To the Graduate Council:

I am submitting herewith a thesis written by Jennifer Marie Lipps entitled "Early and Middle Adolescents' Perceptions of Socioemotional Processes." I have examined the final copy of this thesis for form and content and recommend that it be accepted in partial fulfillment of the requirements for the degree of Master of Science, with a major in Child and Family Studies.

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EARLY AND MIDDLE ADOLESCENTS' PERCEPTIONS OF SOCIOEMOTIONAL PROCESSES

A Thesis

Presented for the

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Jennifer Marie Lipps

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DEDICATION

This thesis is dedicated to my best friend,

TONY W. DEPRATO, II

for his unconditional support throughout this endeavor.

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ABSTRACT

This study's purpose was to investigate early and middle adolescents' perceptions of self-esteem, self-efficacy, social support, prosocial behavior, and efficacy to face the future as a function of gender and parents' education. A questionnaire was submitted to 118 adolescents surveyed from a middle school in Knoxville, Tennessee ($\underline{M} = 14$). Significant relationships were found among all variables. There were significant main effects by gender for perceived prosocial behavior and perceived overall support. There were significant main effects by parents' education for all five socioemotional processes. There was no significant interaction. There were no significant main effects nor interactions among the support subscales by gender or parents' education. Females reported higher scores than males on perceived prosocial behavior and perceived overall support. Scores for participants who reported their parents' had attended/graduated college were higher than participants who reported their parents' had attended/graduated high school on self-esteem, self-efficacy, perceived prosocial behavior, perceived overall support, and efficacy to face the future.

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CHAPTER I

INTRODUCTION

Adolescence has frequently been described as a time of storm and stress (Coon, 1992; Craig, 1992). Most notable are the socioemotional struggles brought on by adolescents search for identity and individuation. At this key stage, the individual must transition from childhood to adulthood with little to no harm if healthy development is expected (Craig, 1992). At this point, the young person becomes an 'unqualified' adult. Therefore, it is important that during this transition the adolescent obtains the skills needed to survive adulthood (Craig, 1992).

It can be said that early adolescence is the key to important adult development. Although little research has been conducted in early adolescence as opposed to middle and late adolescence, there is important development that occurs during early adolescence (the transition from childhood to adolescence) (DuBois & Hirsch, 2000). Researchers must begin to study our adolescents at an earlier age.

Early adolescents are faced with an abundance of developmental challenges. With these challenges come high societal expectations for handling these tribulations on their own (Blechman & Culhane 1993; Nurmi, 1989; Compas, 1987). Without adequate competencies, youth are at risk for negative consequences such as pregnancy, drug use, and school dropout (Blechman & Culhane, 1993). Further, when youth are challenged by personal or environmental demands and lack appropriate social and emotional competence to handle these demands they are likely to revert to antisocial behaviors (Chung & Elias, 1996). Therefore, youth need assistance in developing the social and

emotional competencies that will help them deal with developmental and societal demands successfully. Such competencies help an adolescent have a better chance at healthy development. Those youth who respond favorably to developmental demands will undoubtedly, experience positive outcomes for their future such as graduation from high school, planned parenthood, and becoming responsible productive citizens (Clausen, 1991). Youth who successfully deal with developmental challenges are exposed to protective factors. Some of these protective factors have been identified. For example, interaction with family at home and interaction with peers and teachers at school have been described as primary factors in helping youth develop a good level of self-worth and confidence (Blechman & Culhane, 1993).

Adolescence has been found to be a time of struggle and stress. An inability to cope adaptively can lead to increased symptoms of psychological problems (Thoits, 1995; Young, Miller, Norton, & Hill, 1995; Richman, Rosenfeld, & Bowen, 1998; Unger, Kipke, Simon, Johnson, Montgomery, & Iverson, 1998; Dumont & Provost, 1999). Such problems are associated with misconduct and antisocial behaviors. Indeed, there has been an increase in adolescents' maladaptive behaviors, especially in the past decade (Singh & Darroch, 1999; Snyder & Sickmund, 1999; NIDA, 1998). Problem behaviors in adolescence have been theorized to be a result of poor social development (Flannery, Vazsonyi, Torquati, & Fridrich, 1994). Because not all of the links between problem behaviors and negative outcomes are clear in the research, I will first examine problem behaviors of adolescents rather than negative outcomes. Although they are different, both could be influenced by poor psychosocial development and a lack of social support.

Today, many adolescents are involved in problem behaviors such as drug and alcohol use, cigarette use, precocious sexual intercourse, and gun use. The occurrence of these behaviors is especially high for young adolescents. Research has revealed that nearly one in five adolescents reported themselves as currently smoking cigarettes (NIDA, 1998). Among eighth graders 41.1% reported ever smoking cigarettes (NIDA, 1998). NIDA (1998) also reported an association between cigarette smoking and drug abuse and heavy alcohol consumption. In children as young as 15 years of age 2 in 10 girls and 3 in 10 boys reported being sexually experienced (Singh & Darroch, 1999). Finally, there was an increase in homicides by juveniles from the mid-1980s to the mid-1990s . Eighty two percent of these homicides included firearm use (Snyder & Sickmund, 1999).

The negative outcomes include, but are not limited to, school dropout, sexually transmitted diseases, high rates of teen pregnancy, violent acts, and juvenile delinquency. Research by the National Center for Education Studies (1996) found that five percent of adolescents in 1996 dropped out of high school. Forty-three percent of these dropouts were between 15 and 17 years of age. According to the Alan Guttmacher Institute (Singh & Darroch, 1999), every year there are three million adolescents that acquire a sexually transmitted disease. They also found that nearly one million young women aged 15 to 19 become pregnant every year. Snyder and Sickmund (1999) reported that in 1997 there were just fewer than 2000 juveniles implicated in almost 1500 murders. There is considerable alarm recently with school violence as well because these problem behaviors have been linked to problematic psychosocial development (Jaccard, Dittus, &

Gordon, 2000; Swan, 1995; Orpinas, Murray, & Kelder, 1999; Woodward & Fergusson, 2000).

Many programs exist to enhance positive adolescent development and/or prevent social developmental problems. For example, a program could exist that attempts to increase social support in an effort to increase self-esteem. These programs may or may not be effective based on which social support sources they aim to increase, how they conceptualize an increase in self-esteem, or if they have examined the relationship between social support and self-esteem. This study will review the literature first to determine what ground-zero research has been conducted on particular socioemotional processes. Often these variables are involved in program evaluations before the concepts have been well defined, all ages of adolescents have been considered, or the basic relationships among these variables have been determined. For these reasons, there is a need for a review of literature and a study that addresses the gaps in the literature on adolescent socioemotional processes. Through thorough research efforts on early adolescents, important information can be disseminated to counselors, teachers, parents, and other influential people in an adolescent's life, as to what areas to address when trying to improve the odds of a healthy transition from childhood to adulthood. Once the relationships between particular variables are clearer, practitioners can begin to research which variables predict others which will invariably lead to the development of interventions that will reduce negative outcomes and problem behaviors.

PURPOSE

The purpose of this study was to fill gaps in the research on specific socioemotional processes. First, this study examined early and middle adolescents. Much of the research on socioemotional processes has focused on late adolescents (DuBois & Hirsch, 2000). Therefore, research on early adolescents is needed to better understand how these processes occur during this period (Fabes et al., 1999; Murphy, Shepard, Eisenberg, Fabes, & Guthrie, 1999; Montemayor, Adams, & Gullotta, 1990). Perhaps one of the best ways to learn about these variables is to examine the perceptions of adolescents. Adolescents' perceptions of their environment need to be used to measure their social functioning and adjustment (Bronfenbrenner, 1979). Perceptions can often reveal potential problems that observations or others' reports do not reveal, yet they are not always considered in the research. Third, an examination of relationships between what could be some of the key variables in adolescence was conducted. Few studies have examined all of these key variables within one sample. Finally, differences by gender and parents' education was explored among the variables. Specifically, the study investigated:

1) the relationships among early and middle adolescents' perceptions of self-esteem, self-efficacy, prosocial behavior, efficacy to face the future, overall support including parental, peer, and teacher support and
2) differences in the socioemotional variables as a function of adolescents' gender and parents' educational level.

CHAPTER II

THEORETICAL FRAMEWORK

Urie Bronfenbrenner's ecological perspective provides a conceptual basis for the current study. Bronfenbrenner (1979) viewed the child as developing within a complex environmental system. He described his theory as "a theory of environmental interconnections and their impact on the forces directly affecting psychological growth" (p. 8). The present study looked at social support as an important environmental factor in adolescent development. The ecological perspective begins with a focus on biopsychological organism, then moves to the influences of its immediate setting, and then considers additional contexts that indirectly affect the organism (Harris, 1986). A review of this theory reveals the importance of the concepts of the ecological perspective for the present study. The theory acknowledges that individual psychological development may involve personal characteristics such as self-esteem and self-efficacy, while the environmental dynamics may include social support available including support from parents, teachers, and peers. Finally, future orientations and prosocial behaviors are regarded as indicators of outcomes and positive action taken by the adolescent (Thomas, 1996). Bronfenbrenner proposed that as children grow older, they organize their experiences and devise plans to achieve their goals. A description of the four levels of his model and pertinent underlying concepts reveal this theory's applicability in regard to adolescent development.

Bronfenbrenner's perspective has been mapped out in several different ways. Figure 1 shows the model as presented by Thomas (1996). The model consists of four interacting systems: the microsystem, mesosystem, exosystem, and macrosystem. The model radiates from the center outward with the most immediate settings, represented in the middle. These are the settings in which the adolescent is directly involved and has the most ability to modify. As the systems radiate outward from the center, the settings' influences on the adolescent become more indirect.

The microsystem is the immediate setting in which the adolescent actively participates in relationships with others (Hetherington & Parke, 1993). As a child develops, the influence of each setting may change. For example, in infancy, the parents/home setting is the most influential (Hetherington & Parke, 1993), whereas in adolescence the most influential setting may be expected to be the peer group. This example reveals the importance of longitudinal research in an effort to see development over time.

As shown in Figure 1, there are several microsystems. The model shows three of the most typical settings for the microsystem: school, home, and peer group (Thomas, 1996). However, in research and theory, there is often little or no consideration given to the effects of more than one setting on the child. Because these settings, as well as all settings in each system/layer, can change over the course of development, it is important to study each setting to clarify their effects on child and adolescent development (Thomas, 1996).

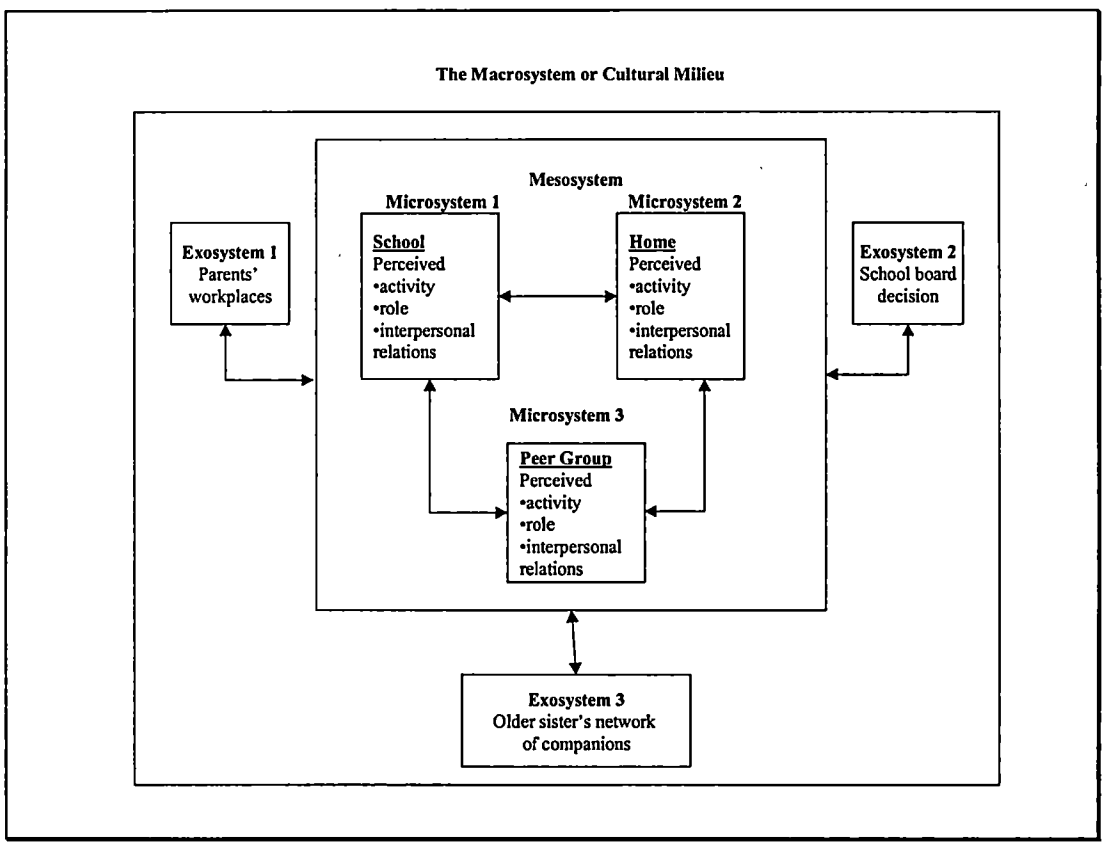


Figure 1. Sample environmental systems (Thomas, 1996, p.384).

The microsystem must be considered in regard to the adolescent's perceived activities, roles, and interpersonal relations that make up each setting. Bronfenbrenner stressed the importance of the individual's own perceptions, as well as the more "objective" reality of the environment and the individual's relation to it. Therefore, an adolescent's perception evolves as a function of his or her exposure to and interaction with the environment (Bronfenbrenner, 1979). Conducting research by examining the settings of the microsystem then must occur from the standpoint of perceptions of the individual.

The next level of the ecological model is the mesosystem. The mesosystem is the interaction of the settings that compose the microsystems. For example, a child's academic progress depends not only on school activities, but also home and neighborhood activities; therefore, it is the interaction among the three environments that promotes or hinders the child's academic growth. The mesosystem is represented in Figure 1 as the microsystems combined with the interactions between each setting. The double-pointed arrows reveal the influence of the interrelations between two or more settings on the behavior and perceptions of the adolescent. This system allows for the examination of how perceptions of one setting affect the perceptions of another immediate setting. It is for this reason that adolescents' perceptions must be investigated to assess overall adjustment.

The third level in Bronfenbrenner's (1979) theory is the exosystem. The exosystem consists of settings which are not directly influenced by the adolescent. The exosystem is the first system that contains settings in which the adolescent is not an

active participant (Bronfenbrenner, 1979). The model shown uses parental workplaces and school board decisions as examples, but for purposes of the current study parents' educational attainment will be used as the variable of interest. Parents' educational attainment can affect the adolescent by reducing or increasing the amount of help a parent can offer at home on schoolwork. The double-pointed arrows in Figure 1 represent the exchange of influence of the exosystem on the mesosystem and vice-versa.

The outermost of the four systems proposed by Bronfenbrenner (1979) is the macrosystem, another system in which the adolescent has no direct influence. The macrosystem is the cultural milieu that encompasses a particular group. It includes the ideas and belief systems of a social group. Bronfenbrenner incorporated the macrosystem to delineate different cultural influences on the adolescents developing within them. The all-encompassing macrosystem is represented in Figure 1 as enclosing the microsystem, mesosystem, and exosystem. A review of the research reveals that this system has proven difficult to consider. Nevertheless, it is an important part of the environment of an adolescent.

The current study examined variables from three of the four systems. The microsystem was represented by the investigation of the perceptions of the home (parents), school (teachers), and peer environments. The study of the mesosystem can be seen through the examination of the relationships between the home, school, and peer environments. The exosystem was be considered by through the inclusion of parents' educational attainment. How these pieces play a part in psychosocial development

revealed a need for them to be included in future research. Adolescent perceptions must also be considered from more than one setting.

According to Moen, Elder, and Luscher (1995), Bronfenbrenner has stressed the need to "systematically examine and apply the implications of research findings in designing, refining, and evaluating programs and policies to further the physical health, psychological well-being, cognitive, and socioemotional development and productive functioning of individuals and families throughout the life course" (p. 1). However, such research findings are not available. Therefore, a comprehensive study including the perceptions of personal characteristics such as self-esteem self-efficacy, and efficacy to face the future, the environment such as home, school, and peer groups, and prosocial behavior was conducted.

CHAPTER III

LITERATURE REVIEW

SOCIAL SUPPORT

Adolescence has been found to be a time of struggle and stress that can lead to increased symptoms of psychological problems and negative behavioral outcomes (Thoits, 1995; Young, Miller, Norton, & Hill, 1995; Richman, Rosenfeld, & Bowen, 1998; Unger, Kipke, Simon, Johnson, Montgomery, & Iverson, 1998; Dumont & Provost, 1999). The "buffering hypothesis" (Cohen & Wills, 1985) proposed that social support acts as a protector from the effects of stress on health and well-being. Windle (1992) found that social support accounted for the reduction of adolescents' perceptions of stress. In fact, one component of stress and coping theories is the level of available resources an individual uses to cope with stressful events (Thoits, 1995). Coping strategies include interpersonal characteristics and/or social networks (Unger et al., 1998) including parents, peers, and teachers. Social support, then, is an important factor in healthy adolescent development.

Cooley's (1902) looking glass self and the concept of reflected appraisals (Mead, 1934) has often been used to discuss the importance of social relationships in adolescent development (Mayhew & Lempers, 1998; Barber, Chadwick, & Oerter, 1992; Keefe & Berndt, 1996; Openshaw, Thomas, & Rollins, 1984; Gecas & Schwalbe, 1986). Cooley's looking glass self has been described by Margolin, Blyth, and Carbone (1988) as

consisting of three major components: (a) self-evaluation determined by the individual's perceptions of others, (b) the extent to which those perceptions are accurate, and (c) the influence of the behavior of others on the individual's sense of worth. Sullivan (1953) and Mayhew and Lempers (1996) argued that the self develops in response to social interaction and the perceived attitudes of the social support system. An adolescent's support system typically would include parents (Barber, Chadwick, & Oerter, 1992; Papini, Farmer, Clark, Micka, & Barnett, 1990), peers (Harter, 1983; Sullivan, 1953; Papini et al., 1990), and teachers (Paa & McWhirter, 2000; Murdock, Anderman, & Hodge 2000; Richman et al., 1998).

Social support has been widely studied as a factor affecting the ability of adolescents to adapt, but has not often been studied often in concurrence with other psychosocial variables and behavior outcomes (Richman et al., 1998). In fact, numerous studies point to the importance of social support in preventing psychological problems, including those externalizing problem behaviors (Ford & Sutphen, 1996; Tracy, Whittaker, Boylan, Neitman, & Overstreet, 1995; Zigler, Taussig, & Black, 1992). Furthermore, research on risk and protective factors clearly support that social support from family, peers, school, and community plays an essential role in influencing positive outcomes for adolescents (Benard, 1991; Bogenschneider, 1996; Richman & Bowen, 1997; Wang, Haertel, & Walberg, 1994). These supportive relationships allow individuals access to the resources that are key in dealing with personal strife and stressful situations (Yarcheski & Mahon, 1999). A review of pertinent research dealing with social support in adolescent development follows.

Perceived social support has been found to be inversely related to perceptions of stress and depressive symptoms and positively related to perceptions of physical and mental health (Windle, 1992; Young et al., 1995). In fact, several studies have examined the role of perceptions of social support in specific stressful contexts. Ringler and Hayden (2000) conducted research on adolescents, ages 17 to 19, concerning a loss (death of a peer, grandparent, or other significant person) or significant problem that they experienced during high school. Adolescents rated their peers and parents as the most important source of support during the time when they had experienced a loss. Balk (1983, 1991) conducted similar studies and found that adolescents reported their parents' support most influential.

Another stressful and depressive situation that has been studied with consideration of the role of social support is homelessness. Unger et al. (1998) studied 432 homeless youth in Los Angeles to determine the effect of social support on depression and health. Perceived social support was found to decrease the risk of depressive symptoms and poor health. These researchers found that effective coping strategies and perceived social support reduced the negative effects of stressful life events on physical and psychological health in homeless youth. Those youths with perceived supportive social networks reported fewer negative health outcomes. Unger et al. concluded that coping skills and perceived social support benefited youth regardless of their level of stress. Others have found that individuals with high levels of perceived social support had lower levels of depression and physical morbidity (Thoits, 1995; Maton, et al., 1996). Conversely, a perceived lack of support has been found to have a strong relationship with depressive

symptoms (Maton et al., 1996), antisocial and illegal activities, and a higher frequency of reported daily hassles (Dumont & Provost, 1999). Dumont and Provost (1999) studied 141 eighth grade students and 156 eleventh grade students. Participants rated 59 daily hassles on a Likert-type scale according to how much that hassle annoyed them. Items were scored from 1, representing not annoyed at all, to 3, representing very annoyed. The number of daily hassles that annoyed the participant determined the frequency of daily hassles. In addition, participants rated their level of satisfaction with social support from very unsatisfied to very satisfied. Satisfaction with social support was negatively related to frequency of daily hassles and depressive symptoms. The research concluded that social support played a protective role for adolescents with respect to their experience with depression and their daily hassles. Dumont and Provost suggested that researchers conduct more multivariate studies to investigate the role of perceived social support in numerous outcomes and other variables important in adolescent development.

Overall, perceived social support has not been often considered important in the research (Rosenfeld et al., 1998). Therefore, the findings on the effects of overall perceived social support are not clear. Much of the research has examined sources of social support independently. Two commonly studied support sources are parents and peers. A third support source that has been studied mostly in relation to 'school support or influence' is teacher support. However, rarely have all three been considered together.

A review of relevant literature in each of these three domains of support is important in describing the need for research that considers all three. Young et al. (1995) found that for adolescents, low perceived social support from parents was associated with

a higher incidence of problem behaviors, problematic peer relationships, and lower life satisfaction. In Ringler and Hayden's (2000) study concerning adolescents' ability to cope with problems, parents were reported as being the most helpful for those who had experienced a significant problem. Richman et al. (1998) studied the role of perceived social support in 525 students in middle school and high school who were enrolled in Communities in Schools (CIS) programs because of their risk of failing school. This research study is one of the few that has incorporated parents, teachers, and peers as support sources. They examined eight dimensions of social support, such as listening support and emotional challenge support. Middle school students reported friends as their primary source of listening support whereas high school students reported parents or adults as their primary source of listening support. Secondary sources of support were identified as teachers for high school students and friends for middle school students. Parents and adults were the major source of technical and emotional challenge support for all students. Finally, the researchers found that both groups of students perceived reality confirmation support as highest in parental and other adult relationships. The secondary source of reality confirmation support for middle school students was teachers.

With respect to research on perceived teacher support, Murdock et al. (2000) investigated motivation from teachers and perceived teacher support in adolescents during the transition to high school. When the researchers compared the ninth grade reports to those collected in the seventh grade, teachers were described in the ninth grade as less disrespectful and critical and more supportive and encouraging in the classroom. Teachers' expectations were predictors of effort in the ninth grade. Furthermore, there

was evidence that after an initial period of adjustment, higher academic demands were buffered by perceived parental support. Despite the types of perceived social support, it is evident that there were specific needs for each group of students with regard to different issues that they experienced.

The changes in the identification of a primary support person are evident in the research literature. Parent was named the primary support person in Weigel et al.'s (1998) longitudinal study of 352 high school students. The students completed a questionnaire at Time One, four months later at Time Two, and three months later at Time Three. The primary support person changed to a peer or another family member for 42 % of the students from Time One to Time Three. Furthermore, Weigel et al. found that a more supportive family environment was related to a decrease in reported stress. They also found that early adolescents turned to their parents in times of stress. However, they turned to peers in times of less-serious need. These findings suggest that social support is important to the developing person. However, adolescents determine which support source they seek for help and encouragement and their preferences change to some extent over time.

Many investigators have found, regardless of the differing operational definitions of support, that parents (Gecas & Schwalbe, 1986; Openshaw et al., 1984; Rollins & Thomas, 1979; Barber et al., 1992; Walker & Greene, 1986), teachers, and peers tend to be important in conveying feedback to adolescents about their worth. In fact, there has been much research on the salience of parental support on well-being (Grolnick, Kurowski, & Gurland, 1999; Wentzel, 1999). Mayhew and Lempers (1998) tested a

model linking parental supportive behaviors and adolescent self-esteem. They found that mothers' supportive parenting related to sons' self-esteem and paternal supportive behavior related to self-esteem for both boys and girls. Walker and Greene (1986) conceptualized parental supportiveness in terms of parent-child communication. They too concluded that parent-child communication related to adolescent self-esteem in early (11 to 15) and late adolescence (16 to 19). Gecas and Schwalbe (1986) studied three dimensions of perceived parental support behavior and three dimensions of self-esteem in 128 intact families. They concluded that overall perceived parental support behavior was related to late adolescents' self-esteem. The foregoing studies, among others, have served to reinforce the importance of perceived social support for adolescent development.

A recent longitudinal study examined peer support in children's transition from elementary school to middle school (Fenzel, 2000). The sample consisted of 116 students, 12 years of age. He found that during this transition, feelings of self-worth were enhanced by perceived peer support. Much of the research on the sources of support in adolescence has focused on parents and peers. Fewer studies have examined teacher support. Another issue of importance is gender differences in perceived support in the context of these three support sources.

Perceived social support as a function of gender has been examined in research. Taylor, Gilligan, and Sullivan (1995) and Brown and Gilligan (1990) have done research on girls of different social class, race, and ethnicity. There were underlying themes regardless of these factors found across studies (Taylor, et al., 1995). For example, when the girls were asked about things that could get in the way of future plans, the most

common answer was relationships. In addition, as they got older, the girls reported they wanted to be independent with fewer relationships (Gilligan, Lyons, & Hanmer, 1990; Taylor et al., 1995). This change seemed to happen over the period of time from eighth grade through middle adolescence (Taylor et al., 1995). At first, girls worked to enhance relationships. Eventually, through their continual experience of betrayal or neglect, they felt driven into isolation which they tended to see as independence (Taylor et al., 1995). The girls in the study functioned in a society that was patriarchal in nature, and they felt pressured culturally to leave relationships to become more 'independent.' These experiences seem to increase with added pressure throughout adolescence.

Several studies have found differences by gender in parent, teacher, and peer support. Beest and Baerveldt (1999) surveyed 1, 528 Dutch adolescents to determine the relationship between perceived social support from parents and perceived social support from peers. Results indicated that females perceived more support from peers than males reported. They also found that when adolescents named persons to whom they had given support, females were named more often than males. Similar conclusions have been drawn in other studies (Canty-Mitchell & Zimet, 2000; Papini et al., 1990; Walker & Greene, 1986). Canty-Mitchell and Zimet (2000) studied 222 adolescent volunteers from a large urban city (mean age 15.8). They found that females reported more perceived support from friends (peers) than males reported. In addition, females reported more perceived support from a significant other than males reported. Although the study did not specify, this significant other can be speculated to be a boyfriend, coach, teacher, or

other person in the adolescent's life. However, results were not reported as to how adolescents would rate the significant other if he/she was a teacher.

Papini et al. (1990) surveyed 174 seventh, eighth, and ninth grade students on self-disclosure to parents and friends. Self-disclosure was assumed to be an act of social support. The researchers defined self-disclosure as "an intentional and voluntary verbal utterance that conveys personal information to another. . ." (p. 960). Adolescent girls self-disclosed more often with their parents and friends than boys did. The authors suggested that this finding be explained through the socialization process. Males are socialized to be emotionally inexpressive, whereas girls are socialized to be open with their feelings (Lombardo & Berzonsky, 1980). This may explain why girls were more likely to self-disclose. However, despite their reluctance to self-disclose, boys may still be affected by social support. For example in Gecas and Schwalbe's (1986) study on parental behavior and self-esteem, boys' self-esteem was found to be more affected by parental behavior than girls' self-esteem. In their study of 352 high school students, Weigel et al. investigated adolescent perceptions of support. In choosing a primary support person, females most often chose peers whereas males most often chose parents. Based on these gender differences, more studies are needed on early adolescents to determine any gender effects.

There is also evidence that suggests gender differences in perceptions of teacher support. Paa and McWhirter (2000) surveyed 464 high school students on the influence of teachers on their expectations. Females reported female teachers as one of the three strongest environmental influences in their career expectations. Females also reported

more often than males, that teachers provided them with positive feedback, support for their autonomy, and openness to discussion about their career decisions (Paa & McWhirter, 2000). Overall, each of the support sources appears to affect all adolescents, regardless of gender.

SELF-EFFICACY

There has been a lack of substantial research in the area of self-efficacy and its role in relation to adolescent development. However, some studies have examined the role of self-efficacy in several areas such as delinquency, risky sexual behavior, smoking cessation, and academic performance. A review of the limited studies follows, but first it is important to understand what is meant by self-efficacy.

Bandura (1984) defined self-efficacy as "people's judgements of their capabilities to organize and execute courses of action required to attain designated types of performances" (p. 391). Self-efficacy, then, is a feeling of personal control over tasks to be executed. This personal control allows individuals to perceive the self as having the personal and social power needed to produce valued and varied results conducive to their own well-being. With the belief that they can and do exercise control over events in their lives, individuals become motivated to develop and exercise personal control (Bandura, 1995). Because of their similarity personal control, control beliefs, and self-efficacy have been used interchangeably in the research.

Bandura (1984) has explained self-efficacy with examples to aid researchers in their comprehension of the concept of self-efficacy. However, many researchers have misinterpreted Bandura's definition of self-efficacy, and have conducted research on a construct that does not properly represent self-efficacy (e.g. Marzillier & Eastman, 1984). Bandura maintained that efficacy is not the act of completing a task, it is instead, the exercise of personal control in the form of forethought. He utilized an example of a snake phobic placed before a caged snake. When snake phobics verbalize their thoughts of what they would do should the snake escape the cage, they are using self-efficacy as they assess their ability to proceed with a particular coping reaction (hitting the snake, running, being still). These thoughts, Bandura emphasized, were effacious in their judgement of the individual's coping abilities.

The role that self-efficacy played in determining behavior outcomes was the focus of research conducted by Collins (1982). Collins separated children according to their performance in standardized arithmetic tests (low, medium, and high). Each group (low, medium, and high math performance groups) was then divided again based on their perceived self-efficacy. This resulted in low and high self-efficacy groups within the math performance groups. For example, one child may have a low math performance and a high efficacy report. The children then completed several difficult math problems. The results indicated that those with higher self-efficacy solved more problems, checked more of their work, and did the problems more accurately regardless of what math performance group they were in (Collins, 1982). Bandura maintained that the more self-efficacy individuals have, the more likely they are to take on more difficult tasks with vigor and

persistence. He also stated that the "physical and psychological well-being of humans is better served by action based on self-appraisal of efficacy" (p. 235). With adolescence being a time of particular challenges, it is important to understand perceptions of self-efficacy in young adolescents.

Self-efficacy has also been discussed as a task specific factor. Several different instruments exist to study, for example, self-mastery (Ludwig & Pittman, 1999), or grade self-efficacy (Mone et al., 1995). Several studies have also assumed that the concepts of self-esteem and self-efficacy are the same (Chung & Elias, 1996). However, there are researchers who refute this notion arguing that although self-efficacy may contribute to feelings of self-worth, the two are distinct constructs (Connolly, 1989; Bandura, 1984; Wheeler & Ladd, 1982). A review of the relevant literature will provide a clearer understanding of self-efficacy as a concept in research.

Much research on adolescent self-efficacy has investigated the relationship between self-efficacy and behaviors such as smoking cessation (Stacy, Sussman, Dent, Burton, & Flay, 1992), sexual activity (Jemmott, Jemmott, Spears, Hewitt, & Cruz-Collins, 1991; Ludwig & Pittman, 1999), drug use (Chung & Elias, 1996; Ludwig & Pittman, 1999), high school dropout (Lewis, Ross, & Mirowsky, 1999), and delinquent behavior (Chung & Elias, 1996; Ludwig & Pittman, 1999). These research efforts are based on Bandura's (1986) contention that strong, positive self-efficacy helps individuals resist the potentially harmful social influences on their behavior. Chung and Elias (1996) conducted a cluster analysis on 556 high school students, splitting the adolescents into four groups based on self-reported problem behaviors. Cluster One consisted of students

who reported low scores on all problem behaviors presented. Cluster Two was made up of those who scored high on two alcohol use measures, but low on most other problem behavior areas. Cluster Three was similar to Two, but with the addition of more reported smoking. Finally, Cluster Four reported high scores on all problem behaviors including smoking, various drug use, and delinquent behavior. The researchers measured self-efficacy on four dimensions: academic competence, social competence, physical competence, and general self-worth. Those adolescents with some problem behaviors had a higher sense of competency in all domains when compared to the other Cluster groups. Therefore, it would appear that those adolescents who believe they have control over their abilities are less likely to be involved in problem behaviors. A similar study by Ludwig and Pittman (1999) used three measures of self-efficacy to determine the relationship between self-efficacy and three problem behaviors. Seventh through twelfth grade students (60% African American, 40% Caucasian) reported on delinquent behavior, risky sex, and drug use. Self-efficacy was measured by self mastery, feelings of power, and feelings of trustworthiness. Self mastery and feelings of trustworthiness were associated with low delinquent activity. While low self mastery was the strongest predictor of drug use, low self perception of trustworthiness was the greatest predictor of risky sex and delinquency. Another study related to problem behaviors investigated smoking cessation. Stacy et al. (1992) divided self-efficacy into normative social influence and informational social influence. Each of 1, 245 high school students in the sample completed a health questionnaire related to smoking cessation. Self-efficacy, as measured by normative social influence, was found to be a significant moderator of the

predictive effect of friends' social influence on smoking. The researchers concluded that adolescents' high self-efficacy influenced a capability to resist peer influence to smoke. The results also emphasized the importance of self-efficacy in its role as a buffer against harmful influences. Furthermore, Lewis et al. (1999) used the National Longitudinal Survey to investigate self-efficacy, negative behaviors, and personal outcomes. They found that low levels of personal control (low self-efficacy) were associated with nonmarital pregnancy and dropping out of school. The foregoing review suggested a negative relationship exists between self-efficacy and various problem behaviors.

Finally, the literature addressing gender differences in self-efficacy is sparse. Lewis et al. (1999) found females to have lower perceived control than males. This finding is in direct opposition to Connolly's (1989) study. Connolly found that females reported higher self-efficacy than males. However, these differences could also be attributed perhaps to differences in measurement or samples. Patrick, Hicks, and Ryan (1997) examined gender differences in fifth grade students' self-efficacy in teacher relationships. They surveyed 753 fifth grade students and found that girls felt more efficacious in their interactions with their teachers than did boys. More studies are needed to clarify the relationship between self-efficacy and gender in adolescents.

It is an individual's past successes or failures that contribute to the expectations that they will carry into the next situation (Scherer, Maddux, Mercandante, Prentice-Dunn, Jacobs, & Rogers, 1982). It is important then, for early adolescents to enter into adolescent experiences with high self-efficacy. Therefore, more research needs to be

conducted especially in early adolescence to determine what psychological and psychosocial factors are related to self-efficacy and behavior.

PROSOCIAL BEHAVIOR

In a meta-analysis conducted by Fabes and Eisenberg (1996), they noted the lack of research that had been conducted (from 1974 to 1994) on prosocial behavior from infancy to adolescence (Fabes, Carlo, Kupanoff, & Laible, 1999). The investigators reported that only 11% of the 265 studies in their meta-analysis were conducted with early adolescent (13 to 15 years) and prosocial behavior and only 12% were conducted with older adolescent (16 to 18 years) and prosocial behavior. Tucker, Updegraff, McHale, and Crouter (1999) added that there have been numerous studies on young children's empathy (a subtype of prosocial behavior), but the bulk of that research ends with the transition to adolescence. In addition, there are more studies focusing on the relationships and causes of antisocial and aggressive behaviors compared to prosocial, helping, sympathy and empathy research (Caprara, Barbaranelli, Pastorelli, Bandura, & Zimbardo, 2000; Hart & Fegley, 1995). Before reviewing the literature, it is important to clarify the concept of prosocial behavior.

Prosocial behavior is most often defined as volunteer behavior intended to benefit another (Eisenberg, 1982; Carlo, Roesch, & Melby, 1998; Fabes et al., 1999). However, prosocial behavior has been studied as various constructs such as empathy (Tucker et al., 1999; Murphy et al., 1999), sympathy (Murphy et al., 1999; Eisenberg & Mussen, 1989;

Hoffman, 1984; Saarni, 1990), helpfulness (Eberly & Montemayor, 1999; Hampson, 1984; Eberly, Montemayor, & Flannery, 1993) and affection (Eberly & Montemayor, 1999). The rationale for using these specific subtypes of prosocial behavior was that prosocial behavior was representable by an umbrella under which lies any morally appropriate behavior (Hart & Fegley, 1995). Many researchers have defined empathy as the ability to respond emotionally to another person's emotional state (Tucker et al., 1999, Murphy et al., 1999). Sympathy has been defined as remorseful feelings due to another person's emotional state (Murphy et al., 1999). Helpfulness has been studied most commonly in studies considering the role of adolescents in household chores (Eberly & Montemayor, 1999; Eberly et al., 1993). Helpfulness has been defined by many researchers as responses by an adolescent after requests for help from parents. Eberly and Montemayor (1999) used the definition more loosely as "volunteering to help parents". An example could be adolescents cleaning up after themselves without a parental request. The following is a review of the literature regarding prosocial behavior. The review presents findings of pertinent studies.

Much of the research on prosocial behaviors has focused on the development of these behaviors. However, less research has examined the construct in the developmental stage of early adolescence. However, the studies that have been conducted, examined the role of parents (Eberly & Montemayor, 1999; Carlo et al., 1998; Eberly et al., 1993; Wentzel & McNamara, 1999; Eberly & Montemayor, 1998), siblings (Bryant & Crockenberg, 1980; Tucker et al., 1999), and peers (Wentzel & McNamara, 1999; Keefe & Berndt, 1996; Hampson, 1984) in the development of prosocial behavior.

The belief that development of prosocial behavior is encouraged through the nurturing parent-child relationship has been around for at least three decades (Hoffman, 1970; Staub, 1975; Yarrow, Scott, & Waxler, 1973). Staub (1975) explained that when parents respond to their children's needs, the children develop a positive view toward people. Further, children develop an increased likelihood of imitating their parents' behavior. Several studies have shown that the attachment quality and, therefore parenting type (authoritative parenting) contributed to the overall development of prosocial responses (De Wolff & van Ijzendoorn, 1997; Baumrind, 1973, 1991; Carlo et al., 1998; Dekovic & Janssens, 1992). Carlo et al. (1998) studied prosocial behavior, adolescent temperament, and perceived parental support in 57 families. They studied perceived maternal support and perceived parental support separately. Findings showed a significant relationship between perceived maternal support and prosocial behaviors; low perceived maternal support was predictive of low levels of prosocial behaviors. Prosocial behavior was defined operationally as frequency of assisting others. Carlo et al. (1998) found that adolescents' who reported a high level of sympathy, described as concern for another in need, also reported high levels of perceived parental support and low levels of perceived sociability and anger. Eberly and Montemayor (1998) employed a sample of 129 sixth, eighth, and tenth grade students (mean age was 14) and their parents to investigate parent-adolescent relationships and prosocial behaviors. A factor analysis was conducted to determine whether prosocial behavior was a multidimensional construct. The factor analysis revealed two dimensions of prosocial behavior: affection and helpfulness. Affection included items including hugs, verbal expression of love, and

listening when parents were distressed. Helpfulness included items such as doing extra chores or helping with a meal either voluntarily or shortly after a request with pleasure. The researchers found that mothers received more affection from adolescents than fathers did. Furthermore, daughters were found to be more prosocial than sons. Also, greater helpfulness was found to be associated with higher attachment quality for sons and parents. Finally, attachment quality was positively related to affection (Eberly and Montemayor, 1998). Adolescents who exhibited strong attachment quality also reported strong affectionate behaviors.

Other studies have shown a relationship between quality of attachment and prosocial behaviors in adolescents (Rice, Cunningham, & Young, 1997; Shulman, Elicker, & Sroufe, 1994). In a two-year follow-up study, Eberly and Montemayor (1999) investigated parental influence on adolescents' prosocial behavior and as with their previous study found that mothers reported receiving more affection from their adolescent than fathers reported (also see Eberly et al., 1993). However, adolescents reported a gradual decline in affection towards parents as the adolescents got older. Attachment was also found to predict later affectionate behavior (Eberly & Montemayor, 1999). In contrast to these findings, Wentzel and McNamara (1999), in their study of 167 sixth grade students, found that family cohesion was not a predictor of prosocial behaviors. Similarly, Eberly et al. (1993) found that between late childhood and middle adolescence, there was a decrease in adolescent helpfulness (except in the mother-daughter dyad). Larson and Ham (1993) speculated from their research that adolescents'

decrease in helpfulness might be attributed to the decrease in time spent with parents and an increase in time spent with peers.

Research on peer relationships and their affects on prosocial behavior has been useful also in understanding adolescent' peer interactions. Peers have been referred to as one of the most important socialization agents in adolescence (Hampson, 1984). Adolescents who are accepted by peers tend to exhibit more prosocial behaviors than those who are less accepted (Hampson, 1984; Wentzel & Caldwell, 1997). This may be because peer relationships offer adolescents the opportunity to learn and practice prosocial skills (Hartup, 1992). Research has also confirmed that emotional well-being is related to perceived prosocial behavior (Wentzel & Caldwell, 1997) which could be a reflection of the relationship between perceived peer support and emotional well-being. Hampson (1984) studied the prosocial behaviors of 90 eighth grade students (mean age 14.43 years). The students' ratings of each other on degree of helpfulness were evaluated on six behavioral tasks. The ratings delineated five distinct groups of peers ranging from helpful and popular to unhelpful and unpopular. Hampson's behavioral tasks included rate of return of permission slips, responses to hearing audio tapes of distressed (unknown) peers, willingness of the students to meet with the distressed peer on the audio tape, aiding an experimenter as she dropped papers, participation in a peer tutoring or counseling program suggested by a teacher, and willingness to become a big brother or sister. He found that those students who were more apt to help were found in more peer oriented situations. Overall, peer acceptance was associated with the willingness or engagement of prosocial behaviors (Hampson, 1984). Similarly, Wentzel and McNamara

(1999) also found a significant relationship between peer acceptance and perceived prosocial behavior. They surveyed 167 sixth grade students to determine the relationship of family and peer influence on prosocial behaviors. In regard to peer influence, they found that peer acceptance was positively related to perceived prosocial behavior. Masters and Furman (1981) found that the principal setting for prosocial behavior is a situation in which friends help each other. Sussman, Dent, Stacy, Burciaga, Raynor, Turner, Charlin, Craig, Hansen, Burton, & Flay (1990) studied peer association and adolescent tobacco use. Findings showed that antisocial behaviors, such as tobacco use, could be identified through group membership. Finally, Keefe and Berndt (1996) found that students with friendships with more negative features viewed their own conduct as less appropriate.

Another promising area of inquiry is gender differences in prosocial processes. Several studies have reported differences between males and females in relation to their involvement in prosocial behaviors (Tucker et al., 1999; Eberly & Montemayor, 1998; Eberly et al., 1993; Murphy, 1999; Fabes et al., 1999). Block (1983) contended that these differences might be attributed to a difference in socialization exposure in boys and girls. He noted that it is socialization that affects how adolescents will negotiate their social world. Fabes and Eisenberg (1996) found in their meta-analysis that girls were more prosocial in their actions than boys between late childhood and adolescence. There have also been studies that have found parent (Eberly et al., 1993; Murphy et al., 1999) and teacher reports (Murphy et al., 1999) reflected girls as more sympathetic (Murphy et al., 1999; Eisenberg, Fabes, Murphy, Karbon, Smith, & Maszk, 1996) and helpful (Eberly et

al., 1993). Finally, in an investigation of affection and helpfulness towards parents, Eberly and Montemayor (1998) found daughters showed more affection and helpfulness than boys did. These gender differences are important in understanding the role of prosocial behavior in adolescence.

EFFICACY TO FACE THE FUTURE

The adolescent years are crucial for the development of efficacy to face the future (Super, 1990; Ginzberg, 1984; Stevens, Puchtell, Ryu, & Mortimer, 1992). Herr (1989) suggested that human development and career development are linked through their ability to affect one another. Therefore, exploring career options and making decisions about a career involve change, which occurs through a psychological process that affects all areas of an adolescent's social and emotional development (Corbishly & Yost, 1989).

Future plans have been studied from many different perspectives. Research has focused on those who influence career development (Mortimer et al., 1986; Pimentel, 1996; Picklesimer, Hooper, & Ginter, 1998; Farmer, 1987; Lent & Brown, 1996; McCollough, Ashbridge, & Pegg, 1994; Stevens et al., 1992), achievement in school (Dennehy & Mortimer, 1992; Pimentel, 1996; Stevens et al., 1992), gender differences (Farmer, 1985; Zuckerman, 1985; Pimentel, 1996; Stevens et al., 1992), and efficacy beliefs (Pimentel, 1996; Betz & Voyten, 1997; Blustein, 1989). These studies revolved around three basic areas: background information, personal characteristics, and environmental factors (Farmer, 1985, 1997). Background information included gender,

age, and socioeconomic status while personal characteristics included values and personality. Environmental variables were external support sources. Farmer (1985) found personal variables three times as influential as background and environmental variables.

Much of the literature on future plans has been conducted in either late adolescence or young adulthood (Zuckerman, 1985; Trempala & Malmberg, 1998; McCullough et al., 1994; Picklesimer et al., 1998; Betz & Voyten, 1997). Nurmi (1987, 1989, 1991) has done extensive work on the future orientations of adolescents and has identified three basic processes through which adolescents view the future: motivation, planning, and evaluation. He described motivation as setting goals and comparing them to values and expectations concerning the future. Planning included the process of setting up conditions resulting in these goals taking place. Further, Nurmi (1991) described evaluation as the process involved in transforming plans into action. He stressed the need to evaluate early adolescence as it fits with identity formation.

Much research has been conducted to examine the chief socialization influences on adolescents' future plans. It has been shown that parents (Farmer, 1985b; Picklesimer et al., 1998; Mortimer et al., 1986; McCullough et al., 1994), peers (Saltiel, 1985), and teachers (McCullough et al., 1994; Saltiel, 1985) all influence on an adolescent's efficacy to face the future and occupational plans. Mortimer et al. (1986) found that parents have the ability to influence the plans their children make and may consider the behaviors children pursue in order for the adolescent to achieve their goals. Parents also influence the adolescent processes consciously and unconsciously through their values, beliefs, and social location. The family can also influence plans and outcomes through their help in

the development of efficacy and competence (Pimentel, 1996) and through their act of role modeling (Farmer, 1987). McCullough et al. (1994), in a study of leadership in adolescents, conducted a group comparison between a leader group and a control group. The investigator found that junior and senior high school students who were leaders were higher in locus of control and prestigious career aspirations than the comparison group. Paa and McWhirter (2000) found in a study of 464 ninth and tenth grade high school students (median age 14.7) that parents and same sex friends were perceived as the most influential people in career making decisions. Finally, Lent and Brown (1996) reported that reinforcement from parents, peers, and teachers influenced adolescents' career interests and choices. They concluded that significant others (parents, peers, and teachers) do influence adolescents psychosocial processes and in particular their efficacy to face the future.

Meta-analyses and reviews of the empirical literature (Betz & Luzzo, 1996; Lent, Brown, & Hackett, 1994) strongly support self-efficacy as a predictor of career decision making intentions and behaviors. The Career Decision Making Self-Efficacy Scale has been used in several studies on self-efficacy and career decisions (Betz & Voyten, 1997). It measures an individual's belief that they can complete the tasks needed to make a particular career choice. Betz and Voyten (1997) studied 350 college students, predominantly women, who were enrolled in an introductory psychology course. They found that efficacy was associated with career exploration behavior. Efficacy was also related to gaps in self-efficacy expectations regarding the process of making educational and career decisions. Blustein (1989) also reported similar results. He found that career

decision making self-efficacy was a strong predictor of career exploration and an important contributing factor to the development of efficacy to face the future.

Gender appears to influence career aspirations (Sullivan & Mahalik, 2000). Many researchers have stated that the process of career decision making and maintaining a career are more complex and restricted for women than for men (Farmer, 1985; Fitzgerald, Fassinger, & Betz, 1995). However, there is evidence that suggests that males and females do not differ in their efficacy to face the future. For example, Paa and McWhirter (2000) studied 464 high school students to investigate the influences of adolescents' current career expectations. Both males and females reported parents, then peers as the most influential on their current career expectations. Tangri and Jenkins (1986) reported little difference between males' and females' educational aspirations and expectations. Stevens et al. (1992) found, in a sample of 1001 ninth grade students, that male and female adolescents did not differ on the ranking of the importance of a career.

SELF-ESTEEM

A commonly accepted definition for self-esteem has been the evaluation of oneself in which there is a judgement of approval or disapproval by the self (Rosenberg, 1965). Campbell (1984) described self-esteem in terms of the reality and ideal. People have an ideal perfect concept of themselves that they strive to fulfill. How close individuals come to meeting the ideal emanates from the feedback that they get from others. This feedback can determine success or failure in meeting the ideal. Although, it

is equally important that individuals be able to evaluate their ideal against their real self. This reality and how it matches up to individual's ideals will result in self-esteem (Campbell, 1984).

Brown and Dutton (1995) found that self-esteem levels could be differentiated by an individual's emotional reaction to failure. They found that both high and low self-esteem groups felt good when they succeeded. The difference was evident when they failed. After failure, participants who reported low self-esteem evaluated themselves significantly worse than those who reported high self-esteem. Brown and Dutton explained these differences by concluding that those with lower self-esteem had an overgeneralized view of the negative implications of the failure. Many studies support the notion that when stressful events overwhelm the ability to cope, failure to overcome such an intensely stressful event will decrease feelings of self competence (Bolig & Weddle, 1988; Jens & Gordon, 1991; Rutter, 1986; Werner, 1986).

An important major task in adolescence is the development of a positive perception of self. High self-esteem fosters good mental health, the capability to love others, the gaining of friends, and the general feeling of being happy (Campbell, 1984). Conversely, feelings of loneliness, discouragement, frailty, poor social interactions, and consciousness result from low self-esteem (Campbell, 1984). Self-esteem and its relation to several other variables are an important consideration in psychosocial development.

The research on self-esteem in early adolescence is lacking in depth and complexity. DuBois and Hirsch (2000) found 1, 463 empirical articles in a search of PsycINFO (1984-1999) that pertained to early adolescence and included self-esteem (or a

similar relevant term) in the abstract. They reported that self-esteem was only the subject term for one third of the articles. Of these, only a small number had self-esteem as its primary focus. Similarly, Haney and Durlak (1998) reviewed 102 studies on adolescent self-esteem to investigate changes occurring in self-esteem and the impact of interventions on self-esteem. All of the studies used in the review were dated before 1992 and included children younger than 19. They found that there was no theoretical or operational consensus about self-concept or self-esteem. They also concluded that there could be unknown factors that influence adolescent self-esteem. DuBois and Hirsch proposed a model that includes the relationships between self-esteem, self-efficacy, behavior adjustments, family, peer, and school contexts. They proposed this model based on a review of research that alluded to self-esteem as a multidimensional construct. Harter (1990) and Rosenberg (1979) agreed that self-esteem might be influenced by many unknown factors. DuBois and Hirsch suggested more research be conducted to bridge the gap between psychological and environmental factors in self-esteem in early adolescence. The following literature review consists of those relationships noted by DuBois and Hirsch.

Self-esteem has been found to be related to negative and positive behaviors in adolescent youth. Luster and McAdoo (1995) found that students who graduated from high school tended to report higher self-esteem than those who didn't graduate from high school. In addition, they found grade point average (GPA) unrelated to self-esteem. Family relationships at age 15 were also related to self-esteem at age 19. On the contrary, several studies have found higher grades related to higher self-esteem (Cauce, 1986;

Kurdek & Sinclair, 1988; Rowlison & Felner, 1988). More research is needed to clarify the correlates of self-esteem and its relationship to adolescent behavior.

There are several research studies on self-esteem and its role in sexual practices (Holmbeck, Crossman, Wandrei, & Gasiewski, 1994; Robinson & Frank, 1994). Morrison (1985) found that self-esteem is related to contraceptive use in some situations. Similarly, Holmbeck et al. (1994) conducted a study of 300 freshmen college students to examine their sexual practices. The study found a correlation between self-esteem and attitudes about and tendencies to use contraception. Participants who had higher self-esteem had more positive attitudes toward contraception and a greater likelihood to use contraception than their peers with low self-esteem did.

There have been a number of studies on the effects of parental supportive behavior on adolescent self-esteem (Holmbeck & Hill, 1986; Litovsky & Dusek, 1985; Mayhew & Lempers, 1998). Gecas and Schwalbe (1986) studied 128 families who had adolescents aged 17 to 19. They found that adolescents perceived information about their inherent worth through parental support, parental interest, and participation by parents. More specifically, though, studies have reported that there could be gender differences in the relationship between parental support and self-esteem. Gecas and Schwalbe's study found boys' self-esteem more strongly related to parental behavior than girls' self-esteem. In contrast there are several studies that have concluded that only females' self-esteem is related to parental support (Nielsen & Metha, 1994; Barber et al., 1992). It is clear that more research is needed to clarify these gender differences.

Adolescent peer relations play an important role in an individual's formation of self identity (Sussman et al., 1990). For example, Keefe and Berndt (1996) found in their study of 297 seventh and eighth grade students that positive friendship features were associated with a general sense of self worth. Positive friendship features included self-disclosure, prosocial behavior, and support. This finding has been supported in similar studies on positive friendship features (Coates, 1985; Dubow & Ullman, 1989; Townsend, McCracken, & Wilton, 1988). Likewise, Fentzel's (2000) longitudinal study (described earlier) showed that self-esteem was enhanced by social support from close friends over a year time period. He also found that peer support combined with feelings of self worth eased the transition to middle school. Similarly, Hirsch and DuBois (1991) studied adolescents before and after their middle school transition and found that self-esteem before the transition was not predictive of self-esteem after the transition. This implied that there might be other variables (possibly friendship support) that influenced self-esteem over the transition. Self worth was evaluated by an adolescent's perceived peer approval in the study by Harter, Stocker, and Robinson (1996). They studied 147 sixth, seventh, and eighth grade students. Results showed that those participants who based their self worth on peer approval reported the greatest fluctuations in both classmate approval and self worth. In addition, they also reported lower overall levels of classmate approval and self worth. More investigations are needed to reveal a clearer connection between peer support and self-esteem.

There is much speculation regarding the relationship between self-esteem and self-efficacy. Many researchers have stated that self-efficacy likely contributes to the

evaluation of the self, but is an independent concept (Connolly, 1989; Gecas & Schwalbe, 1983; Wheeler & Ladd, 1982; Bandura, 1982). In addition it has been argued that a person with high self-efficacy will tend to have high self-esteem (Bandura, 1982). Similarly, Connolly (1989) found that self-efficacy correlated with the dimensions of self-concept: perceived social competence, general self worth, cognitive and physical competence, and self-esteem. By achieving a sense competence or effectiveness in dealing with various situations, self-efficacy has been considered a piece if a greater feeling of self-esteem. Furthermore, Mone et al. (1995) based their research on two theories that argue whether self-esteem or self-efficacy can better predict personal goals and performance. The first is based on Bandura's social learning theory, which purports that because self-efficacy is task oriented, it should better predict goals and performance. The second theory is the 'looking glass self' perspective. It posits that higher self-esteem results from one's perceived views of others' approval or disapproval of a particular behavior. Findings from the Mone et al. study showed self-efficacy more related to personal goals and performance. However, the findings might be problematic de to the measures used. The researchers studied 'grade' goals only and shortened the self-esteem scale. Conclusions such as this and differing theoretical ideas make the relationship between self-esteem and self-efficacy difficult to interpret and generalize from. With more research on self-esteem and self-efficacy, better conclusions can be drawn about the relationship between them.

Gender differences have been discussed in great depth in the literature. Overwhelmingly studies have indicated that males have higher self-esteem than females

in adolescence (Knox, Funk, Elliot, & Bush, 1998; Nurmi, 2000; Raymore, Godbey, & Crawford, 1994; McCarthy & Hoge, 1982; O'Malley & Bachman, 1983; Harper, 1991; Quatman & Watson, 2001; Chubb, Fertman, & Ross, 1997). Wigfield, and Eccles (1994) found that in early adolescence, boys and girls did not differ in self-esteem. In other studies on late adolescence, studies have shown that males and females begin to differ in their self-evaluations with males reporting higher self-esteem than females (Eccles, Wigfield, Flanagan, Miller, Reuman, & Yee, 1989; Wigfield, Eccles, Mac Iver, Reuman, & Midgley, 1991). Females tend to experience a decline in self-esteem while for males, self-esteem increases during adolescence (Simmons, Rosenberg, & Rosenberg, 1973; O'Malley & Bachman, 1983). Boys may tend, however, to be more positive than girls in their responses on self report measures in late adolescence (Eccles, Adler, & Meece, 1984). Further, girls are likely to be more disparaging than boys in appraising themselves (Crockett & Peterson, 1987). As girls transition from early to late adolescence, they tend to be "silenced" in their true expressions which has been found to lead to negative evaluations of the self (Taylor et al., 1995, Simmons & Blyth, 1987). Taylor also mentioned in the study, following eighth grade girls through the tenth grade, that because girls do not feel listened to or heard they tend to be isolated and feel rejected by others in relationships. This rejection could lead to feelings of less importance and subsequently negative self-esteem (Taylor et al., 1995).

Parents' education has rarely been considered as anything more than a mechanism for describing the sample of a study that focuses on socioemotional processes. This study evaluated the differences in the socioemotional processes according to the participants'

reports of their parents' education. It may be likely that a parents' education would effect parenting behaviors and feedback to the child on several of the socioemotional processes involved in the current study.

HYPOTHESES

1) There will be significant correlations among the selected variables: self-esteem, self-efficacy, perceived overall support, perceived prosocial behavior, and efficacy to face the future.
2) There will be significant differences in self-esteem, self-efficacy, perceived overall support, perceived prosocial behavior, and efficacy to face the future as a function of gender and parents' education.

CHAPTER IV

METHOD

SAMPLE CHARACTERISTICS

The sample consisted of one hundred eighteen (39) seventh and (78) eighth grade students attending a middle school in East Tennessee. The sixty-one (51.7 %) males and 57 (48.3 %) females ranged in age from 14 to 17 years of age ($\underline{M}$ = 14.08, $\underline{SD}$ = 3.90). Seventy-nine (66 %) of participants reported academic grades of at least a B, nine (8 %) reported Cs or Ds, and thirty (25 %) reported a wide range of grades. Eighty-two participants (69 %) reported living in an intact family (with mother and father). Twenty-two participants (18 %) reported living with one parent and a stepparent. Sixteen participants (13 %) reported living in a single household with either parent or another adult. Participants also reported on their parents' educational attainment. Fifty-seven participants (48 %) reported that their father/stepfather had a high school diploma or less while fifty-one participants (43 %) reported their mother/stepmother had a high school diploma or less. Thirty-seven fathers/stepfathers (32 %) reportedly had at least some college while fifty-one mothers/stepmothers (43 %) were reported having at least some college. Twenty-four participants (20 %) didn't know their father/stepfather's education and sixteen participants (14 %) didn't know their mother/stepmother education. Parents' education was determined by utilizing the higher reported level of education of either parent.

MEASURES

The PRESS Scale of Resiliency (LaChausse, 1998) was used to measure the variables under consideration (see Appendix). The PRESS is a collection of measures designed to measure resiliency. The scales include measures of the perceptions of social support, perceived prosocial behavior, self-efficacy, self-esteem, and efficacy to face the future. Readability of the scales using the SMOG readability formula is reported at the fifth grade reading level. This formula assumes that children at the fifth grade reading level will have 90 % comprehension of the material.

Perceptions of Social Support

Perceived social support on the PRESS was measured with a modified version of Harter's (1985) Social Support Scale for Children. Four subscales consisting of six items each in Harter's scale were perceived parental support, perceived teacher support, perceived close friend support, and perceived classmate support. A pearson's product-moment correlation coefficient was computed for perceived classmate support and close friend support to determine if there was evidence to support combining the two into one 'peer' support category. The correlation was high ($r = .61$). For the present study, then, close friend and classmate support were combined to form a peer support subscale. The response format required the participant to choose between two statements describing what "kind of kid is most like" the participant. An introductory paragraph explained that there were no right or wrong answers, how to complete the section, and a reminder to "only choose one box". The participants chose which statement best described them and then chose whether that statement was "really true " for them or "sort of true" for them.

The three subscales were analyzed independently as measures of parent, teacher, and peer support and collectively as a measure of overall support. Several items were reverse scored. Higher scores indicated higher perceived support. The Cronbach's Alpha calculated for the social support scales for the current study are reported as follows: overall support at .91 (.89 for females, .90 for males), parent support at .88 (.87 for females, .87 for males), peer support at .87 (.86 for females, .87 for males), and teacher support at .83 (.76 for females, .86 for males). Cronbach's Alpha conducted by LaChausse (1998) was comparable at .79 for parental support, and .73 for teacher support.

Self-Esteem

The Rosenberg (1965) Self-Esteem Scale was used to measure participants' self–esteem. The scale is one of the most frequently used self-esteem scales (Mone et al., 1995). It consisted of 10 questions set on a four point Likert scale. Sample items included "I am able to do things as well as most people" and "At times I think I am no good at all." The response format ranged from 1=Strongly Disagree to 4=Strongly Agree. The 10 items were totaled for a mean self-esteem score with higher scores indicating higher self-esteem. Several items were reverse scored. Test reproducibility has been reported at 92 % and scalability at 72 % (Johnson, 1976). Silber and Tippet (1965) have found concurrent validity coefficients ranging from .56 to .83. The Cronbach's Alpha calculated for self-esteem in the current study is reported at .84 (.81 for females, .87 for males). Cronbach's Alpha was reported by LaChausse (1998) at a comparable value, .84.

Self-Efficacy

Self-efficacy was measured by LaChausse's (1998) scale. This scale is based on Bandura's (1984) proposal that an individual will behave according to their expectancies and incentives. The self-efficacy scale consisted of five items. Participants chose how true each item was for them. Items were set on a four point Likert scale ranging from 1=Not True At All to 4=Very True. Sample items included " I am not sure that I can avoid risky situations in my life" and "I am sure that I can talk to my parents about my problems." Higher scores indicated higher self-efficacy. The Cronbach's Alpha calculated for self-efficacy is reported at .67 (.70 for females, .64 for males). A comparable value for Cronbach's Alpha was reported by LaChausse (1998) at .69.

Perceptions of Prosocial Behavior

LaChausse (1998) developed the prosocial behavior scale. He explained the scale through the notion that pro-social behaviors such as communication skills, warmth and thoughtfulness, absence of violence and persistence and determination will encourage an individual to seek and maintain hearty relationships. The prosocial behavior subscale contained eight items. Several items were reverse scored. Participants chose how true each item was for themselves. Sample questions included "I ask questions in class" and "When I have a problem with someone, I talk about it with them." The four point Likert scale ranged from 1=Never to 4=Usually. Higher scores indicated higher perceived prosocial behavior. The Cronbach's Alpha calculated for prosocial behavior in the current study is reported at .73 (.68 for females, .77 for males). A comparable value was reported by LaChausse (1998), .64.

Efficacy to Face the Future

Efficacy to face the future was measured using LaChausse's (1998) measure of future plans and goals. LaChausse created the three items based on the belief that future goals and plans are thought to enhance an individual's resistance to risky behavior. The three items were "I believe that I can reach my goals for the future", "I have a plan in my life to reach my goals", and "When I have something unpleasant to do, I stick to it until I finish it." The three items set on a four point Likert scale range from 1=Not True at All to 4=Very True. Higher scores indicated higher efficacy to face the future. Cronbach's Alpha was reported by LaChausse (1998) at .68. The Cronbach's Alpha calculated for efficacy to face the future in the current study was reported at .67 (.56 for females, .76 for males). A Cronbach's Alpha was then conducted by item to determine which (if any) items could be removed to increase the reliability of the measure. The Cronbach's for the first two items only was highest at .71 (.48 for females, .83 for males). Due to the higher reliability with the deletion of the third item, the reduced measure was used in the analyses.

CHAPTER V

RESULTS AND DISCUSSION

HYPOTHESIS 1

Pearson's product-moment correlational analysis was used to determine the correlations among the selected variables of self-esteem, self-efficacy, prosocial behavior, efficacy to face the future, and overall support. The results of the analysis are shown in Table 1. As indicated, all correlations were positive and significant at the $p < .01$ level, with coefficients ranging from .48 to .65. Pearson's product-moment correlations were also conducted for each of the three subscales of overall support: parental, peer, and teacher. Intercorrelations among the subscales of the social support scale showed significant positive correlations between perceived overall support and perceptions of parental support (.80), peer support (.83), and teacher support (.73) all at the $p < .01$ level (Table 1).

The findings supported the hypothesis of significant positive relationships among self-esteem, self-efficacy, overall support (including parent, peer, and teacher support), prosocial behavior, and efficacy to face the future. The variables were all significantly interrelated. Indications are that adolescents who perceived themselves to have good overall support also indicated better overall socioemotional functioning. They were more likely to see themselves as valuable and worthwhile, capable of exhibiting prosocial behaviors, good decision makers, and having high goals for the future.

Table 1

Pearson's product-moment correlations among all socioemotional variables.

Developmental Variables	Self-esteem	Perceived Prosocial Behavior	Self-efficacy	Efficacy to Face the Future	Perceived Overall Support	Perceived Parent Support	Perceived Teacher Support	Perceived Peer Support
Self-esteem	1.000							
Perceived Prosocial Behavior	.48***	1.000						
N	101							
Self-efficacy	.45***	.65***	1.000					
N	102	112						
Efficacy to Face the Future	.46***	.58***	.48***	1.000				
N	104	114	114					
Perceived Overall Support	.57***	.64***	.65***	.54***	1.000			
N	93	100	99	101				
Perceived Parent Support	.47***	.63***	.73***	.53***	.80***	1.000		
N	103	113	113	116	101			
Perceived Teacher Support	.44***	.60***	.58***	.43***	.73***	.57***	1.000	
N	99	107	107	110	101	108		
Perceived Peer Support	.45***	.37***	.33**	.33**	.83***	.44***	.33***	1.000
N	95	104	103	105	101	105	101	

** $p < .01$ *** $p < .001$

Perceived overall social support was of particular interest. Beest and Baerveldt (1999) stated that perception of social support was the single most important factor to the socioemotional well-being of children and adolescents. The research literature has consistently shown the microsystem to be of special importance to children's adjustment and functioning (Bronfenbrenner, 1979; Hetherington & Parke, 1993; Thomas, 1996). In particular, children's perceptions of social support have been found to reduce stress (Windle, 1992; Young et al., 1995), predict self-esteem (Fenzel, 2000; Mayhew & Lempers, 1998) and influence career decisions (Paa & McWhirter, 2000). Therefore, it is not surprising that social support is related to several other areas of well-being measured in this sample. These results give credence to the importance of the supportive microsystem in children's psychological adjustment. In addition, overall support had the highest correlations when compared to the subscales. This could support the need for more research on the importance of overall social networks, rather than individual support sources. Many studies that have focused on a specific support source such as parent support may be missing the importance of social support as a network of multiple sources that could add up to a higher potential influence.

The role of the various support systems has been debated in the literature. In the current study, although, all of the components of support are related to the other socioemotional variables, parent is of special interest. Indeed there has been controversy about whether parent support is more influential than peer support in children's well-being (Harris, 1998). The consensus of past research appears to be that parents are most influential during childhood; however, as the child gets older, peers and other significant

others become more important (Furman & Buhrmester, 1985; Eberly & Montemayor, 1999). Age was controlled in the current study therefore, that perspective can neither be refuted nor supported. However, in the current study, although all of the dimensions of support showed moderate correlations with the other measures of well-being, parental support showed higher correlations. This finding may support research that found adolescents reporting parents as their primary support person (Weigel et al., 1998). It is worth noting here that the participants of the current sample were in the early adolescent years. Perhaps as they get older, the peer components of support will show strong correlations. Although, teacher support was correlated higher than peer support. At this early stage in adolescence, it may be important to consider teacher support as an important influence. Due to the lack of research on teacher support, it may be that the influence may be underestimated.

An examination of specific dimensions of social support and individual socioemotional variables follows. For self-efficacy, perceived parent support had the strongest correlation, followed by teacher support and peer support respectively. This pattern may exemplify the need for different supports in different situations. For example, parents may provide support of the child's academic work through encouragement and praise; peers may provide relational support for the adolescent during an altercation with a boyfriend/girlfriend; teachers may provide educational support by offering to tutor the adolescent after school. It may be that a sense of personal control is mostly affected by parent and teacher support. This relationship needs to be explored further.

The quality of the parent-child relationship has been noted in the research as important in the encouragement of prosocial behavior (Hoffman, 1970; Staub, 1975; Yarrow et al., 1973; De Wolff & van Ijzendoorn, 1997; Baumrind, 1973, 1991; Carlo et al., 1998; Dekovic & Janssens, 1992). Many researchers have posited that when parents respond to children's needs, children will develop a positive view toward others. In addition, parents who model good behaviors and encourage helping and affectionate behaviors through chores and rewards will likely have children who exhibit those behaviors. With a decrease in time spent with parents and an increase in time spent with friends during the transition from childhood to adolescence, the shift in influence from parent to peer can be expected (Larson & Ham, 1993). With the current sample, the relationship between prosocial behavior and perceived support was strongest for parent (.63) followed by teacher (.60) and peers (.37). Because the sample in the current study was early to middle adolescence, the results indicated that this young group of adolescents are still more reliant on parents than peers.

Adolescents' future plans and goals have been well studied, but the present investigation is one of the few attempts to measure adolescents' efficacy to face the future. Past research has shown that the chief socializers of future plans have been parents (Pimental, 1996; Farmer, 1985b; Picklesimer et al., 1998; Mortimer et al., 1994; McCullough et al., 1994), peers (Saltiel, 1985), and teachers (McCullough et al., 1994; Saltiel, 1985). The results of the current study seem to support that finding. The findings here indicate that perceived parent support had the strongest correlation with efficacy to face the future (.53) , followed by teacher support (.43), and peer support (.33).

Parents have the ability to influence plans children make about their future (Mortimer et al., 1996). Parents often have influence over the behaviors of the adolescent in their pursuit of goals. In addition, parents serve as role models as well as indirectly influence the values and beliefs that a young person has about his or her ability to achieve certain goals. Teachers can assist adolescents in their quest to face the future through direct performance feedback on their school performance. Teachers can be a good support source to discuss things such as college. Education is tied to occupation, so it would seem fit that teachers play a significant role in children's plans for the future. Peers were, again, a lower correlate of efficacy to face the future. Peers have been found in older adolescence to play a big part in career decision making (Paa & McWhirter, 2000). Like in other areas of functioning, peers might be more influential as adolescents age. At a later stage of adolescence they may begin to discuss more with peers such as 'Where are you going to college?" or "What are you going to do after graduation?"

HYPOTHESIS 2

A 2 (Gender) X 2 (parents' education) multivariate analysis of variance (MANOVA) was conducted to determine if differences in socioemotional functioning existed as a function of gender and parents' education (attended/graduated high school, attended/graduated college). The five socioemotional variables were the dependent variables and parents' education and gender were independent variables. Parents' education was calculated using the higher education level of either parent. For example, if the mother had a college education and the father had a high school education, then

mother's education was used to indicate parents' education. Wilks' lambda showed significant main effects for gender ($p < .05$) and parents' education ($p < .05$). The interaction effect was not significant.

A follow-up 2 (Gender) X 2 (parents' education) multivariate analysis of variance (MANOVA) was conducted to determine if differences in parent, peer, and teacher support existed as a function of gender and parents' education. Wilks' lambda showed no significant main effects for gender ($p = .08$) and parents' education ($p = .09$). The interaction effect was not significant.

The means and standard deviations of the five socioemotional variables and the three social support subscales by gender are presented in Table 2. Univariate analysis revealed significant main effects for gender on two of the five dimensions: prosocial behavior $F(1, 116)$, $p < .05$ and overall support $F(1, 115) = 7.76$, $p < .01$). Examination of means showed that females scored significantly higher than males on prosocial behavior ($M = 28.30$ versus 26.26) and overall support ($M = 83.53$ versus 77.30). There were no significant gender differences on self-efficacy, efficacy to face the future, self-esteem, and parent, teacher and peer support.

The findings of no significant difference in self-esteem as a function of gender in the present study was unexpected. This is because past research has consistently shown males to have a higher self-esteem than females (Knox, Funk, Elliot, & Bush, 1998; Nurmi, 2000; Raymore, Godbey, & Crawford, 1994; McCarthy & Hoge, 1982; O'Malley & Bachman, 1983; Harper, 1991; Quatman & Watson, 2001; Chubb, Fertman, & Ross, 1997). However, these studies have focused on late adolescence. Although, research has

Table 2

Means and Standard Deviations and F Values by Gender and Parents' Education

	Parents' Education					Gender				
	High School		College		F Value	Females		Males		F Value
Variables	M	SD	M	SD		M	SD	M	SD	
Self-esteem	29.41	5.50	32.23	5.32	5.52*	31.21	5.20	31.44	5.89	.03
Self-efficacy	16.24	2.96	17.53	2.08	5.69*	17.38	2.38	16.81	2.53	1.58
Prosocial Behavior	24.90	5.00	28.48	3.91	14.36***	28.30	3.90	26.26	5.06	5.73*
Efficacy to Face the Future	6.76	1.19	7.39	.86	8.25*	7.36	.92	7.00	1.09	2.17
Overall Support	75.90	13.53	82.77	10.13	7.78**	83.53	9.89	77.30	12.77	7.76**
Parent Support	19.26	4.67	21.33	3.45	5.87	21.49	3.26	19.74	4.51	3.94
Peer Support	38.29	5.97	40.86	5.75	3.16	41.45	5.82	38.47	6.94	5.60
Teacher Support	18.91	3.83	20.00	3.99	1.48	20.33	3.33	18.90	4.42	2.76

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

shown that elementary students have no gender differences in self-esteem (Bohan, 1973; Simmons & Rosenberg, 1975). The differences may not be distinct at this early age of adolescence. Self-esteem is thought to develop during the elementary and middle school years. Up until adolescence, children have few disturbances and adjustments (Wigfield & Eccles, 1994). Because of this calm period, children and young adolescents have consistent self-evaluations and gender differences are not prevalent due to similar experiences up to that point (Harter, 1990; Rosenberg, 1986; Simmons, Rosenberg, Rosenberg, 1993).

No significant difference was found on self-efficacy by gender in this study. However, past findings on this is mixed. While some researchers have found gender differences in self-efficacy (Lewis et al., 1999; Connolly, 1989; Patrick et al., 1997) others have found no significant gender difference (Chase, 2001). However, Lirgg (1991) found that gender differences in self-efficacy increased over time. Perhaps, then, the difference is not yet detectable in early adolescents. As youth approach late adolescence the differences might become more apparent. Bird and Williams' (1980) study might help provide a plausible explanation. Younger children (10-15 years of age), both male and female, gave the same attribution for their successful performance: effort. However, the older groups' (16-18 years of age) attributions were split by gender; the boys attributed performance to effort while the girls attributed performance to luck. Because boys and girls both reported effort at the earlier age, it must be that boys and girls have similar evaluations of their abilities to perform during this time (Lirgg, 1991).

The result of no gender difference on efficacy to face the future was not expected. Prior research has stated that women are more restricted than men in their career decision-making and the maintenance of a career (Farmer, 1985; Fitzgerald, Fassinger, & Betz, 1995). However, there is evidence that males and females do not differ on future plans (Paa & McWhirter, 2000; Tangri & Jenkins, 1986; Stevens et al., 1992). This is an indication that males and females feel similar about their personal control over their future. Tangri and Jenkins (1986) reported little difference between males' and females' educational aspirations and expectations. Females and males have also not differed in their ranking of the importance of a career (Stevens et al., 1992). Before the last couple of decades, this concept of efficacy to face the future may have looked very different for women (Farley, 1996). Perhaps women would have been lower than males due to societal pressures that women stay at home and do not pursue a career (Farley, 1996). Due to the rising importance of work roles for females, young women may not feel societal barriers in their choice of a career or perhaps, at this young age, the adolescents have yet to feel barriers that exist for women due to their inexperience in the workplace (Farley, 1996).

There exists a logical link between self-efficacy and efficacy to face the future that could offer support for the finding of no gender difference in efficacy to face the future. Since there is no gender difference on the self-efficacy dimension it may not be surprising to expect no gender difference on efficacy to face the future. It is possible that efficacy to face the future is a specific dimension of general self-efficacy. Self-efficacy relates to people's beliefs about "their capabilities to organize and execute courses of action required to attain designated types of performance" (Bandura, 1984, p. 391). It

perhaps follows then that if individuals do not think of themselves as effacious overall, they may not think of themselves as effacious in discrete areas (e.g. efficacy to face the future).

The present study indicates that females perceive themselves as more prosocial than males. This finding supports the substantial body of research showing significant gender differences in prosocial behavior (Tucker et al., 1999; Eberly & Montemayor, 1998; Eberly et al., 1993; Murphy et al., 1999; Fabes et al., 1999). Females have been reported in prior research as more prosocial than males (Block, 1983; Fabes & Eisenberg, 1996; Murphy et al., 1999; Eisenberg et al., 1996; Eberly & Montemayor, 1993, 1998). The literature consistently has suggested that this might be due to socialization factors. As mentioned earlier, girls are socialized to seek and build relationships as a part of their gender role, whereas males are socialized to focus on instrumental tasks (Block, 1983; Coon, 1992; Lombardo & Berzonsky, 1980). These encouraged behaviors might lead girls to be more affectionate and helpful than boys. Females in the current study perceived themselves as more prosocial than males perceived themselves. The study of adolescents' perceptions of their own behavior was important in this investigation of prosocial behavior. Previous studies examined parent or teacher reports of adolescents' prosocial behavior (Murphy et al., 1999; Eisenberg et al., 1996; Eberly et al., 1993).

Overall perceived social support was significantly different by gender. Females perceived higher overall social support than males. This, like the dimension of prosocial behavior may be due to the differing socialization patterns in males and females (Coon, 1992) Females are socialized to be focused on relationships and may therefore focus on

the interpersonal relationships they have with significant others. Males on the other hand may be more focused on instrumental tasks which result in their focus being on the task at hand (Block, 1983). Females then may focus more on their relationships with parents, peers and teachers than males. Although differences were not significant for parent, peer, and teacher support, females' scores on these three dimensions of social support were higher than males' scores. A point worthy of note is that overall support has rarely been studied in the research (Rosenfeld et al., 1998). Instead, past researchers have focused on specific dimensions of support (e.g. parental, peer and sometimes teacher as support sources). Not surprisingly, in those studies, females tend to report more parent, peer and teacher support than males (Beest & Baerveldt, 1999; Papini et al., 1990; Paa & McWhirter, 2000). However, those studies have focused on late adolescence. The findings of the current study show no significant difference in parental, peer, or teacher support as a function of gender. Societal pressures for girls to retract in their search for relationships may not begin to show a presence in girls' behavior until middle or late adolescence (Taylor et al., 1995). Perhaps the differences shown in past studies are not yet evident with this age group. This, then, may suggest the need for longitudinal studies to examine changes over time.

For parents' education, there were significant differences in self-esteem, ($F(1, 115) = 5.52$, $p < .05$), self-efficacy ($F(1, 116) = 5.69$, $p < .05$), prosocial behavior ($F(1, 116) = 14.36$, $p < .001$), overall support ($F(1, 115) = 7.78$, $p < .01$), and efficacy to face the future ($F(1, 116) = 8.25$, $p < .01$). .Differences in degrees of freedom are due to missing data. Examination of means showed that participants who reported their parents'

as having attended/graduated college had higher scores than participants who reported their parents' as attended/graduated high school on self-esteem (M= 32.23 versus 29.41), self-efficacy (M= 17.53 versus 16.24), prosocial behavior (M= 28.48 versus 24.90), overall support (M= 82.77 versus 75.90), and efficacy to face the future (M= 7.39 versus 6.76).

Participants in the current study who reported a parent attending/graduated college had higher self-esteem than participants who reported a parent attending/graduated high school. This indicates that participants with parents with a higher level of education report higher self-esteem than those participants with parents with a lower level of education. Significant positive associations between self-esteem and parents' education have been reported; the higher the parents' level of education, the higher the children's self-esteem (Demo & Savin-Williams, 1983; Richman, Clark, & Brown, 1985; Osborne & LeGette, 1982; Raymore, Godbey, & Crawford, 1994).

The results on parents' education is perhaps linked to social class. In fact, parents' income and education are assumed to be important indicators of social class (Scott-Jones & Turner, 1990) which has been found to influence various adolescent processes and subsequent adjustment. Therefore, students of parents with a higher level of education may benefit from help with school work at home, a private tutor or prep classes. Through this help, students may see progress that can lead to positive evaluations of the self. Those without this help may receive feedback that if they can't succeed on their own, then they failed which may lead to poor evaluations of the self (Woolfork, 1990; Mayhew & Lempers, 1998). Those with parents with a higher level of education may evaluate

themselves as good compared to those whose parents have a lower education and may not be able to help with homework. This could send a message of 'If you can't do it yourself, you're stupid'.

Those participants in the current study who reported their parents' education as higher scored higher on self-efficacy. Working conditions for parents can effect parenting behaviors. Poor parenting behaviors can subsequently effect self-efficacy through the lack of feedback children receive from parents (Whitbeck, Simons, Conger, & Wickrama, 1997; Hortacsu, 1995). Perhaps those parents with a higher education have more flexibility in their jobs, opportunities for advancement, more options in the business world, higher wages and better benefits. All of these constitute a less stressful work environment that can allow a parent to provide calm, rational support and guidance after work. Parents with a high school diploma or less may have fewer options for a job, less flexibility on the job, little chance for advancement, low wages, job insecurity, and often are involved in stressful service-related jobs or manual (factory) labor. All of theses factors have been shown to negatively effect parenting behaviors (Coon, 1992). The conditions are typical of economic stress which could manifest itself through decreased parental warmth, increased anger, and increased irritability (Elder, 1974; Elder & Caspi, 1988). Poor parenting behaviors decreases the amount of involvement from that parent (McHenry & Price, 1994). Children who witness this stress and inability to better the situation may, perhaps lower their own potential. Parents with a higher education have more opportunities to interact, model, and send positive feedback and encouragement to the child about their potential.

Perceived overall support, perceived prosocial behaviors, parent, peer, and teacher support and efficacy to face the future have rarely been investigated with regard to parents' education. The findings indicated a trend for participants reporting parents with a higher level of education to have higher overall support, perceived prosocial behaviors, and efficacy to face the future. Perhaps parents with a higher education are more versed in those competencies and therefore, more able to help their children develop in those areas of functioning. After all, more educated people are more likely to be future and goal oriented. They, therefore, may be more likely to model those behaviors of their children. Moreover, a college level education may have provided information on family and child development processes.

The current findings seem to support Bronfenbrenner's (1979) work on ecological theory. Thomas (1996) stated that there have not been many well-designed ecological studies. The present study provided support for the importance of the environment in children's functioning. The microsystem variables included parent, peer, and teacher support. The results indicated that there were significant positive relationships among the variables, but there were no differences in parent, peer, or teacher support as a function of parents' education. Future studies might include other persons such as a sibling or coach in the settings of the microsystem. In the mesosystem, which is the interaction between the dimensions of the microsystem, perceived parent, peer, and teacher supports were interrelated. In addition to Bronfenbrenner, other researchers have noted the importance of adolescents' perceptions of his or her functioning. Far too many studies have depended on others' perceptions of the adolescent rather than the adolescent's perception of reality

(Richman, Rosenfeld, & Bowen, 1998). Garbarino, Stott, and Faculty (1989) stated that school aged children, like the participants in the current study, can better articulate their thoughts and behavior than someone else can. This reiterates the importance of adolescent perceptions.

LIMITATIONS

There were some limitations to this study. One limitation was in the lack of causal connections, due to the nature of the study. Relationships were established among all variables, but which variables were impacting other variables is beyond the scope of this study. Another consideration is that this study did not identify the culture of the population. Bronfenbrenner's (1979) theory encompasses all of the direct and indirect influences on an adolescent. Bronfenbrenner suggested that studies include the macrosystem: the culture within which a person develops values and beliefs. Although a study of that magnitude would be difficult, it is important for future studies to investigate the role of broader cultural settings in the socioemotional processes of an adolescent. In addition, Bronfenbrenner emphasized the need to follow development over time. Because of the fluctuating emotions and evaluations of adolescents, it is important that more studies are conducted longitudinally. Because the present study was a cross-sectional design, developmental changes could not be examined. Thomas (1996) used the analogy of aiming at a moving target. The moving target refers to the ever changing adolescent. Throughout adolescence, there is substantial changes in development that occur. A cross-sectional study can only reveal what was happening at that moment. A longitudinal study

could reveal development and changes in socioemotional processes over time. Finally, the low reliability of self-efficacy was a problem in this study. Low reliability of a measure indicates that on repeated trials, the measure may not yield the same results (Carmines & Zeller, 1979). Item changes (additions or deletions) may help to improve the reliability of this measure. Another methodological issue relates to the efficacy to face the future measure possibly not fully representing all indicators of the concept. The current study represents one of the few attempts to examine efficacy to face the future. However, the validity of a scale with two items needs to be examined. Further, the original scale consisted of three items. The low reliability achieved for the current sample led to an item analysis which indicated that the two item scale would be a more useful measure since the reliability coefficient was improved with the reduction. More research is needed to determine if the two items capture the complete concept of efficacy to face the future. Therefore, interpretations of the results relating to this variable must be made with caution.

The contributions of this study lie mostly in its emphasis on early and middle adolescents, the examination of several socioemotional dimensions along the lines of gender and parents' education. The examination of perceived overall support and efficacy to face the future, and its focus on perceptions of adolescents is notable. Part of the relationships examined in this study were correlational. Because of the limitation inherent in correlational analysis, not many inferences can be made from the results, therefore this research raises questions about the influence these variables have on one another.

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APPENDIX

PRESS Scale In My Life

Part I .

The following sentences are about people in your life. There are no right or wrong answers since kids are very different from one another. These questions talk about two kinds of kids, and we want to know which kids are most like you. To answer each question, decide first whether you are more like the kids on the left side or if you are more like the kids on the right side. Once you have found which kind of kid you are most like, please decide whether that is either sort of true for you or really true for you and then mark that box. Please only choose one box. If you do not understand how to answer these questions, please raise your hand and your instructor will help you. The instructor will now go over the sample question with you.

SAMPLE

Really True for Me	Sort of True for Me			Sort of True for Me	Really True for Me
☐	☐	Some kids like peanut butter and jelly sandwiches	BUT	Other kids do not like peanut butter and jelly sandwiches ☐	☐

PRESS Scale of Resiliency

	Really True for Me	Sort of True for Me				Sort of True for Me	Really True for Me
1	☐	☐	Some kids have parents who don't really understand them	BUT	Other kids have parents who really do understand them	☐	☐
2	☐	☐	Some kids have classmates who like them the way they are	BUT	Other kids have classmates who wish they were different	☐	☐
3	☐	☐	Some kids have a teacher who helps them if they have a problem	BUT	Other kids don't have a teacher who helps them if they have a problem	☐	☐
4	☐	☐	Some kids have a close friend who they can talk to	BUT	Other kids don't have a close friend who they can talk to	☐	☐
5	☐	☐	Some kids have parents who don't seem to want to hear about their children's problems	BUT	Other kids have parents who do want to hear about their children's problems	☐	☐
6	☐	☐	Some kids have classmates that they can be friends with	BUT	Other kids don't have classmates that they can be friends with	☐	☐
7	☐	☐	Some kids don't have a teacher who helps them do their very best	BUT	Other kids do have a teacher who helps them to do their very best	☐	☐

	Really True for Me	Sort of True for Me				Sort of True for Me	Really True for Me
8	☐	☐	Some kids have a close friend who really understands them	BUT	Other kids don't have a close friend that really understands them	☐	☐
9	☐	☐	Some kids have parents who care about their feelings	BUT	Other kids have parents who don't seem to care very much about their children's feelings	☐	☐
10	☐	☐	Some kids have classmates who sometimes make fun of them	BUT	Other kids don't have classmates who make fun of them	☐	☐
11	☐	☐	Some kids do have a teacher who really cares about them	BUT	Other kids don't have a teacher who cares about them	☐	☐
12	☐	☐	Some kids have a friend who they can talk to about things that bother them	BUT	Other kids don't have a friend who they can talk to about things that bother them	☐	☐
13	☐	☐	Some kids have parents who treat their children like a person who really matters	BUT	Other kids have parents who don't usually treat their children like a person who really matters	☐	☐
14	☐	☐	Some kids have classmates who pay attention to what they say	BUT	Other kids have classmates who don't usually pay attention to what they say	☐	☐

	Really True for Me	Sort of True for Me				Sort of True for Me	Really True for Me
15	☐	☐	Some kids don't have teacher who is fair to them	BUT	Other kids do have a teacher who is fair to them	☐	☐
16	☐	☐	Some kids don't have a close friend who they like to spend time with	BUT	Other kids do have a close friend who they like to spend time with	☐	☐
17	☐	☐	Some kids have parents who like them the way they are	BUT	Other kids have parents who wish their children were different	☐	☐
18	☐	☐	Some kids don't get asked to play in games with classmates very often	BUT	Other kids often get asked to play in games by their classmates	☐	☐
19	☐	☐	Some kids don't have a teacher who cares if they feel bad	BUT	Other kids do have a teacher who cares if they feel bad	☐	☐
20	☐	☐	Some kids don't have a friend who really listens to what they say	BUT	Other kids do have a close friend who really listens to what they say	☐	☐
21	☐	☐	Some kids have parents who don't act like what their children do is important	BUT	Other kids have parents who do act like what their children does is important	☐	☐
22	☐	☐	Some kids often spend time alone	BUT	Other kids often spend time with their friends	☐	☐

	Really True for Me	Sort of True for Me			Sort of True for Me	Really True for Me
23	☐	☐	Some kids have a teacher who treats them like a person	BUT	Other kids don't have a teacher who treats them like a person	☐ ☐
24	☐	☐	Some kids don't have a close friend who cares about their feelings	BUT	Other kids do have a close friend who cares about their feelings	☐ ☐
25	☐	☐	Some kids have a special grown up who they can turn to for help (other than their parents)	BUT	Other kids do not have a special grown up who they can turn to for help	☐ ☐

Part III.

The following ten sentences describe feelings and attitudes a person might have about themselves. Please circle the number that corresponds with the extent to which each statement is true of you. Be as honest as you can.

	Strongly Disagree	Disagree	Agree	Strongly Agree
1. I feel that I'm a person of worth.	1	2	3	4
2. I feel that I have a number of good qualities.	1	2	3	4
3. All in all, Some times I feel like a failure.	1	2	3	4
4. I am able to do things as well as most other kids.	1	2	3	4
5. I feel that I do not have much to be proud of.	1	2	3	4
6. I have a positive attitude toward myself.	1	2	3	4
7. On the whole, I am satisfied with myself.	1	2	3	4
8. I wish I could have more respect for myself.	1	2	3	4
9. I feel useless at times.	1	2	3	4
10. At times I think I'm no good at all.	1	2	3	4

Part IV.

The following sentences are about how you might act or feel during different situations. Remember, there are no "right" answers. Please circle the answer that best applies to you.

1. I am sure that I can avoid risky situations in my life.

Not true at all Hardly true Somewhat true Very true

2. I am sure that I can tell my boyfriend/girlfriend that I don't want to do things that could place my future at risk.

Not true at all Hardly true Somewhat true Very true

3. I am sure that I can talk to my parents about my problems.

Not true at all Hardly true Somewhat true Very true

4. I am sure that I can avoid situations that may put my future goals at risk.

Not true at all Hardly true Somewhat true Very true

5. I am confident that my parents will love me no matter what I do.

Not true at all Hardly true Somewhat true Very true

6. I believe that I can reach my goals for the future.

Not true at all Hardly true Somewhat true Very true

7. I have a plan in my life to reach my goals.

Not true at all Hardly true Somewhat true Very true

8. When I have something unpleasant to do, I stick to it until I finish it.

Not true at all Hardly true Somewhat true Very true

Part V. Please read the following sentences and circle how often each sentences applies to you. Circle only one answer.

1. I talk to my teachers about things going on in my life.

Never Hardly ever Sometimes Usually

2. I ask questions in class.

Never Hardly ever Sometimes Usually

3. When I get mad at someone, I raise my voice.

Never Hardly ever Sometimes Usually

4. When I have a problem with one of my friends, I go to an adult for advice.

Never Hardly ever Sometimes Usually

5. I do things that are against the law.

Never Hardly ever Sometimes Usually

6. I get into arguments with others.

Never Hardly ever Sometimes Usually

7. When I have a problem with someone, I talk about it with them.

Never Hardly ever Sometimes Usually

8. There are times when I get so mad at a person I want to hurt them.

Never Hardly ever Sometimes Usually

9. I think about how I will reach goals in my life.

Never Hardly ever Sometimes Usually

10. I have a good sense of humor.

Never Hardly ever Sometimes Usually

Thank you for completing this survey. Please return it to your teacher.

VITA

Jennifer Marie Lipps was born in Cincinnati, Ohio on May 19, 1974. She graduated in the top 6% of her class in June, 1992 from Oak Hills High School. She entered Thomas More College in Crestview Hills, Kentucky during August 1992 where in May, 1996 she received a Bachelor of Arts Degree in Psychology and an Associate of Arts Degree in Sociology with honors. Her involvement at Thomas More earned her the Senior Service Award and Psi Chi Honor Society Presidency. After working in the human services field for two years in various roles, Jennifer entered the University of Tennessee's Child and Family Studies Department on assistantship at the Child Development Laboratories in the pursuit of a Master of Science degree. The Master of Science degree was received December, 2001.

Jennifer is presently working for Every Child Succeeds at Young Families, Inc in Northern Kentucky. She is a certified parent educator for first time families. She finds her strengths in providing education and counseling.