Although we know that parental bonds, like attachment, differ across cultures, we do not know what these differences mean, or the cultural values associated with them. We also do not know the role culture plays in the connection between parental bonds and psychopathology

The Current Study: Research Questions

- **Is there a direct relationship between parental bonds and depression, or is this relationship better accounted for by general psychological distress?** Based on research showing connections between the PBI and diverse disorders, it is expected that the relationship between PBI scores and depression will no longer be significant when general distress is controlled for.
- **Are cultural values as measured by the CBBAP associated with parental bonds?** Past research does not explore this topic so no directional hypotheses can be generated.
- **Is there an interaction between parental bonds and cultural values in predicting depression and psychological distress?** Past research does not explore this topic so no directional hypotheses can be generated.

Methods

Participants: 246 self-identified Chinese-American adults, ages 18-87 (mean 35.9). Most live in the Bay Area of California.

Procedures: Participants were asked to complete a large battery of questionnaires and return them to the researcher who contacted them.

Measures:

- Demographic Information
- Parental Bonding Instrument (PBI, Parker, Tupling & Brown, 1979)
- Cultural Beliefs and Behaviors Adaptation Profile (CBBAP, Shiang & Bogumill, 2001)
- Independence/Interdependence
- Discrepancies between beliefs and behaviors
- Depression: Self-report history of depression, the Beck Depression Inventory (BDI, Beck, Rush & Shaw, 1979), and the Chinese Depression Inventory (CDI, Zheng & Lin, 1991)
- General Psychological Distress from the SCL-90-R (Derogatis, 1992)

Results:

Characteristics of the sample

Demographics:

- 61.4% women
- 44.7% married, 36.2% with children
- Highly educated, with 85% having at least a college education
- Roughly average income for the Bay Area
- 59.8% first generation immigrants born primarily in China, Taiwan, and Hong Kong

Cultural Beliefs and Behaviors:

- Most Independent in the social domain, least in family domain
- Most discrepancies seen in social domain, least in family and work domain
- Family domain: Beliefs more Interdependent than Behaviors
- Social domain: Beliefs more Independent than Behaviors

Results:

Characteristics of the sample

Parental Bonds:

- This sample reports more Care and more Overprotection than the normative sample
- Age and number of children correlated with Care from both parents, and maternal Overprotection. Older participants reported more Care and less Overprotection.

Depression and Distress:

- 12-17% of the sample reported depression scores or distress scores above mild clinical cutoff (BDI, CDI, SCL-90-R)
- 53% reported a history of sub-clinical depression on a single item
- Depression and distress were associated primarily with socio-economic variables.
- For immigrants, more years in the US was associated with lower depression.

- This sample reported higher Care than both the normative sample and other Asian samples
 - May be related to overall affluence and cultural diversity of the Bay Area
 - May imply that Asian parents, when not under adverse cultural and economic pressures associated with immigration, do not show low Care, and that past cultural findings show immigration, not cultural effects.
- This sample reported higher Overprotection than the normative sample, which is similar to what has been seen in past non-western samples
 - Given relationship between secure attachment and control in Puerto Rican families (Carlson & Harwood, 2003), this may not have negative implications for mental health, as was previously thought.
- This sample showed Age differences not seen in previous adult samples
 - This sample includes a large population of older adults (15% over age 50)
 - May imply that more life experiences, particularly experience with caretaking roles, changes one's views of one's parents.

Results – Question 1:

Is there a direct relationship between parental bonds and depression, or is this relationship better accounted for by general psychological distress?

- Overall, General Distress showed the weakest correlation with the PBI, ranging from .096 to .128
- PBI variables explained between 2.5% and 5.5% of variance in depression scores when general distress was controlled

Partial Correlations between PBI and depression:

	Mother		Father	
	Care	Overprotection	Care	Overprotection
BDI	-.208**	-.168*	.258***	.177***
CDI	-.163*	-.125	.157*	.035
Hx Dep.	-.159*	-.067	.205**	.150*

* p < .05 ** p < .01 *** p < .001

- General distress does not explain the relationship between PBI scores and depression. Therefore, General distress CANNOT account for the link between the same PBI profile and a vast array of disorders.
- This is not likely due to a floor effect in either distress or depression, as responses are reflective of the level of distress typically seen in other community samples
- There may still be another mediating variable explaining how so diverse a collection of disorders are related to the same PBI profile. This study only rules out general distress.
 - One possible alternative explanation worthy of investigation is creation of maladaptive internal working models, a theoretical outcome of the attachment process. The nature of these models might then explain what type of disorder the child was most vulnerable towards.
 - This would be consistent with many theories of psychotherapy

Results – Question 2:

Are cultural values as measured by the CB B AP associated with parental bonds?

Main comparisons:

- Overall, low Care for both parents was associated with higher independence
- This was particularly true in the Family domain, with correlations ranging from -.412 to -.454
- High maternal overprotection was weakly associated with independent beliefs in the family domain (.202)
- Discrepancies showed few correlations with PBI variables.

Patterns:

- In general, participants fell into 3 groups
- Those reporting High Care from both parents were most interdependent
- Those reporting High Care from one parent were in the middle
- Those reporting Low Care from both parents were the most independent
- The influence of mother's O-P was washed out by stronger influence of Care

Participants who are Independent tend to describe their parents as less Caring

Possible explanations:

- * Chinese Americans with more western views judge their Asian parents more harshly. They may have more conflict with their families and may have a more difficult relationship due to a likely generational gap in cultural views.
- * Independence across cultures may be associated with low Care, as an adaptive response. Individuals who do not experience the Care they expect may intentionally distance themselves from their families and not rely on others.
- * Independence across cultures may cause people to interpret relationships as less caring, because these individuals would be more likely to judge Care based on their own needs rather than based on their relationship other's needs and style of relating

Results – Question 3:

Is there an interaction between parental bonds and cultural values in predicting depression and psychological distress?

Main effects:

- Low Care and high Overprotection were associated with more depressive symptoms.
- There were no main effects of culture or discrepancies in relation to depression.

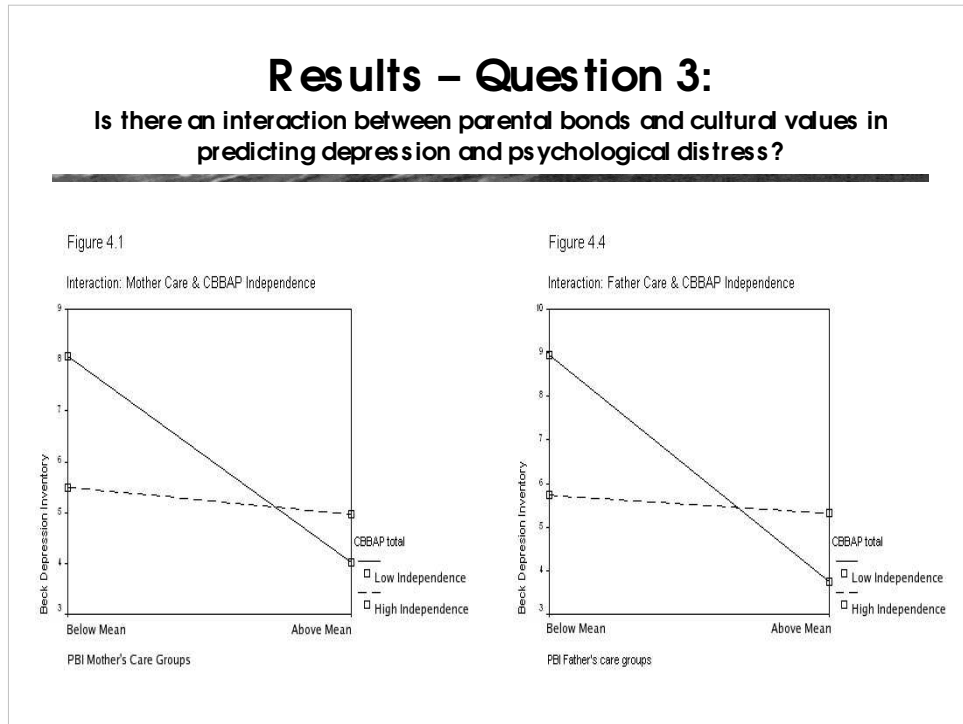
Interactions:

- Both parents showed a Care X Independence interaction. Low Care was only associated with depression for participants who were Interdependent.
- Both parents showed an Overprotection X Positive discrepancies interaction. High Overprotection was only associated with depression for participants with few discrepancies between beliefs and behaviors
- Fathers showed a Care X Overprotection X Positive Discrepancies interaction. All participants reporting Low Care reported more depressive symptoms, and did NOT show the OP X PD interactions above

See figures, next slides

Results – Question 3:

Is there an interaction between parental bonds and cultural values in predicting depression and psychological distress?



- Although low Care was associated with depression overall, this relationship was true only for Interdependent participants.
- This finding is counter-intuitive from a cultural differences perspective. The PBI is a western measure of parenting, yet it is related to depressive symptoms only for participants with more eastern beliefs and behaviors.
- This finding makes intuitive sense from the definition of interdependence, a worldview emphasizing connections with others. Parental Care would matter more to an Interdependent person than an Independent person.
- These results imply that replication in a more diverse sample is needed. This effect may be true for all interdependent people, not just interdependent Chinese Americans.

Results – Question 3:

Is there an interaction between parental bonds and cultural values in predicting depression and psychological distress?

Figure 4.2

Interaction: Mother Overprotection & positive discrepancies

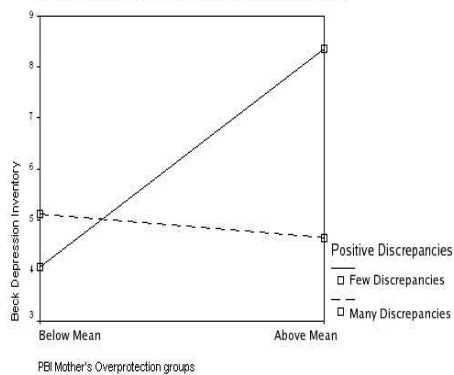
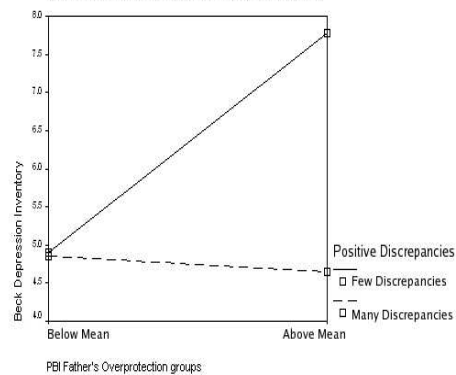


Figure 4.5

Interaction: Father Overprotection & Positive Discrep



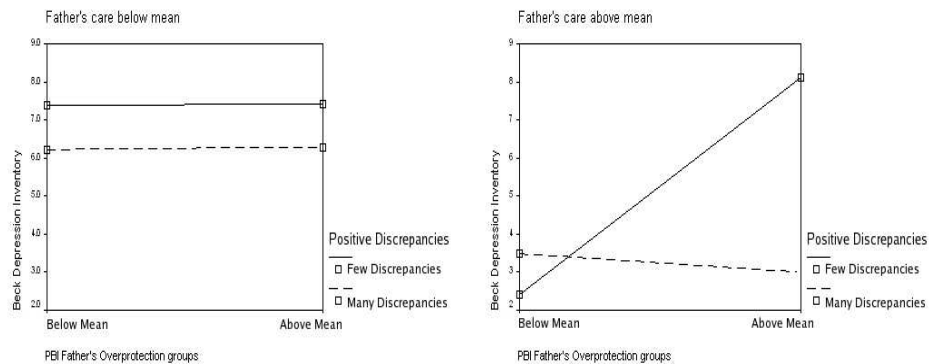
- Although high Overprotection was associated with depression overall, this relationship was **not** true for participants reporting many discrepancies between their beliefs and their behaviors
 - This finding is counter-intuitive from a discrepancy theory perspective. Discrepancies between what one thinks they **should** do and what they actually do have been linked with **greater** distress in past research.
 - Possible explanation: Discrepancies serve different functions in different settings. When interacting with an Overprotective parent, discrepancies may allow the child to conform to parental expectations while forming their own ideas of what actions are best to take.
 - This effect needs replication. It would be useful to examine the relationship between discrepancies and flexibility/rigidity.

Results – Question 3:

Is there an interaction between parental bonds and cultural values in predicting depression and psychological distress?

Figure 4.6

Interaction: Father Care X OP X Pos Discr.



- When father's Care is high, the previously described interaction is seen. When father's Care is Low, all participants were equally likely to be depressed
 - Father's Care may have a particularly strong relationship with depression. Two studies show Father's Care as the single best predictor of depression:
 - Martin and Waite, 1994, examined PBI variables and suicidality in adolescents.
 - Howard, 1981, examined PBI variables and depression in male juvenile delinquents.
 - All other studies indicating stronger predictors of depression list Care for both parents.

Limitations

- Sample was drawn from a potentially unique population. Results may not be generalizable to Chinese Americans as a whole.
- Results should not be seen as reflective of parental bonds in general without replication in more diverse samples.
- All measures used were self-report. Response biases may have influenced the results. Results should be interpreted with reasonable caution.
 - This is particularly relevant for the PBI. Results do not reflect actual parent-child relationships, but participants **perceptions** of these relationships.
- These limitations do not negate the results of this study and are typical of psychological research. They simply dictate caution in application of results.

Clinical Implications

- Clinicians should be sensitive to individual differences in cultural values. These differences are relevant for experiences of parental relationships and for development of psychopathology
- Discrepancies between thoughts and actions do not always lead to psychopathology. They can play a protective role for client who felt controlled or overprotected in their childhood. These discrepancies should not always be confronted
- Parent-child relationships may be particularly important for the formation of depression. Therapists working with depressed clients should at a minimum assess whether this is relevant for their individual clients.
 - Themes relating to Care and Overprotection, such as beliefs about one's worthiness for love, or one's ability to succeed when acting independently, may be particularly important to address for depressed patients.

Implications for Future Research

- This study underscores the importance of considering context when looking at parental bonds. This is vital for several reasons:
 - We know that culture influences the behavior choices made by parents.
 - This study showed that culture is related to how people describe parent-child relationships.
 - This study showed that cultural variables moderate the connection between parental bonds and depression.
 - Some findings imply that independence/interdependence may be important in diverse samples.
- Culture and parenting are highly related constructs that influence each other. Understanding these connections is vital to understanding how parent-child relationships influence outcomes for children and adults.