WELL-BEING AND THE FAMILY SYSTEM

A Structural Equation Model of Individual, Relational and Contextual Influences

Jonathan Pratschke
Trutz Haase
Kieran McKeown

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The central question guiding our research is:

**What influences the well-being of children and their families?**

Drawing on Ryff and Keyes (1995), we define well-being as a multi-dimensional construct situated between the individual and the social whole, comprising:

- Emotional well-being (absence of depression, internalising behaviours)
- Subjective well-being (e.g. life satisfaction)
- Relational well-being (including family and intimate relationships)
- Positive self-concept (self-esteem, self-efficacy)
- Positive work and/or study role
- Absence of symptoms or externalising behaviours
OUR APPROACH

☐ We situate the well-being of children within the context of the “family system”.

☐ We develop an integrated theoretical model of well-being and the family system, based on previous research.

☐ We seek robust latent multi-item measures of key concepts in this model.

☐ We distinguish between
  - the measurement model (items and scales used to measure key concepts),
  - the structural model (relationships between the key concepts), and
  - the risk and protective factors that constitute the context of child development.

☐ We use Structural Equation Modelling techniques to estimate parameters in our model – these models are well-adapted to studying the family system.
Our analysis is based on the GUI 9 year-old cohort data, which has a number of strengths…

- Large sample, panel design, multiple measures, independent assessments, clustered sampling design, “ecological” approach

…but also some weaknesses:

- It does not provide detailed information on relationships (reciprocity, support, intimacy, conflict) within the neighbourhood, family or friendship group.

- It lacks a range of important measures, such as conflict between intimate partners, subjective well-being, physical symptoms, positive/negative affect, adult self-concept.

Therefore, not all of the concepts of well-being believed to be of importance can be implemented within the current analysis.
AN ECOLOGICAL MODEL OF CHILD WELL-BEING

Measurement Model for PCG Well-being

Measurement Model for SCG Well-being

PCG Well-being

SCG Well-being

Child Well-being

Risk and Protective Factors

Measurement Model for Child Well-being
BROAD OUTLINE OF A SECOND ORDER LATENT VARIABLE MODEL

- Parenting
- Depression
- Dyadic Relationship
- Parenting
- Depression
- Dyadic Relationship
- SCG Well-being
- PCG Well-being
- Child Well-being
- Child Difficulties
- Self-Concept
- Scholastic Achievement

Risk and Protective Factors

Dyadic Relationship

Parenting

Depression

Risk and Protective Factors
MEASURING CHILD WELL-BEING

Child
Well-being

Child
Difficulties

Self-
Concept

Scholastic
Achievement

Emotional - PCG

Conduct - PCG

Hyperactivity - PCG

Peer Relations - PCG

Happiness - PCG

Appearance - PCG

Popularity - PCG

Intellectual - PCG

Reading - PCG

Maths - PCG

Teacher Evaluation

Strengths & Difficulties Questionnaire

Piers – Harris II

Drumcondra
MEASURING PARENTAL WELL-BEING

PIANTA - Child Parent Relationship Scale

- Positive Aspect – P1
- Positive Aspect – P2
- Positive Aspect – P3

Dyadic Adjustment Scale

- Consensus
- Cohesion
- Satisfaction

Parenting

Depression

PCG Well-being

Dyadic Relationship
RISK AND PROTECTIVE FACTORS

- Financial Difficulties
- Non-Irish Ethnicity
- Low Social Class
- Equivalised Household Income Decile
- ESRI Basic Deprivation
- Low Education (PCG)
- Health Status (PCG)
- Age (PCG)

Factors:
- Local Problem Scale
- Local Services Scale
- Haase-Pratschke Deprivation Score
- Health Status (Child)
- Life Events (Child)
- Gender (Child)

Central Concepts:
- SCG Well-being
- PCG Well-being
- Child Well-being
A STRUCTURAL EQUATION MODEL OF CHILD AND FAMILY WELL-BEING

Note 1: covariances between disturbance terms for Child Well-being and Parenting (PCG and SCG) not included in figure.

Note 2: all covariances between independent variables omitted from figure.
## INFLUENCE OF RISK AND PROTECTIVE FACTORS ON FAMILY WELL-BEING

### Standardised coefficients

<table>
<thead>
<tr>
<th>Explanatory variable</th>
<th>Child well-being</th>
<th>Primary Caregiver well-being</th>
<th>Secondary Caregiver well-being</th>
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<td><strong>Child variables</strong></td>
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<td>Life Events of Child</td>
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<td>Health of PCG</td>
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<td>Age of PCG</td>
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SIGNIFICANT INFLUENCES ON WELL-BEING

Goodness of Fit:
- N: 4,881
- CFI: .951
- RMSEA: .023

All effects significant at p < .05
1. The analysis confirms the importance of the mother’s well-being as a mediating factor on the child. A one unit improvement in the mother’s well-being is associated with a 0.4 unit direct improvement in child well-being.

2. In stark contrast, the direct effect of the father’s well-being on the child (.04) is almost negligible once we control for other factors.

3. A striking result is the strongly mediated effect of many contextual influences, in harmony with the ecological model of child well-being.

4. With the exception of the mother’s health and the Haase-Pratschke Deprivation Index, which have a significant direct effect on child well-being, all other socio-economic factors, including financial variables and local area problems, have a distal effect on child well-being that is mediated by the mother’s well-being.
1. The conceptualisation of well-being as a higher-order latent concept reveals itself to be a powerful and well-supported hypothesis.

2. The assumption that the well-being of children cannot be understood without simultaneously analysing the well-being of their parents is reinforced.

3. All of the key influences identified in this analysis are in line with our previous research on child and family well-being using independent data – including the finding that a unit change in maternal well-being is associated with almost half a unit change in child well-being.

4. Parents act as a buffer between economic risk factors and child well-being.

5. Socio-economic risks do influence parental well-being, and thus have a mediated effect on children.

6. The model presented here reflects the situation of two-parent families only. As we elected to study the dyadic relationships between caregivers and between caregivers and children, single parents were excluded. The next step would therefore be to focus on the primary caregiver and child, thus including single parent families.
WELL-BEING AND THE FAMILY SYSTEM

CONTACTS:

Jonathan Pratschke  
jpratschke@unisa.it
Trutz Haase  
mail@trutzhaase.eu
Kieran McKeown  
kmckeown@iol.ie

For further information on our research:  
www.trutzhaase.eu