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**FAMILY FUNCTIONING AND EMOTIONAL DIFFICULTIES IN
PARENTS AND ADOLESCENTS**

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Abstract

Adolescence is a period of intense change, which also involves changes within the family system. However, the perception of family functioning may be different among family members. This study aims to verify whether there are differences between mothers, fathers and adolescents in the perception of family functioning. Furthermore, we wanted to verify whether parents' perception of family functioning and their psychological profiles have an effect on adolescents' psychological profiles and their ability to identify and describe feelings. The sample comprised 220 families with adolescents, recruited through high schools in Central Italy. Self-report questionnaires, to evaluate perception of family functioning, psychological profile and difficulties in identifying and describing feelings, were administered to adolescents, mothers and fathers. Results show that mothers perceive higher levels of communication than other family components. Analysis showed correlations on psychological profiles and difficulties between parents and adolescents. Moreover, results show that mothers and fathers' psychological profiles influenced adolescents' psychological profiles. Finally, parents' difficulties in identifying and describing feelings and externally-oriented thinking predict adolescents' alexithymic difficulties. Our findings can help clinicians to suggest the importance of treatment focused on psychological difficulties that could change family perceptions of family functioning.

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1. Introduction

Adolescence is a period of intense change. During this period in life, several biological, psychological and social changes occur (e.g. puberty, new and more intense relationships with peers and new social hierarchies; Skinner & Zimmer-Gembeck, 2016; Dishman, Dowda, McIver, Saunders, & Pate, 2017). These transformational shifts may represent growth opportunities, but also vulnerability situations (Byrd, Hawes, Loeber, & Pardini, 2016). Changes occurring during adolescence also involves changes within the family system. Furthermore, adolescent parents transition to a new role and new responsibilities (Anglely, Divney, Magriples, & Kershaw, 2015).

Consequently, the perception of family functioning may be different among family members. During adolescence, it is especially important to know family factors that can support teenagers in this transition phase towards autonomy.

2. Problem Statement

In adolescence, many factors impact adolescents including biological changes associated with puberty, cognitive changes associated with more sophisticated thinking abilities, new psychosocial demands in their peer relationships, identity development, and changes in social roles (Shifflet-Chila, Harold, Fitton, & Ahmedani, 2016). Like every period of intense changes, there are great opportunities for development but, at the same time, psychological dangers and risks. The combination of several risk factors (environmental and individual) increases the likelihood of adverse outcomes in young. Cumulative risk is correlated with adolescents' mental health disease (Beitchman, 2016) and emotional and behavioral problems (Asfour et al., 2017).

In this time of transition, adolescents turn more and more towards the social world. Family has an important role in helping and supporting adolescents in this delicate passing phase (Laghi et al., 2016; Freed, Rubenstein, Daryanani, Olino, & Alloy, 2016).

Family functioning includes both a family structure that the interactive modes between members of the family group, describing the roles assumed and how members to connect emotionally with each other (Epstein, Baldwin, & Bishop, 1983). Recent studies found that there is a discrepancy between parents' and adolescents' perception of own family: adolescents shows to perceive their families more negative than their parents (De Los Reyes, Ohannessian, & Laird, 2016; Leung & Shek, 2013).

3. Research Questions

International literature show a growing interest in the association between parent's psychological risk and the adolescent outcomes (Crandall, Deater-Deckard, K., & Riley, 2015). Furthermore, recent studies have found that poor maternal emotional regulation may lead to dysfunction in family functioning due to distancing or excessive maternal reactivity. In addition, difficulties in maternal emotional regulation in families with adolescents could result in greater risk in children outcomes at this particular stage of development (Crandall, Ghazarian, Day, & Riley, 2016; Engen & Singer 2015).

Recent study underlined that these differences between parents and children predicted negatively adolescents' psychological competences (Leung & Shek, 2013). International literature have shown a

growing interest for discrepancy between parents and children on perceptions of family functioning, considering also family at risk (Leung, Shek, & Li, 2016), but few study have taken into consideration also fathers.

4. Purpose of the Study

Based on these theoretical and empirical premises, the present study aims to assess family functioning in families with adolescents, taking into account adolescents', mothers' and fathers' psychological profiles and difficulties to identify and describe emotions. In particular the present study aims to verify whether:

- mothers, fathers and adolescents perceive family functioning in different ways;
- parents' perception of family functioning and their psychological profiles have an effect on adolescents' psychological profiles and their ability to identify and describe feelings.

5. Research Methods

Thank to collaboration with high schools in Central Italy, we recruited N=220 families with adolescents (99 males and 121 females; average age= 16,08; ds: 1,52). Families were 96% Caucasian and 88% of the families had an average socioeconomic status (Bornstein & Bradley, 2014).

Researchers in person have administered the self-report questionnaires (described below) and adolescents and their parents have filled the questionnaires out independently.

In accordance with the Declaration Helsinki and all adolescents' parents signed an informant consent.

5.1. Measures

The *Symptom Check-List-90 items- Revised* (SCL-90-R; Derogatis, 1994) is a 90-item self-report questionnaire, created for evaluation of psychological and/or psychopathological profiles. This questionnaire was chosen because it is validated on both adults and adolescents, allowing to compare scores of parents and children. Items describes different symptoms and participants are asked to report whether they have suffered some symptoms in the previous week (in a Likert scale of 0 -not at all- to 4 -extremely). The SCL-90-R is composed by nine main dimensions: Somatization, Obsessive-compulsivity, Interpersonal Sensitivity, Depression, Anxiety, Hostility, Phobic anxiety, Paranoid Ideation and Psychoticism. Furthermore, it is scored on a total indice of distress, the Global Severity Index (GSI). The Italian version of SCL-90-R (Prunas, Sarno, Preti, Madeddu, & Perugini, 2012) found satisfactory internal consistency with α coefficient range from 0.70 to 0.96.

The *Family Adaptability and Cohesion Evaluation Scale* (FACES-IV; Olson, 2011) is a 42 items self-report questionnaire. It assess the perception of the functioning of own family (in adolescents and parents). The FACES-IV is composed by six scales: Cohesion, Flexibility, Enmeshed, Disengaged, Chaotic and Rigidity. Olson (2011) found a very good reliability for all six scales. In the fourth Edition of FACES two additional scales were included: the Family Satisfaction Scale (FSS) and the Family Communication Scale (FCS) that measure the degree of satisfaction with aspects related to family

cohesion and flexibility, and the communication respectively. Baiocco and coll. (2013) have taken care of the Italian validation of the instrument.

The *Toronto Alexithymia Scale* (TAS-20) is a 20 items self-report scale (Bagby, Parker, & Taylor, 1994; Italian version – La Ferlita, Bonadies, Solano, De Gennaro, & Gonini, 2007), assessing construct of alexithymia. In fact, the scale is composed by three factors, that that reflect the main components of the construct. The first factor (F1) assess the ability to recognize emotions and to differentiate them from physical sensations. Factor 2 (F2) evaluates the ability to describe verbally own emotions. Factor 3 (F3) assess externally oriented thinking. The questionnaire shows good psychometric proprieties. In fact, the coefficient of internal reliability is .86).

5.2. Data Analysis

In order to ingestigate eventual discrepancy between mothers' fathers' and adolescents' perception of family functioning, psychological profiles and difficulties in identifying and describing emotions, we conducted univariate analysis of variance (ANOVA). Sheffè post-hoc analyses were conducted.

Furthermore, to evaluate the possible influence of parents' perception of family functioning and parents' difficulties on adolescents' psychological and emotional difficulties, a series of hierarchical regressions were conducted. In order to conduct analysis, we used the Statistical Package for the Social Sciences 23.0.

6. Findings

To verify the presence of discrepancies between members' perception of family functioning, we conducted an univariate analysis of variance (ANOVA). Results show significant differences in perception of family's Communication ($F=3.95$; $p<.05$). In Table 1 are shown average scores, standard deviations, F and p values on FACES-IV subscales. As we can see, mothers percepts higher levels of communication than adolescents ($p<.05$).

Table 01. Average scores, standard deviations, F and p values of adolescents', mothers' and fathers' perception of family functioning

FACES-IV	Adolescent	Mother	Father	F	p
Cohesion	70.73 (23.9)	75.67 (22.06)	70.76 (21.39)	3.521	.03
Flexibility	71.55 (23.72)	76.55 (22.71)	74.54 (23.39)	2.570	.077
Enmeshed	51.55 (26.11)	52.94 (28.39)	55.97 (26.49)	1.545	.214
Disengaged	71.05 (22.31)	72.23 (23.42)	72.68 (21.06)	.317	.729
Chaotic	76.44 (21.12)	76.42 (18.96)	74.72 (21.15)	.513	.599
Rigid	81.15 (16.95)	82.48 (16.48)	80.79 (17.21)	.608	.545
Communication	60.34 (23.48)	66.46 (23.06)	62.79 (22.52)	3.948	.020
Satisfaction	59.10 (28.74)	64.15 (26.76)	61.57 (26.22)	1.891	.152

To verify the existence of differences in psychological profiles between mothers, fathers and adolescents, we conducted an ANOVA. Results show that adolescents showed higher level of Obsessive-

compulsivity ($p<.001$), Depression ($p<.001$), Anxiety ($p<.001$), Phobic Anxiety ($p<.001$), Psychoticism ($p<.001$) and GSI ($p<.001$) than fathers. Also, adolescents showed higher level of Interpersonal Sensitivity ($p<.01$), Hostility ($p<.05$), and Paranoid Ideation ($p<.05$) than both parents.

Results at SCL-90-R GSI showed that 14 adolescents, 10 mothers and 4 fathers exceeded the clinical cut-off (Prunas et al., 2012). In Table 02 are shown average scores, standard deviations, F and p values on SCL-90-R subscales.

Table 02. Average scores, standard deviations, F and p values of adolescents', mothers' and fathers' psychological profiles

SCL-90-R	Adolescent	Mother	Father	F	P
Somatization	.53(.41)	.65 (.4)	.49 (.32)	10.42	.000
Obsessive-compulsivity	.63 (.5)	.55 (.42)	.46 (.42)	8	.000
Interpersonal sensitivity	.57 (.55)	.45 (.37)	.38 (.35)	12.16	.000
Depression	.56 (.46)	.52 (.37)	.39 (.34)	10.68	.000
Anxiety	.51 (.44)	.44 (.34)	.35 (.28)	10.41	.000
Hostility	.51 (.46)	.38 (.33)	.41 (.38)	6.81	.001
Phobic anxiety	.3 (.34)	.26 (.33)	.16 (.24)	11.33	.000
Paranoid ideation	.56 (.5)	.43 (.39)	.42 (.39)	7.1	.001
Psychoticism	.27 (.32)	.23 (.28)	.15 (.21)	11.6	.000
Global Severity Index	.5 (.33)	.45 (.27)	.36 (.23)	12.65	.000

Furthermore, to verify the presence of differences in difficulties to identify and describe emotions between mothers, fathers and adolescents, we conducted an ANOVA. Results show that adolescents showed higher levels in F1 than fathers ($p<.05$) and higher levels of F2 ($p<.05$) than both parents. Also, fathers showed higher levels of F3 ($p<.01$) than mothers. In Table 03 are shown average scores, standard deviations, F and p values on TAS-20 factors.

Table 03. Average scores, standard deviations, F and p values of adolescents', mothers' and fathers' difficulties to identify and describe emotions

TAS-20	Adolescent	Mother	Father	F	P
F1	17.85 (6.43)	17.2 (6)	16.16 (5.58)	4.4	.013
F2	14.4 (3.6)	13.24 (3.79)	13.54 (3.77)	5.84	.003
F3	21.15 (3.99)	20.35 (4.04)	21.54 (4.08)	5.01	.007

To investigate the possible influence of parents' perception of family functioning on adolescents' psychological difficulties, we conducted regression analysis. Fathers and mothers' perceptions of family functioning predicted no influences on adolescents' GSI.

Then, regression analysis were conducted to verify if parents' psychological difficulties had an influence on adolescents' difficulties. Results showed that mothers' Global Severity Index predicted adolescents' Global Severity Index ($R^2= .117$; $\beta=.342$; $p<.001$). On the other hand, also fathers' Global Severity Index predicted adolescents' Global Severity Index ($R^2= .048$; $\beta=.220$; $p<.01$)

Finally, we aimed to verify whether parents' alexithymic features predicted adolescents' difficulties. We conducted regression analysis and results showed that mothers' difficulties to identify feeling (F1) predicted the same difficulty in adolescents ($R^2 = .094$; $\beta = .314$; $p < .001$) and mothers' externally-oriented thinking (F3) predicted in adolescents' externally-oriented thinking ($R^2 = .051$; $F_3 \beta = .210$; $p < .01$). As regards the fathers, we found similar results: fathers' difficulties to identify feeling (F1) predicted the same difficulty in adolescents ($R^2 = .065$; $F_1 \beta = .222$; $p < .01$) and fathers' externally-oriented thinking (F3) predict adolescents' externally-oriented thinking ($R^2 = .094$; $F_3 \beta = .27$; $p < .001$).

7. Conclusion

The present study aims to assess perception of family functioning in families with adolescents, taking into account parents' and adolescents' psychopathological profiles and difficulties to identify and describe emotions.

Analysis conducted on perception of family functioning showed that there are no differences between family members, except for Communication. In fact, mothers perceived more communication in their family than adolescents and fathers. Family theorists suggest that differences on perception of family functioning between parents and adolescents indicate family stress and maladaptive patterns within family (Olson et al., 1983; Minuchin, 1985). Furthermore Laird and De Los Reyes (2013) found that contrasts between adolescents and parents were strongly associated with adolescents' depression.

Furthermore, our results show that parents' perception of family functioning doesn't predict adolescents' psychological profiles. However, it seems that parents' psychological difficulties and alexithymic features have an effect on the ability of adolescents to identify and describe their emotions. Our findings can help clinicians to suggest the importance of treatment focused on psychological difficulties that could change family perceptions of family functioning.

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