The Role of General Family Functioning in the Quality of the Mother-Daughter Relationship of Female African American Juvenile Offenders

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Little investigative knowledge exists with regard to the roles that adolescent-parent relationships play in the development of female juvenile delinquency among African Americans. In the current investigation, the McMaster Family Assessment Device (FAD) and the Assessment of Interpersonal Relations were employed to examine 76 female African American juvenile offenders' perceptions of their existing family functioning characteristics and the quality of their relationships with their mothers. Results indicated that all of the family functioning constructs measured by the FAD, except communication, were positively related to the quality of the mother-daughter relationship as perceived by the daughter. However, when the perceived quality of the relationship was simultaneously regressed on each of the constructs measured by the FAD, only the simple effect of general family functioning appeared to contribute significantly to the quality of the relationship. Findings are discussed in light of the need to further explore delinquency in female African American adolescents and implications for interventions and prevention practices.

Keywords: family functioning; mother-daughter relationship; female African American juvenile offenders

It has long been known that the quality of childhood and adolescent interpersonal relationships reliably predict aggressive behavior, peer rejection, psychological adjustment, and insecurity (Dodge, Coie, & Brakke, 1982; Hartup, 1979; Musick, 1995; Parker & Asher, 1987). Much less is known...
about the role of interpersonal relationships in the lives of female African American adolescents as it relates to delinquent behavior.

According to the current body of African American family literature, the quality of the relationship between an African American female adolescent and her mother (or mother figure) is, perhaps, the most influential interpersonal relationship to her psychological development and adjustment (Cauce et al., 1996; Perry, 1999). Mothers and other female caretakers such as grandmothers, friends, and neighbors play extremely important roles in the development of many African American adolescents, especially those of single-parent homes (Adams, 2001; McAdoo, 1980; Perry, 1999). A study by Cauce et al. (1996) indicated that daughters of African American mothers rate their mothers as the primary providers of emotional support—above and beyond their best friends, grandparents, romantic friends, fathers, siblings, and teachers. The current literature also suggests that the majority of female African American juvenile offenders are being raised in single-parent households by their mothers or grandmothers. The role flexibility and expanded definitions of parenting in many African American families is extraordinary and a mark of cohesive strength that is consistent with the historical values of African Americans (Billingsley, 1968; Billingsley & Morrison-Rodriguez, 1998; Mosley-Howard & Evans, 2000). Although the structure of the African American family seems to account for some of the variance in economic well-being, the negative influence of an unstructured family on social and psychological well-being may be attenuated by family support networks (Williams, Auslander, Houston, Krebill, & Haire-Joshu, 2000).

For many of these girls, there is little doubt that the mother figure is the dominant adult in their lives. Not only is it important for females to form and maintain a close relationship with at least one adult, healthy adjustment and the development of protective mechanisms against stressors may depend largely on mother-daughter cohesion (emotional and interpersonal closeness) (Debold, Brown, Weseen, & Brookins, 1999; Wentzel & Feldman, 1996). Mothers serve as significant role models for their daughters by influencing their self-esteem, gender role, psychological closeness, and familial relationships (Tesser & Campbell, 1982).

However, lack of a positive and supportive relationship can lead to undesirable outcomes for both mothers and daughters. In a qualitative analysis of

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urban African American girls, Harris (1999) found family stability, among other variables, to be an essential component of their development. Harris also found interpersonal conflict between family members to be a primary contributor toward delinquent behavior in African American girls. Although empirical research on female juvenile delinquency is gaining attention, little investigative knowledge exists in regard to the roles that adolescent-parent relationships play in the development of female juvenile delinquency.

The current investigation was designed to identify the relationship between existing family functioning characteristics and the quality of the relationship between African American female juvenile offenders and their mothers (or mother figures). We were interested in the relationship between the quality of the mother-daughter relationship, as perceived by the daughter, and general characteristics of family functioning in a sample of 76 African American female juvenile offenders.

Researchers (Alexander & Parsons, 1973; Angenent & de Man, 1996; Canter, 1982; Gove & Crutchfield, 1982; Hirschi, 1969; Hoge, 2001; Rosen, 1985) have provided convincing evidence that the relationship between the parent and adolescent contributes to the development of delinquent behavior. Others, such as Adams (2001) and Cauce et al. (1996), have recognized the importance of the mother-daughter relationship as a major source of strength in the development of African American female adolescents. However, little is known about the specific antecedents of delinquent behavior that are associated with the mother-daughter relationship. Thus, examining the degree of unique variance in the interpersonal relationship between African American female juvenile offenders and their mothers, which can be accounted for by basic family functioning variables, may provide a deeper understanding of the mechanisms by which the African American mother-daughter relationship can contribute to the development of delinquent behavior.

It is suggested by the current crime and delinquency literature that female delinquency is sometimes qualitatively different from delinquency in males in that female delinquency tends to be more instrumental in nature and male delinquency tends to be more expressive (Angenent & de Man, 1996). Linking the evidence that provides support for such gender differences with the literature on the social identity of female adolescents (Gilligan, 1983; Gilligan, Lyons, & Hanmer, 1990; Regoli & Hewitt, 1997) suggests that female delinquency may somehow be more relationship oriented than delinquency exhibited by males. With respect to the notion that the social and interpersonal development of female adolescents are often intertwined with relationships, making connections, and an emphasis on care, it is not surprising to find that at least 20% of all arrests of girls in 1994 were due to running away from home (Federal Bureau of Investigation, 1995), which is often
perceived as a response to unmet emotional needs from home life (Miller, 1986). Thus, the relational aspects of delinquent behavior may be especially important to understanding delinquency among African American females through their relationships with their mothers. Understanding the relationships between family functioning and the mother-daughter relationship may help identify principal family characteristics that affect the relationship and provide clues as to what may be helpful in designing reactive and proactive programs for juvenile offenders and at-risk female African American youth, respectively.

**FAMILY FUNCTIONING AND JUVENILE DELINQUENCY**

In Hawkins et al.’s (1998) extensive review of predictors of youth violence, seven prospective studies were cited that provided evidence that family management practices (poor or proactive) are directly related to the development of violent behavior. Specifically, the weighted mean correlation between poor family management and violence was .12. Between the ages of 14 and 16, poor family management practices were comparable to the predictability of other factors such as individual psychological characteristics, school environment, peer relationships, community environment, and other family factors. Poor family management practices may involve, but are not limited to, inadequate parental monitoring, inconsistent discipline patterns, and vague expectations of juvenile behavior. How the family operates and the practices that appear to dictate its organization have direct relationships with delinquent behavior.

Researchers, such as Farrington (1989) and Williams (1994), found support for the hypothesis that violent juvenile behaviors can be partially attributed to inadequate parent-adolescent communication, discipline, and inadequate engagement in cooperative leisure activity. However, studies conducted by Williams (1994) and Elliott (1994) did not suggest that parents and their children must develop a deep bond to inhibit subsequent delinquent behavior attributable to family factors. Of course, the adequacy of the parent-adolescent bond will be determined by the perceived quality of the interaction and the psychological characteristics of both the parent and the adolescent. The major implication of such research is that parents do not have to smother their children to prevent delinquent behaviors, but they do need to set clear family management practices (e.g., clear boundaries, expectations, and consistent discipline practices). Of the seven studies cited by Hawkins et al. (1998), only two reported on the relationships between family management practices and youth violence among females (Manguin et al., 1995;
Williams, 1994), and only one (Williams, 1994) examined these relationships among African American females.

We designed the current investigation to examine the family functioning characteristics that may contribute to the quality of the mother-daughter relationship of African American female juvenile offenders. We hypothesized that family functioning characteristics (especially the most basic such as communication, clear roles, and general family functioning) would significantly predict the quality of the mother-daughter relationship. Examining the quality of the mother-daughter relationship in this way enables us to determine which of the family functioning variables play the most important roles in maladaptive mother-daughter relationships among African American female juvenile offenders as well as uncover clues as to how the role of family functioning in the development of serious and violent juvenile behavior may be attenuated in subsequent interventions.

Schiller (2001) and Cauce et al. (1996) noted that there are few empirical studies and a dearth of information on female juvenile offenders let alone information specific to female African American juvenile offenders and their relationships with their mothers. Thus, the current investigation may be considered only a preliminary step toward the necessary understanding of delinquency in females. Certainly, sufficient evidence and speculation about the differences between the nature and causes of male and female delinquency have emerged to require understanding of female delinquency in its own context. The current study was also designed with respect to the recommendation of Cauce and Gonzales (1993) to study a sample of African Americans in their own right and not in relation to other cultural groups.

METHOD

PARTICIPANTS

A total of 76 African American female juvenile offenders aged 13 to 17 ($M = 14.74$, $SD = 1.36$) participated in the study. Participants were adjudicated for crimes against other people, property crimes, and/or drug/alcohol offenses. Examples of person offenses include, but are not limited to, sexual assault, murder, attempted murder, aggravated assault, and battery. Examples of property offenses include, but are not limited to, theft by taking, arson, breaking and entering, and vandalism. Examples of drug/alcohol offenses include, but are not limited to, possession, consumption, and/or distribution of controlled substances and/or alcohol. Unfortunately, no other information
about the participants is known. Because each participant received counseling and guidance services through a juvenile counseling and assessment program, some demographic information was gained informally. It is estimated that the majority of participants were being raised in lower to middle socioeconomic status, urban, single-parent households. Most participants were being raised by their mothers, grandmothers, or aunts.

INSTRUMENTS

McMaster Family Assessment Device. The McMaster Family Assessment Device (FAD) (Epstein, Baldwin, & Bishop, 1983) is a 60-item, self-report instrument designed to measure seven dimensions of family functioning: Problem Solving (the family’s ability to resolve problems; e.g., “We try to think of different ways to solve problems”); Communication (the degree of content clarity and appropriate directness; e.g., “People come right out and say things instead of hinting at them”); Roles (adequacy of established patterns of behavior for approaching a wide range of family functions and clarity of task assignment; e.g., “We make sure members meet their family responsibilities”); Affective Responsiveness (the ability of family members to express appropriate affect in a wide range of situations; e.g., “We express tenderness”); Affective Involvement (degree of collective family interest in each other’s lives; e.g., “We get involved with each other only when something interests us”); Behavior Control (the functionality of the family’s way of expressing and maintaining standards of behavior; e.g., “We have rules about hitting people”); and General Functioning (degree of overall family health/pathology and functionality; e.g., “We feel accepted for what we are” and “We confide in each other”). It is important to note that the items of the General Functioning subscale are separate from the items of the other six subscales. There is no overlap in items across any of the subscales of the FAD. Participants are asked to indicate how well statements describe their family using a 4-point Likert-type scale. The original Likert scale for the FAD was listed in the following order: strongly agree, agree, disagree, and strongly disagree. A subscale score on the FAD is computed by first reverse-scoring any negatively directed items, summing the item scores, and then dividing the sum by the total number of items in that subscale. Thus, subscale scores each have a minimum score of 1 and a maximum score of 4 where lower values reflect healthy functioning and higher scores reflect unhealthy functioning in the dimension under consideration. In the current investigation, we reverse-scored all items a second time before calculating participant scores so as to not create confusion about the direction of relationships as
indicated by Pearson product-moment correlations. Thus, higher subscale scores indicated healthier functioning.

The reliability of the FAD has been adequately documented. In a study of 503 family members, FAD Cronbach’s alphas ranged from .72 to .92 ($M = .78$) for the seven subscales (Epstein et al., 1983), and an average subscale test-retest estimate of .71 was found in a validation study conducted by Miller, Epstein, Bishop, and Keitner (1985). In a psychometric study conducted by Kabacoff, Miller, Bishop, Epstein, and Keitner (1990), Cronbach’s alphas ranged from .57 to .83 ($M = .72$) for the seven subscales in a sample of 627 nonclinical family members, .69 to .84 ($M = .75$) in a sample of 1,138 psychiatric family members, and .69 to .86 ($M = .75$) in a sample of 298 family members receiving outpatient medical services. For the current study, Cronbach’s alphas ranged from .65 to .85 ($M = .73$). The validity of the FAD has also been demonstrated by its ability to differentiate between clinical and nonclinical families at a rate greater than that expected by chance (Epstein et al., 1983). Both concurrent and discriminant validity of FAD subscales has also been demonstrated through moderate to strong correlations with measures of family closeness, coping, adaptability, and cohesion and between-group differences, respectively (Miller et al., 1985). Kabacoff et al. (1990) also provided support for the imposed factor structure on the FAD through factor analytic procedures.

The FAD was employed because of its good reliability and validity as well as its measurement of multiple dimensions of family functioning. However, because of the lack of empirical research on female African American adolescents, it is unclear how valid and reliable the FAD is for the current sample.

Assessment of Interpersonal Relations (AIR). The AIR (Bracken, 1993) is a standardized 105-item self-report questionnaire that was designed to assess the quality of relationships that children and adolescents have with their mothers, fathers, male peers, female peers, and teachers. In the current investigation, we employed only the Mother subscale (AIR-M). The AIR-M contains 35 questions that assess the quality of the relationship between the adolescent and the adult in her or his life that assumes the mother caretaking and guardianship role. Items were designed to reflect 15 characteristics of the relationship (companionship, emotional support, guidance, emotional comfort, reliance, trust, understanding, conflict, identification, respect, empathy, intimacy, affect, acceptance, and shared values). Participants are asked to rate statements according to how well they apply to their mothers on a 4-point Likert-type scale ranging from strongly disagree to strongly agree. Raw scores are converted to standard scores ($M = 100$, $SD = 15$). The AIR was standardized on a sample of 2,501 children enrolled in Grades 5 through 12.
An initial pilot test yielded an internal consistency of .95 for the AIR-M subscale (Bracken, 1993). For the current study, Cronbach’s alpha reached .90. Bracken also reported that the AIR subscales adequately discriminated between a sample of 88 psychiatric and 92 nonpsychiatric adolescents. Factor analyses revealed seven meaningful factors in which five of the factors correspond with the five AIR subscales.

The AIR-M was employed because of its good reliability and validity, however, because of the lack of empirical research on female African American adolescents, it is unclear how valid and reliable the AIR-M is for the current sample.

PROCEDURE

Each participant was referred for psychological evaluation directly from a juvenile court and was assessed within a week of being adjudicated. Standard clinical administration of the FAD, AIR-M, a measure of intellectual functioning, and a structured, clinical interview were all completed as part of a psychological evaluation. The interview and assessment instruments were administered by graduate-level counselors in training.

RESULTS

Means and standard deviations for all study variables as well as the intercorrelations between the variables were computed. These descriptive results are displayed in Table 1.

Next, a simultaneous multiple regression analysis was computed using each of the seven subscale scores of the FAD as predictors and AIR-M score as the criterion. These results suggest that the seven family functioning variables significantly accounted for close to 40% of the variance in AIR-M scores: $R^2 = .39$, $F(7, 75) = 6.10, p < .001$. Slopes, standard errors, and standardized partial regression coefficients (beta weights) are displayed for each predictor in Table 2. Examination of the statistics in Table 2 suggest that general functioning is the strongest predictor of AIR-M scores, even when statistically controlling for each of the other six family functioning variables measured by the FAD. When partialling out the effect of the other variables on AIR-M scores, the partial correlation coefficient for general functioning was .32. The correlations between the predictors created some concern for multicollinearity. Thus, before interpreting regression results, we examined multicollinearity diagnostics such as tolerance and the variance inflation
factor (VIF). None of the VIFs associated with the predictors and their respective partial regression coefficients were above 4.75 and the average VIF was 2.71. Thus, regression results were interpreted with minimal concern for multicollinearity between the predictors.

Two additional hierarchical multiple regression models were computed to further evaluate general family functioning in terms of its associated change statistics. It is important to note that the employment of hierarchical regression procedures are not entirely appropriate in this case given Cohen and Cohen’s (1983) recommended criteria for using hierarchical regression (e.g., causal priority). However, we wished to evaluate general family functioning in terms of its ability to predict daughters’ perceptions of the quality of their relationships with their mothers above and beyond that of the other family functioning variables measured by the FAD. In the first model, only general functioning was entered into Step 1 followed by a block of the other six family functioning variables measured by the FAD in Step 2. Results showed that general functioning significantly predicted AIR-M scores: $R^2 = .35$, $F(1, 75) = 39.04$, $p < .001$. However, results also showed that the block of the other six family functioning variables measured by the FAD only increased $R^2$ by .04; this increase was not statistically significant at the .05 level of significance, $\Delta F(6, 68) = 0.64$. In the second model, the order of predictor entry was reversed; in Step 1 the other six family functioning variables measured by the FAD were entered followed by general functioning in Step 2. In this second model, the block significantly predicted AIR-M scores: $R^2 = .31$, $F(6, 75) = 5.25$, $p < .001$. However, unlike the first model, Step 2 (general functioning)

### Table 1

<table>
<thead>
<tr>
<th>Measure</th>
<th>2</th>
<th>3</th>
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<th>5</th>
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<th>7</th>
<th>8</th>
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<td>.53**</td>
<td>.52**</td>
<td>.44**</td>
<td>.03</td>
<td>.28*</td>
<td>.67**</td>
<td>.49**</td>
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<td>2. Communication</td>
<td>—</td>
<td>.51**</td>
<td>.49**</td>
<td>.33**</td>
<td>.50**</td>
<td>.63**</td>
<td>.35**</td>
<td>2.83</td>
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<td>3. Roles</td>
<td>—</td>
<td>.45**</td>
<td>.45**</td>
<td>.67**</td>
<td>.76**</td>
<td>.45**</td>
<td>—</td>
<td>2.82</td>
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<td>4. Affective responsiveness</td>
<td>—</td>
<td>.47**</td>
<td>.37**</td>
<td>.62**</td>
<td>.40**</td>
<td>—</td>
<td>—</td>
<td>2.79</td>
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<td>5. Affective involvement</td>
<td>—</td>
<td>.49**</td>
<td>.46**</td>
<td>.13</td>
<td>—</td>
<td>—</td>
<td>—</td>
<td>2.67</td>
<td>0.51</td>
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<tr>
<td>6. Behavior control</td>
<td>—</td>
<td>.58**</td>
<td>.28*</td>
<td>—</td>
<td>—</td>
<td>—</td>
<td>—</td>
<td>3.09</td>
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<td>7. General functioning</td>
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<td>—</td>
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<td>—</td>
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<td>—</td>
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<td>8. AIR-M</td>
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<td>—</td>
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<td>—</td>
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NOTE: FAD = McMaster Family Assessment Device; AIR-M = Assessment of Interpersonal Relations—Mother.

*p < .05. **p < .01.
did add significantly to the prediction of AIR-M scores by increasing $R^2$ by .07; $\Delta F(1, 68) = 7.80, p < .01$. These regression results suggest that general family functioning plays an important role in the relationship between female African American juvenile offenders and their mothers above and beyond that of family problem solving, communication, roles, affective responsiveness, affective involvement, and behavior control. These results were also indicative of potential mediating relationships between AIR-M scores and other family functioning variables (Baron & Kenny, 1986). Using Baron and Kenny’s (1986) criteria for statistical mediation, it was found that general functioning significantly mediated the relationships between problem solving and the condition of the mother-daughter relationship and between family roles and the condition of the relationship. Thus, it appears that general functioning serves as the mechanism by which clear family roles and problem solving skills affect the conditions of mother-daughter relationships.

Finally, to reveal the essential difference in perceived mother-daughter relational quality between female African American juvenile delinquents who had high scores and those who had low scores on the FAD General Functioning subscale, the sample was divided into two groups on the basis of their General Functioning subscale scores (scores below 2.50 = low general functioning; scores at or above 2.50 = high general functioning). On average, participants with low general functioning ($n = 32$) scored almost an entire standard deviation below the average on the AIR-M ($M = 86.44, SD = 10.36$), whereas the average AIR-M score of participants with high general functioning ($n = 44$) slightly exceeded the standardized mean ($M = 101.74, SD = 12.67$). This difference was statistically significant, $t(74) = 4.34, p < .001.$

<table>
<thead>
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</tr>
<tr>
<td>General functioning</td>
<td>12.57</td>
<td>5.19</td>
<td>.53*</td>
</tr>
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</table>

NOTE: $R^2 = .39, F(7, 75) = 6.10, p < .001$. FAD = McMaster Family Assessment Device; AIR-M = Assessment of Interpersonal Relations—Mother. *$p < .01$. 

TABLE 2
Simultaneous Regression Analysis Summary for FAD Subscale Scores Predicting AIR-M Subscale Score
DISCUSSION

Families that report high levels of general family functioning are generally healthy, lack psychological problems, develop cohesion, adapt appropriately to pressures and conflicts, and set clear family rules and boundaries. General functioning, as measured by the FAD, is not simply an amalgamation of the other six family functioning characteristics measured by the FAD (Epstein et al., 1983). In fact, results from female African American juvenile offenders suggested that families may be able to problem solve, establish clear behavioral roles, respond to each other with appropriate affect, and maintain their established standards; however, if they cannot turn to each other for support in times of crisis, cannot talk to each other about the sadness they feel, do not feel accepted for who they are, do not feel comfortable expressing their feelings toward each other, are unable to overcome common difficulties in making decisions to solve problems, or cannot confide in each other and get along, then they are likely to perceive their relationship with their mother (or mother figure) as problematic. Such notions are supported by the fact that the quality of the mother-daughter relationship, as perceived by the daughter and measured by the AIR-M, was independently and significantly correlated with each FAD subscale (except Affective Involvement), but when each FAD subscale was considered simultaneously, only general family functioning emerged as an important contributor to the prediction of AIR-M scores. Further, the results seem consistent with the findings of the Cauce et al. (1996) study of female African American adolescents’ most endorsed items on the Inventory of Parent and Peer Attachment (IPPA) (Armsden & Greenberg, 1987). The items of the IPPA most highly endorsed dealt with relationship characteristics relating to general family functioning such as experiencing acceptance, trust, and respect from their mothers.

It was surprising to find that the Affective Involvement subscale of the FAD was not significantly correlated with the quality of the mother-daughter relationship. Certainly, one explanation for such a finding may involve the possibility that the FAD is not culturally sensitive enough to accurately measure family characteristics such as affective involvement. Earlier psychometric studies of the FAD provided insufficient evidence to substantiate this speculation. However, it is evident that the items of the Affective Involvement subscale measure affective involvement that is conditional on the personal interests of other family members. Thus, this type of affective involvement is not entirely genuine. It is possible that such affective involvement may reflect a strained mother-daughter relationship or any interpersonal relationship within the family. If so, the lack of a significant correlation between
Affective Involvement and the AIR-M makes much more sense. Further investigation of this finding is warranted.

If the quality of the mother-daughter relationship does contribute to delinquent behavior in female African Americans, then prevention and treatment programs may have a stronger impact if they are based on careful assessment of the quality of the mother-daughter relationship along with other risks and needs evidenced by adolescents’ behavior. Williams (1994) found that proactive family management practices at age 14 decreased the likelihood of self-reported violence at age 16 for males and females of both African American and European American families. Based on a critical review of the current literature, Hoge (2001) organized a list of major responsive and protective factors of juvenile delinquency. Positive parent-adolescent relationships were listed as a protective mechanism. Further, both general family functioning and characteristics of the parent-adolescent relationships (e.g., degree of attachment and nurturance) are important components to the family ecological domain of contemporary juvenile delinquency counseling and assessment models (Calhoun, Glaser, & Bartolomucci, 2001). However, as Hoge noted, more empirical work is needed to identify relevant protective mechanisms.

A correlational study inherits its own set of limitations. Although we have conceptualized poor general family functioning as a contributor to poor quality of the mother-daughter relationship, the reverse may also be true. In the current study, there was no way to know which variable preceded the other in time. As always, correlation does not infer causality. Only family functioning characteristics and their relation to the quality of the mother-daughter relationship were examined. Thus, it is uncertain how other factors such as socioeconomic status, education, and degree of external family support mediate or moderate the effect of general family functioning on the quality of the mother-daughter relationship. Another limitation of the current study involves the sample size. Although adequate to detect a large effect size, the study sample is limited in its ability to generalize to the greater population of female African American juvenile offenders. Subsequent studies will certainly contribute greatly to the understanding of this area of research through the study of larger samples. Future studies may also improve on the current design by employing a more prospective approach that could determine whether the current results are due to situational confounds (e.g., the negative impact that adjudication may have on self-reports of the condition of interpersonal relationships).
CONCLUSION

The current study reveals important information about the variables associated with the conditions of mother-daughter relationships among female African American juvenile offenders. Such variables may protect female African American adolescents from engaging in delinquent behaviors and in promoting healthy adjustment to adolescence. To fully gauge the importance of the preliminary findings here, subsequent investigations may contribute greatly to the current understanding of female African American delinquency by comparing it with delinquency in other groups across gender as well as their relationships with both mothers and fathers. In regard to the mother-daughter relationship and delinquency, there may also be a need to control for family structure (e.g., single-parent or traditional, number of siblings), because the presence or absence of a father figure or siblings is likely to affect this relationship.

With respect to the findings here, it is not surprising to find that two of the most empirically supported behavioral treatments of delinquency—parent management training and functional family therapy—are closely tied to the nature of the parent-adolescent relationship and their mode of interaction (Hoge, 2001). The application of these two theoretical approaches to the treatment of delinquency in African American females may be especially influential if the direct parent-adolescent interpersonal relationship interventions include working with them to improve the general functioning of their family.

REFERENCES


