

Stepfather Involvement and Adolescent Well-Being

Do Mothers and Nonresidential Fathers Matter?

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Using the National Longitudinal Study of Adolescent Health, the authors explore how aspects of stepfather involvement are related to adolescent well-being and whether these relationships depend on maternal involvement, non-residential father involvement, or amount of time in the household. Results indicate that a close, nonconflictual stepfather–stepchild relationship improves adolescent well-being, but it is most beneficial when the adolescent also has a close, nonconflictual mother–child relationship. Engaging in shared activities with the stepfather decreases depression when the stepfather has been in the household for a longer period of time. The relationships between stepfather involvement and adolescent well-being are separate from nonresidential father involvement.

Keywords: *adolescents; mental health; parental involvement; stepfamily; stepfather*

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One third of children will spend some time in a stepfamily before age 18 (Seltzer, 1994). The majority of these children live in stepfather families. Given the large number of children living in stepfather families, it is important to understand stepfather–stepchild relationships and their effect on adolescent well-being. There are two contradictory perspectives on the stepfather’s effects on stepchildren. On one hand, research finds that children in stepfamilies have lower academic achievement, more school problems, worse physical health, more internalizing problems and depression, and more externalizing and behavior problems compared to children in two-biological-parent families; also, children in stepfamilies have a level of well-being similar to children in divorced and single-parent families (Cherlin & Furstenberg, 1994; Dawson, 1991; Furstenberg & Cherlin, 1991; Hanson, McLanahan, & Thomson, 1996; McLanahan & Sandefur, 1994). These results imply that stepparents have a detrimental effect on adolescent well-being because stepchildren have lower well-being than children in two-biological-parent families. These results could also imply that stepparents have no effect on adolescent well-being because stepchildren have similar well-being to children in single-parent households. On the other hand, contradictory evidence finds that involved and caring stepfathers make a positive contribution to stepchildren in stepfamily households (Hetherington, 1993; White & Gilbreth, 2001) and that stepfathers have similar effects on children’s well-being compared to biological fathers (Amato & Rivera, 1999).

We posit that this apparent contradiction occurs because of the focus on the negative effects of certain family structures, including stepfamilies and single-parent families, on adolescent well-being, which ignores the wide variations in well-being outcomes among adolescents caused by the differing quality of family relations and processes within these families (e.g., Kurdek, 1994). We explore this relationship by examining whether the quality of stepfather–stepchild relations, as indicated by adolescent reports of involvement with their stepfather, results in diverse outcomes among adolescents living in stepfather families. Our research considers how the context of other parent–child relationships—that is, mothers and nonresidential biological fathers—either mediate or moderate the relationship between stepfather involvement and adolescent well-being. We also consider the potential of the amount of time that the stepfather has resided in the household as well as demographic factors to moderate the relationship between stepfather involvement and adolescent well-being. We use a large, nationally representative sample to explore these issues and focus on two dimensions of well-being that have often emerged in the literature on child and adolescent well-being: namely, internalizing and externalizing behaviors (Achenbach, 1984; Rutter, 1970).

Background

Stepfathers and Adolescent Well-Being

There is much evidence that parental involvement and the general quality of the parent–child relationship are associated with adolescent well-being. Research shows that parents have positive influences on adolescent well-being. For instance, parent–child closeness is beneficial for adolescent well-being (Amato, 1994; Amato & Gilbreth, 1999; Amato & Rivera, 1999; Harris & Morgan, 1991). Involvement with the child and high relationship quality are also shown to be beneficial for adolescent well-being (Harris, Furstenberg, & Marmer, 1998; White & Gilbreth, 2001). Furthermore, both participating in parent–child activities (Amato & Rivera, 1999; Harris & Morgan, 1991) and participating in child-rearing decisions (Amato & Gilbreth, 1999; Seltzer, 1991) are shown to have positive associations with adolescent well-being. Stepfather involvement could improve adolescent well-being in much the same way that involvement with any parental figure is beneficial. Some research supports this contention by finding that stepfathers have similar effects to biological fathers and increase adolescent well-being (Amato & Rivera, 1999; Hetherington, 1993; White & Gilbreth, 2001).

Alternatively, two theories—the biosocial and incomplete institutionalization perspectives—complement the results from family structure studies that stepfathers have no effect or a detrimental effect on adolescent well-being (e.g., Cherlin & Furstenberg, 1994; McLanahan & Sandefur, 1994). The biosocial perspective (also known as the evolutionary psychological perspective) argues that the biological tie is of ultimate importance to adolescent well-being because relationships with a genetic tie are more salient and rewarding and also because biological parents are more involved with the child (Daly & Wilson, 1988, 1996, 1998; Popenoe, 1994). According to Popenoe (1994), the reason that stepparents find their roles to be problematic is “due much less to social stigma and the uncertainty of their obligations, as to the fact that they gain fewer intrinsic emotional rewards from carrying out those obligations” (p. 20). Thus, fathers should have greater involvement with children who are genetically their own and typically feel more intrinsic reward from such relationships even if they don’t live with the child. Research finds that stepparents act like “polite strangers” to their stepchildren by using disengaged parenting characterized by low levels of involvement and warmth and little monitoring of activities (Cherlin & Furstenberg, 1994; Hetherington & Jodl, 1994). Stepparents also have lower social and emotional involvement compared to residential biological parents (Furstenberg & Cherlin, 1991; Smith & Morgan,

1994; Thomson, McLanahan, & Curtin, 1992). Thus, research tends to support this perspective, although the exact reason for these differences is debatable.

The incomplete institutionalization perspective posits that the lack of clear norms regarding social roles makes the situation in stepfamilies more stressful and makes relationships more conflicted and difficult (Cherlin, 1978). Social institutions have not established norms regarding the roles played by stepparents and their children, ex-spouses and each other, nonresidential parents and their children, stepchildren and half-siblings, and nonresidential parents and stepparents. For instance, it is difficult to determine how stepchildren are to address their stepparents as well as to determine how much of a disciplinary role stepparents should have over their stepchildren. Marsiglio (1992) found that stepfathers have diverse perceptions of their stepfather roles. Furthermore, Mason, Harrison-Jay, Svare, and Wolfinger (2002) found that stepparents act as supportive participants rather than leaders in terms of discipline and advice to their stepchildren and realize that they legally lack full parental status.

Mothers and Nonresidential Fathers

The stepfather–stepchild relationship is unique because it occurs in the context of two other parent–child relationships. For instance, mothers may play a role in the stepfather–stepchild relationship and have been described as managers in such relationships. The mother as manager perspective posits that mothers often determine how much and what type of involvement both biological fathers and stepfathers have with their children (Backett, 1987; Marsiglio, 1992). This role as manager may be even more likely when the father is not biologically linked to the child. This perspective is supported by research findings that the quality of the marital relationship affects how involved the stepfather is with the child (Cherlin & Furstenberg, 1994). Furthermore, higher mother–child relationship quality has been shown to be related to higher stepfather–stepchild relationship quality (MacDonald & Demaris, 2002).

In addition to mothers, nonresidential biological fathers (henceforth, nonresidential fathers) could have a role in the stepfather–stepchild relationship. Nonresidential father involvement has been found to have positive effects on adolescent well-being in studies that use measures beyond simply contact (Amato & Gilbreth, 1999; Simons, 1996; White & Gilbreth, 2001), although some research finds that this involvement is only beneficial when they have an authoritative parenting style (Amato & Gilbreth, 1999; Hetherington, Bridges, & Insabella, 1998). In addition to having a direct effect on adolescent well-being, the quality of the nonresidential father–child relationship may affect how involved stepfathers are with their stepchildren. The substitution or serial

parenting perspective suggests that children in most cases will have only one involved father at a time. This perspective posits that fathers “swap” families when they form new ones; thus, they will substitute one family for another (e.g., Furstenberg, 1995; Manning & Smock, 2000). In the case of nonresidential fathers, they may increase their involvement with children in their “new” family and reduce involvement with children in their “old” family. Support for this model can be found in research data showing that contact with the nonresidential father declines when the mother remarries (Seltzer & Bianchi, 1988). Studies have also found that frequent contact with the nonresidential father decreases the quality of the stepfather–stepchild relationship (e.g., MacDonald & Demaris, 2002). However, even in instances of low contact, children may continue to feel close to their nonresidential father (Furstenberg & Cherlin, 1991), which may impair the quality of the stepfather–stepchild relationship. Although some studies find that involvement with nonresidential fathers may negatively affect children’s relationship with their stepfathers, other studies have found that relationships with stepfathers and nonresidential fathers have separate effects on adolescents (White & Gilbreth, 2001).

This Research

Several key questions are addressed in this study. First, is stepfather involvement related to adolescent well-being? A hypothesis based on the biosocial perspective would expect stepfathers to be less involved with their stepchildren and for their involvement to have little association with adolescent well-being because of the lack of a biological tie between them. The incomplete institutionalization perspective would lead us to hypothesize that stepfathers are less involved generally, but their relationship with their stepchildren is likely marked by high conflict because of the lack of established norms regarding social roles within stepfamilies. Such conflict is expected to be negatively associated with adolescent well-being. A final hypothesis is that the relationship between stepfather involvement and adolescent well-being could depend on the quality of the stepfather–stepchild relationship in the same manner that positive biological father involvement is beneficial for adolescent well-being, whereas negative involvement is detrimental.

The second question the study addresses is whether maternal involvement influences the relationship between stepfather involvement and adolescent well-being. Mothers may act as managers determining how much involvement a stepfather has with a stepchild. Although we don’t actually measure whether mothers encourage or discourage stepfather involvement, one hypothesis consistent with this perspective is that stepfather involvement will only be high when maternal involvement is high. That is, the

amount of involvement of residential mothers should explain the relationship between stepfather involvement and adolescent well-being. We also test whether maternal involvement moderates the relationship between stepfather involvement and adolescent well-being. We hypothesize that stepfather involvement will be most beneficial when maternal involvement is also high.

The third question is whether adolescent involvement with the nonresidential father influences the association between stepfather involvement and adolescent well-being. A hypothesis based on the biosocial perspective is that nonresidential-father involvement should have a stronger relationship with adolescent well-being compared to stepfather involvement because ties to the biological father should be more influential. A substitution or serial parenting hypothesis would expect a significant relationship between stepfather involvement and well-being only when involvement with the nonresidential father is low. Finally, a two-father hypothesis proposed by White and Gilbreth (2001) would suggest that both stepfather and nonresidential-father involvement would be important and would have separate relationships with adolescent well-being.

The fourth question is whether other factors, such as the length of time that stepfathers have been in the household, influence the relationship between stepfather involvement and well-being. A hypothesis based on the incomplete institutionalization perspective would expect length of time in the stepparent household to moderate the relationship between stepfather involvement and adolescent well-being, as social roles in stepfamilies may take time to establish because of a lack of established norms. Other important factors that may influence the association between stepfather involvement and well-being and that are explored in the study include gender, race/ethnicity, age, household income, the presence of other step- or half-siblings in the household, and marital quality of the stepfather–mother relationship.

Method

Data

Data for these analyses came from the 1995 National Longitudinal Study of Adolescent Health (Add Health). Add Health is a school-based study of adolescents in Grades 7 through 12 from 134 schools during the 1994-1995 school year. Add Health collected in-school questionnaires and also selected a nationally representative sample of students in the schools to participate in an in-home interview. These in-home data are used in our analysis.

The sample for our study consists of adolescents who were living in households with their biological mother and stepfather and who had a living, nonresidential biological father. Only adolescents in homes where the biological mother and stepfather are married are included in our sample because adolescents whose mothers had cohabiting partners did not answer questions regarding paternal involvement. Our sample size differs slightly by outcome, with 1,812 adolescents for depression and 1,804 adolescents for the problem-behavior analyses. This sample size is much larger than previous studies on stepfather involvement in which the sample sizes range from 118 to 195 (e.g., Fine & Kurdek, 1992; Hanson et al., 1996; MacDonald & DeMaris, 2002; Marsiglio, 1992; White & Gilbreth, 2001).

Measures

Dependent Variables

Depression. Eighteen of the basic core items from the Center for Epidemiologic Studies–Depression (CES-D) scale are used to measure depression (Radloff, 1977; Ross & Mirowsky, 1984). Adolescents are asked to indicate how often in a 1-week period they experienced depressive symptoms, such as being unable to shake off the blues and feeling depressed, lonely, or sad. Items are measured on a 4-point scale from 0 (*never or rarely*) to 3 (*most or all of the time*). Responses are averaged to produce an index. The scale has a Cronbach's alpha of .86. This measure is logged to correct for skewness.

Problem behavior. This is an index of adolescent problem behaviors during a 1-year period. The index is made up of six items, including painting graffiti or signs, deliberately damaging property of others, lying to parents about whereabouts, taking something from a store without paying, stealing an item worth less than \$50, and being loud, rowdy, or unruly in public. The four response categories range from 0 (*never*) to 3 (*5 or more times*). Responses are averaged to form the index. These items are chosen for the scale because they represent nonviolent acts, and results from the factor analysis we conducted (not shown) indicate that they represent a common factor. The index has a Cronbach's alpha of .75.

Independent Variables

Parental involvement. Three variables are used to measure level of parental involvement. These variables are included separately for stepfathers,

mothers, and nonresidential fathers and are self-reported by the adolescent. Activity with (step)parent is a measure of how many types of activities that the parent and child engaged in together during a 1-month period. The response categories are yes/no (1/0) for whether the adolescent ever engaged in the activity with the (step)parent in a 1-month period. The measure includes nine activities, such as shopping, playing sports, discussing a personal problem, and talking about school work. The index reflects the sum of these activities and is similar to the measure used by Resnick et al. (1997). Close to (step)parent is a single-item measure of how close a child feels to a (step)parent. Responses range from 1 (*not close at all*) to 5 (*extremely close*). Conflict with (step)parent is a dichotomous measure of whether or not the (step)parent and child had a serious argument about the child's behavior in a 1-month period. Having a serious argument is coded 1. Special consideration had to be given to these measures as they relate to nonresidential fathers. Adolescents who reported that they knew nothing about their nonresidential father or had not communicated with him in the year prior to the survey are coded as 0 on all nonresidential father variables. We also include a dummy variable indicating whether the adolescent had any contact with his or her nonresidential father. Years lived with stepfather is a measure of the number of years that adolescents have lived in the same household as their stepfather.

Control Variables

Control variables are included for adolescent, parent, and household sociodemographic characteristics. Age is measured in years. Sex is coded 1 for females and 0 for males. Race is measured as a three-category dummy variable comparing Blacks, Latinos, and Whites. The sample sizes of other race categories are too small for detailed analysis and so are not included. Mother's education and stepfather's education measure the levels of education completed by mother and stepfather, respectively. The measures are based on parental reports; however, adolescent reports are substituted in cases of missing data. Mother's employment is a dichotomous measure of whether or not mothers are employed outside the home. Adolescent response is substituted for missing values in cases of no parental response. Household income is a measure of the total 1994 household income coded in units of \$1,000. The number-of-siblings variable is a measure of the number of full, half-, and stepsiblings living in the same household as the adolescent respondent. A dichotomous variable, stepsibling or half-sibling, is also included to differentiate full siblings from other types of siblings. Respondents with stepsiblings or half-siblings in the household are coded 1.

Additional controls for supplemental analyses. The following three control variables are not included in the main analyses because of small sample size but are considered in additional analyses and as possible moderating factors. We will discuss these additional analyses in the text, although they are not shown in the tables. Quality of stepfather–mother relationship is based on parental rating of their relationship with their current spouses. Responses range from 1 (*completely unhappy*) to 10 (*completely happy*). Years lived away from nonresidential father measures the number of years adolescents have lived away from their nonresidential fathers, as indicated by the adolescent. In cases of joint custody, adolescents may indicate that they live in both households. Child support is indicated by parental response regarding the amount of child support payments received from the nonresidential father in a typical month. Responses range from 1 (*no support*) to 5 (*more than \$500*).

Analytic Strategy

We first determine the relationship between various types of stepfather involvement and adolescent depression and problem behavior with controls for background characteristics. Then we determine whether maternal or nonresidential-father involvement explains the relationship between stepfather involvement and adolescent depression and problem behavior. Finally, we explore whether maternal involvement, nonresidential father involvement, amount of time that the stepfather has been in the household, nonresidential father time out of the household, child support, marital quality of the stepfather–mother relationship, gender, race, age, and household income moderate the relationship between stepfather involvement and adolescent depression and problem behavior.

Because of Add Health's sampling design, sampled students are not selected independently. Therefore, analyses are performed in STATA using robust standard errors to account for the effects of the multistage, stratified, school-based, clustered sampling design, using the strategy specified by Chantala and Tabor (1999). All descriptive statistics and multivariate analyses use nationally representative weights to adjust for oversampling.

Because the nonresidential father variables only apply to adolescents who have had some contact with their nonresidential father, these variables are conditionally relevant. Thus, in our analyses, adolescents who have had some contact with their nonresidential father in the past year will be compared to adolescents who have had no contact while simultaneously representing the effects of activity with nonresidential father, closeness to nonresidential father, and conflict with nonresidential father—variables that are only relevant to

adolescents who have had some contact with their nonresidential father. Further details about conditionally relevant models can be found in Ross and Mirowsky (1992) and Cohen (1968). The conditionally relevant model for involvement with nonresidential father is illustrated in Equations 1 and 2 below.

$$D = b_0 + [b_1 + b_2 (A - \bar{A}_c) + b_3(S - \bar{S}_c) + b_4(F_c)]C + u \quad (1)$$

D represents depression level. A represents adolescents' activities with their nonresidential father measured as a mean deviation. S represents adolescents' closeness to their nonresidential father measured as mean deviation. F is a dummy variable representing (1) *conflict* or (0) *no conflict* between adolescent and nonresidential father, and C is a dummy variable representing (1) *contact* or (0) *no contact* with nonresidential father. The change in depression associated with contact with nonresidential father is represented by the expression in the square brackets. Equation 2 illustrates how the square bracket in Equation 1 is multiplied out such that activity, closeness, and fighting with nonresidential father become independent variables controlling for contact.

$$D = b_0 + b_1[C] + b_2 [(A - \bar{A})C] + b_3[(S - \bar{S})C] + b_4[FC] + u \quad (2)$$

Results

Table 1 shows the means and standard deviations for the variables. On average, adolescents report the highest amount of involvement (both with activities and closeness) with their mothers and the lowest amount of involvement with their nonresidential fathers. These results also show the highest amount of conflict with mothers and the lowest amount of conflict with nonresidential fathers. Stepfather involvement and conflict are in between the amounts for nonresidential fathers and mothers, although they are closer to the amount for mothers. These results show that most adolescents have lived with their stepfathers for a relatively long period of time, with the average being 7.4 years. These results indicate that stepfathers have a moderate amount of involvement and conflict and that the stepfather families in this data set are fairly stable and long lasting.

Stepfather Involvement

First, we explore whether stepfather involvement is related to adolescent well-being. These results are shown in Model 1 of Table 2 for depression and

Table 1
Descriptive Statistics of Study Variables

Variable	<i>M</i>	<i>SD</i>	Range
Dependent variables			
Depression	0.456	0.242	0-3
Problem behavior	0.530	0.412	0-3
Independent variables			
Stepfather involvement and years lived with stepfather			
Activities with stepfather	2.171	1.750	0-9
Close to stepfather	3.706	1.033	1-5
Conflict with stepfather	0.249	0.382	0-1
Years lived with stepfather	7.380	4.557	0-20
Mother involvement			
Activities with mother	3.665	1.887	0-9
Close to mother	4.613	0.697	1-5
Conflict with mother	0.375	0.484	0-1
Nonresidential-father involvement			
Contact with nonresidential father	0.671	0.470	0-1
Activities with nonresidential father	1.868	2.337	0-9
Close to nonresidential father	2.696	1.550	1-5
Conflict with nonresidential father	0.076	0.265	0-1

Note: Descriptive statistics based on weighted data; $n = 1,798$.

Table 3 for problem behavior. Our results indicate that variations in different types of stepfather involvement have important consequences for adolescent well-being. Adolescents who feel close to their stepfather have both lower depression and lower problem behavior. Adolescents who have conflicted relationships with their stepfathers have both higher depression and more problem behavior. Adolescent well-being is not related to whether adolescents engage in shared activities with their stepfathers. This result seems to indicate that the quality of the stepfather–stepchild relationship has a stronger relationship with adolescent well-being than does sharing joint activities.

Interrelationship of Stepfather Involvement With Maternal Involvement

We consider whether maternal involvement and stepfather involvement are interrelated in their associations with adolescent well-being. These results are shown in Model 2 of Tables 2 and 3. We find that adolescents who feel close to their mothers have less depression and problem behavior, whereas

Table 2
Unstandardized Coefficients for the Effects of Parental Involvement on Depression

	Model 1 <i>b</i> (<i>SE</i>)	Model 2 <i>b</i> (<i>SE</i>)	Model 3 <i>b</i> (<i>SE</i>)	Model 4 <i>b</i> (<i>SE</i>)
Stepfather involvement				
Activities with stepfather	.005 (.005)	.000 (.005)	.005 (.005)	.013 (.008)
Close to stepfather	-.038*** (.008)	-.022** (.008)	-.037*** (.008)	.108* (.043)
Conflict with stepfather	.061** (.022)	.014 (.024)	.057** (.021)	.015 (.024)
Mother involvement				
Activities with mother		.006 (.005)		.007 (.005)
Close to mother		-.046*** (.012)		.044 (.032)
Conflict with mother		.087*** (.019)		.078** (.019)
Nonresidential father involvement				
Has contact with nonresidential father			.004 (.018)	.003 (.018)
Activities with nonresidential father			-.001 (.005)	-.001 (.004)
Close to nonresidential father			-.008 (.010)	-.006 (.009)
Conflict with nonresidential father			.093** (.026)	.071** (.025)
Interactions				
Years With Stepfather × Activities With Stepfather				-.002* (.001)
Close to Stepfather × Close to Mother				-.028** (.009)
Years with stepfather				
Years with stepfather	.000 (.002)	.000 (.002)	.000 (.002)	.005 (.003)
Constant	.492 (.090)	.647 (.101)	.510 (.093)	.235 (.184)
R ²	.078	.121	.089	.139

Note: All analyses based on weighted data; *n* = 1,812. Control variables include age, gender, race, mother's education, stepfather's education, mother's employment status, household income, number of siblings, and half- or stepsiblings. Additional analyses including controls for quality of stepfather-mother relationship, years lived away from nonresidential father, and child support showed similar results.

p* < .05. *p* < .01. ****p* < .001 (two-tailed tests).

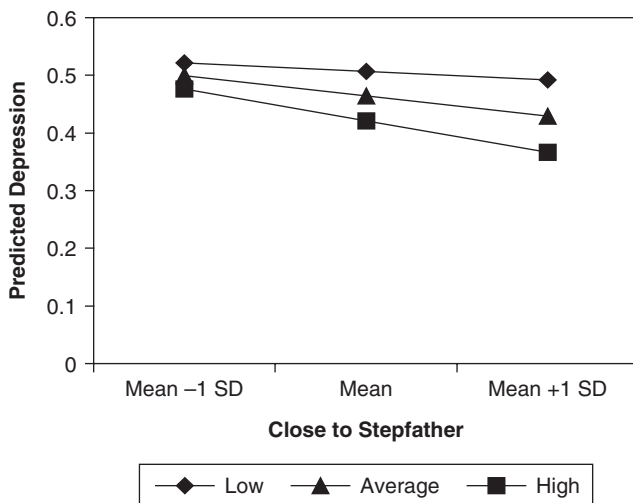
Table 3
Unstandardized Coefficients for the Effects of Parental Involvement on Problem Behavior

	Model 1 <i>b</i> (<i>SE</i>)	Model 2 <i>b</i> (<i>SE</i>)	Model 3 <i>b</i> (<i>SE</i>)	Model 4 <i>b</i> (<i>SE</i>)
Stepfather involvement				
Activities with stepfather	-.001 (.009)	.007 (.011)	-.000 (.009)	.008 (.011)
Close to stepfather	-.065*** (.015)	-.049** (.018)	-.065*** (.015)	.111* (.050)
Conflict with stepfather	.132*** (.034)	.030 (.037)	.126*** (.034)	.173*** (.049)
Mother involvement				
Activities with mother		-.018* (.008)		-.020* (.008)
Close to mother		-.043* (.022)		.069 (.045)
Conflict with mother		.198*** (.026)		.242*** (.032)
Nonresidential father involvement				
Has contact with nonresidential father			.005 (.032)	.011 (.032)
Activities with nonresidential father			-.006 (.008)	-.002 (.008)
Close to nonresidential father			-.017 (.015)	-.018 (.014)
Conflict with nonresidential father			.139* (.063)	.093 (.057)
Interactions				
Close to Stepfather × Close to Mother				-.034** (.012)
Conflict With Stepfather × Conflict With Mother				-.220** (.062)
Years with stepfather				
Years with stepfather	-.002 (.002)	-.003 (.002)	-.001 (.002)	-.002 (.002)
Constant	.660 (.208)	.791 (.224)	.688 (.207)	.298 (.229)
<i>R</i> ²	.055	.111	.065	.129

Note: All analyses based on weighted data; *n* = 1,804. Control variables include age, gender, race, mother's education, stepfather's education, mother's employment status, household income, number of siblings, and half- or stepsiblings. Additional analyses including controls for quality of stepfather-mother relationship, years lived away from nonresidential father, and child support showed similar results.

p* < .05. *p* < .01. ****p* < .001 (two-tailed tests).

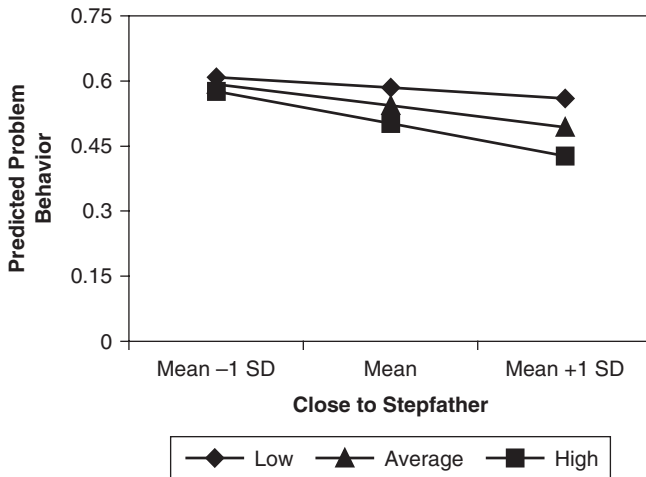
Figure 1
Interaction of Closeness With Stepfather by Closeness
With Mother on Depression



adolescents who have conflicted relationships with their mothers have more depression and problem behavior. Adolescents who engaged in more shared activities with their mothers have lower levels of problem behavior, although this type of involvement is not related to their level of depression. We find that the association of conflict with stepfather and well-being is explained by maternal involvement because this association becomes nonsignificant with both adolescent depression and problem behavior once maternal involvement is included in the model.

We also explore whether the relationship between stepfather involvement and adolescent well-being is moderated by maternal involvement. These results are shown in Model 4 of Tables 2 and 3. The relationships between closeness to stepfather and both depression and problem behavior depend on how close the adolescent is to the mother. These interactions are shown in Figures 1 and 2. Adolescents have the lowest depression and problem behavior if they feel close to both their mother and stepfather. Feeling close to a mother or feeling close to a stepfather separately decreases depression and problem behavior only slightly, but adolescents have the lowest depression and problem behavior if they feel close to both their mothers and stepfathers.

Figure 2
Interaction of Closeness With Stepfather by Closeness
With Mother on Problem Behavior

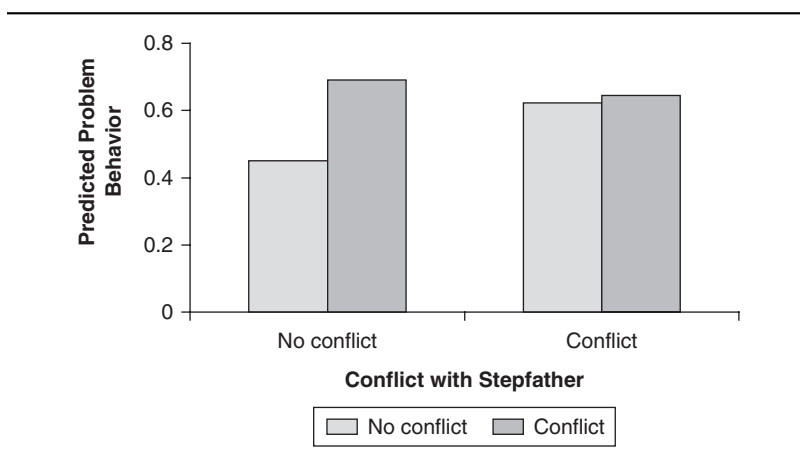


As shown in Model 4 of Table 3, the relationship between conflict with stepfather and problem behavior is also moderated by conflict with mother. This interaction is shown in Figure 3. Problem behavior is high if the adolescent has conflict with either the stepfather or the mother. Problem behavior is decreased only when the adolescent has no conflict with either the stepfather or the mother. Thus, any conflict is problematic, and problem behavior is only reduced when conflict does not occur in the household. These interactive results show that the level of maternal involvement influences how beneficial stepfather involvement is to adolescent well-being. Additional controls for stepfather–mother relationship quality do not alter these results.

Interrelationship of Stepfather Involvement With Nonresidential Father Involvement

Next, we explore whether nonresidential-father involvement mediates or moderates the relationship between stepfather involvement and adolescent well-being. These results are shown in Model 3 of Tables 2 and 3. These results show few beneficial associations between nonresidential-father

Figure 3
Interaction of Conflict With Stepfather by Conflict
With Mother on Problem Behavior



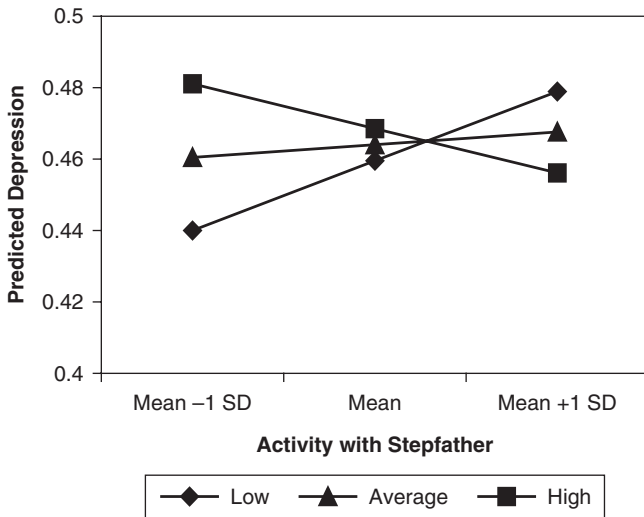
involvement and adolescent well-being. Only conflict with nonresidential fathers has a significant relationship with adolescent well-being and increases both adolescent depression and problem behavior. These results show that conflict for both nonresidential fathers and stepfathers is related to adolescent well-being. However, in the case of closeness, only stepfather closeness is related to adolescent well-being.

Our results indicate that nonresidential-father involvement does not mediate the relationship between stepfather involvement and adolescent well-being. Neither does stepfather involvement mediate the relationship between nonresidential-father involvement and adolescent well-being (analyses not shown). All of the interactions between nonresidential-father involvement and stepfather involvement are not significant. Additional analyses, including controls for years lived away from nonresidential father and amount of child support, do not alter these results.

Other Moderating Factors

Finally, we explore whether other factors, including gender, race, age, household income, years with stepfather, years away from nonresidential father, child support, step- or half-siblings in the household, and quality of

Figure 4
Interaction of Activities With Stepfather by Years
With Stepfather on Depression



stepfather–mother relationship, moderate the effect of stepfather involvement on adolescent well-being. As shown in Model 4 of Table 2, we only find one significant interaction—the number of years with stepfather moderates the relationship between involvement in activities with stepfather and depression. As shown in Figure 4, this interactive relationship indicates that in households where the stepfather has resided for only a short time, greater involvement in activities is associated with more depression and less involvement in activities is associated with less depression. The reverse is true in households where the stepfather has resided for a long period of time—less involvement in activities is associated with more depression and greater involvement in activities is associated with less depression.

Discussion

Our results address the current debate regarding whether stepfather involvement has a beneficial or detrimental relationship with adolescent well-being.

The biosocial hypothesis adds to this debate by positing that stepfathers have less of an association with adolescent well-being than nonresidential biological fathers because of lacking a biological tie to the child. Furthermore, the incomplete institutionalization hypothesis posits that stepfathers have difficulty forming a relationship and that stepfather–stepchild relationships have high amounts of conflict, although they may stabilize over time. Our results support neither of these perspectives. Instead, our results support the alternative hypothesis that stepfather involvement is similar to biological parental involvement in its relationship with adolescent well-being—that is, the quality of the parent–child relationship is key to whether stepfathers are beneficial or detrimental to adolescent well-being. Having a close relationship with a stepfather is positively related to adolescent well-being, whereas having a conflictual relationship is negatively related to adolescent well-being. However, our results confirm one aspect of the lack of institutionalization hypothesis by finding that time is an important factor to consider. We find that involvement with activities with a stepfather is only related to less depression in a situation when the stepfather has been in the household for a longer period of time. Thus, these results seem to imply that the biological tie is not as important for adolescent well-being as are two other factors—the willingness to take on a positive, involved parental relationship with the child and the time needed to form these relationships. Future research should explore these factors more fully.

The mother-as-manager model posits that residential mothers act as managers determining how involved a stepfather will be with a child. Although this data set does not actually measure whether mothers encourage or discourage stepfather involvement, one hypothesis consistent with this perspective is that the amount of involvement of residential mothers should explain the relationship between stepfather involvement and adolescent well-being. Our results provide support for the mother-as-manager hypothesis because maternal involvement explains the association between stepfather conflict and adolescent well-being. Our results provide an addition to this model by finding that the relationships between stepfather and maternal involvement and adolescent well-being are interactive. It is interesting to note the differences between the results for positive versus negative aspects of involvement. The positive aspects of involvement have a multiplicative relationship with adolescent well-being such that feeling close to a mother or feeling close to a stepfather separately increase adolescent well-being, but they increase well-being more if the adolescent feels close to both a mother and a stepfather. For the negative aspect of involvement of conflict, any conflict with either mother or stepfather is detrimental to well-being, but having conflict with both is no worse than having conflict with either one or the other. Future research should explore these

relationships to determine whether positive aspects of involvement generally multiply, whereas any negativity is problematic using both broader measures of involvement and additional outcomes of adolescent well-being.

We also explore the interrelationship of stepfather involvement with non-residential father involvement. The substitution or serial parenting hypothesis posits that only one father is generally involved at a time, so an involved stepfather substitutes for an uninvolved nonresidential father and vice versa. Our findings for nonresidential-father involvement provide no evidence for the substitution or serial parenting hypothesis. The relationship between stepfather involvement and adolescent well-being is separate from that of nonresidential-father involvement. Our results support the two-fathers hypothesis proposed by White and Gilbreth (2001) because both stepfather and nonresidential-father involvement have separate and unrelated associations with adolescent well-being. However, future research needs to reassess this model because our results show that nonresidential-father involvement has few relationships with adolescent well-being. Only conflict with nonresidential father is negatively related to adolescent well-being. Thus, it appears that involvement with nonresidential fathers provides little benefit for adolescents and may even be detrimental. It could be that nonresidential father involvement only matters if it is of a certain type, such as authoritative parenting (see Amato & Gilbreth, 1999; Hetherington et al., 1998). The measures in this data set do not assess this aspect of parental involvement. However, it may also be that this type of parenting is particularly difficult for nonresidential fathers to maintain, and thus, the limited number of nonresidential fathers who use authoritative parenting at any given time may not be statistically significant because of small sample size.

Some other findings worth noting from this research are the lack of significant interactions between stepfather involvement and demographic characteristics including gender, race, age, and household income, which is surprising because previous research finds these factors to be important (see Cherlin & Furstenberg, 1994, for discussion). Perhaps these variables do not matter interactively but instead have their most important relationship with adolescent well-being by determining the level of involvement that stepfathers have with their stepchildren in the first place. For instance, a stepfather might be less involved with an older adolescent than a younger adolescent, and this might be the real association that age has with stepfather involvement rather than stepfathers mattering more for younger adolescents than older adolescents. Another possibility is that these relationships differ from previous findings because of the greater acceptance of stepfamilies in the current time period compared to earlier ones. Thus, perhaps demographic factors

such as household income or race could have become less important because of stepfamilies becoming more common and normative in all income and racial groups over time.

There are some limitations to this research. First, this analysis was done cross-sectionally; thus, we cannot test a true causal model and rule out the possibility of reverse causality. Because the first two waves of data in Add Health were collected only 1 year apart, there is insufficient variation in adolescent well-being across time to test these research questions longitudinally. For example, according to a reverse-causality explanation, it is possible that adolescents who are more depressed and have problem behaviors may be less involved with their stepfathers and mothers and may be more likely to fight with all three parents. Future research should explore this question longitudinally.

Second, the sample may be selective for two reasons. The first reason is that most of the stepfathers have lived with their stepchildren for a relatively long period of time, with the average being 7.4 years. Because some stepfamilies dissolve soon after they are formed, this sample probably reflects the most stable and well-functioning stepfamilies rather than a representative sample of stepfamilies. We try to eliminate this selectivity by controlling for the amount of time that the stepfather has lived in the household in all of the analyses. The second reason is that adolescents determine whether they have a stepfather or not, so some stepfathers, who are not particularly involved, may be excluded. There should be minimal error on this question because stepfathers are determined by who lived in the household rather than who the adolescent has a relationship with; however, some adolescents still may have refused to answer the questions about their stepfather's level of involvement. Because of these reasons, our research may provide a positive portrayal of stepfather involvement and may exclude stepfathers who have low or no involvement with their stepchildren. Although this is a possible flaw of our data that we cannot correct, we do not believe that it is problematic because additional analyses comparing those adolescents with missing data on the stepfather involvement variables to those with reported data do not show any differences on the well-being outcomes.

Third, our research cannot answer the question about whether parenting styles make a difference for outcomes, but rather our measures address the amount of parental involvement. Perhaps both level of parental involvement and type of parenting style may influence whether a parent or stepfather is beneficial or detrimental to adolescent well-being. Future research should explore this possibility. There are also limitations in the parental involvement measures. The conflict measure is limited by only indicating whether serious conflict exists, but this measure ignores the number, frequency, and content

of these conflicts. The activity measure is similarly limited by indicating only the number of activities rather than the frequency of activities. Future research should explore these issues using a data set with more in-depth questions regarding conflict and activities.

We generally believe that our research is an improvement compared to other research because of the large sample size and the representative nature of the data set. Furthermore, our research provides a better understanding regarding which aspects of stepfather involvement matter for adolescent well-being by exploring three separate indicators of involvement—activities, closeness, and conflict. Finally, our research illustrates that the relationship between stepfather involvement and adolescent well-being must be considered within the context of maternal involvement.

In conclusion, stepfather involvement is related to adolescent well-being. However, we need to understand the complexity of this relationship. Our research indicates that the stepfather–stepchild relationship and the mother–child relationship are interrelated and must be understood together. Also, the relationship between stepfather involvement and adolescent well-being differs by the amount of time that the stepfather has been in the household. Therefore, future research should focus much less on whether stepfamilies or stepfathers are good or bad for adolescent well-being and, instead, should focus more on which aspects of stepfather involvement are beneficial or detrimental and under what circumstances.

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