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YOUNG ADULTS' FELT OBLIGATION TOWARD PARENTS COPING WITH SERIOUS MENTAL ILLNESS OR ALCOHOLISM: A BRIEF REPORT

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A Brief Report

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Young Adults' Felt Obligation toward Parents Coping with Serious Mental Illness or Alcoholism Adult Children of Parents Coping with Mental Illness or Alcoholism

Research on the experiences of young adults with parents who are coping with serious mental illness and studies of individuals with parents coping with alcoholism are strikingly similar. Studies have indicated that young adult children of people with serious mental illness or alcoholism report lower self-esteem, higher levels of depression (Jacob & Windle, 2000), anxiety (Williams & Corrigan, 1992), and higher levels of drinking alcohol (Jacob & Windle, 2000; Neff, 1994) than comparison samples of young adults whose parents are not distressed. These young adults appear to encounter unique challenges as a result of growing up with a distressed parent. For example, they have reported higher levels of parentification than comparison samples, indicating they may forego their own needs in order to meet the needs of their parents and other family members (Chase, Deming, & Wells, 1998; Kelley et al., 2007). Additionally, these young adults have reported feeling compelled to be independent and self-reliant at a young age (Kinsella & Anderson, 1996).

Recently, research on young adults whose parents who experience mental illness or alcoholism has examined ways that these adults cope with their parents' conditions (Kinsella & Anderson, 1996; Hussong & Chassin, 2004). Yet, surprisingly little is known about the nature of relationships between young adults and parents with mental illness or alcoholism. Research on young adults' relationships with their parents is becoming increasingly important. Demographic trends indicate that now, more than ever before, parents and children have "longer years of shared lives" together (Bengston, 2001). Such substantial intergenerational overlap highlights the ongoing nature and relevance of adult child- parent relationships. The relationships that young

adults hold with their parents who experience alcoholism or mental illness may be central to understanding various aspects of their lives.

Understanding Felt Obligation of Adults Toward their Parents

Family obligation is one way to conceptualize parent-child relationships and has been described as the "glue' that connects generations" (Stein, 1992, p. 525). Felt obligation reflects a relational approach to adult-parent relationships, and differs from a filial responsibility approach to family obligation. Filial responsibility is the *attitudes* that adult children hold toward their responsibilities to their elderly parents (Cicirelli, 1990), while felt obligation is a series of practical "negotiated commitments" that are applied across time within a family context, not only when a parent is elderly (Stein, 1992). Thus, the duties performed by adult children for their parents are inextricable from the context of family relationships (Stein et al., 1998).

As a construct, felt obligation is comprised of five individual dimensions: 1) maintaining appropriate levels of contact, 2) avoiding interpersonal conflict, 3) engaging in personal sharing, 4) providing assistance, and 5) maintaining an appropriate level of self-sufficiency (Stein, 1992). This multifaceted construct emphasizes both connectedness and separateness aspects of adult parental relationships, and also encompasses common aspects of general definitions of family obligation, such as contact and providing assistance.

There are several advantages to using the construct of felt obligation to assess young adults' perspectives on their relationships with their distressed parents. First, the felt obligation construct has been validated in a variety of young adult samples, including Mexican-American young adults (Freeberg & Stein, 1996), a general Midwestern undergraduate population (Stein, 1992), and young adults with divorced parents (Stein & McAuliffe, in preparation).

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In addition, felt obligation as a construct appears sensitive to contextual differences in parent-child relationships. Typically, felt obligation to mothers is greater than felt obligation to fathers (Stein, 1992; Stein & McAuliffe, in preparation). In addition, research has indicated that women feel greater obligation to avoid conflict, maintain contact, personally share, and provide assistance to their parents than men do (Stein, 1992; Stein et al., 1998). Other contextual variables have also been shown to play a role in felt obligation. In an intergenerational sample, young adults reported feeling higher levels of felt obligation to their middle-aged parents than middle aged parents did toward elderly parents within the same families (Stein et al., 1998). In another study, Mexican-Americans reported more obligation to avoid conflict, provide assistance, and strive for self-sufficiency than did Anglo-Americans (Freeberg & Stein, 1996). Family context is important in understanding the family obligation of young adults with distressed parents. Assessing family obligation through the construct of felt obligation will allow for a nuanced exploration of these adult child-parent relationships.

Present Study

This study expands the present literature by examining felt obligation in a sample of young adults whose parents cope with alcoholism or mental illness and comparing their experiences of felt obligation to those of their peers with nondistressed parents. The purpose of this study was to explore whether parental distress predicted young adults' experience of overall felt obligation and the five facets of felt obligation: 1) maintaining appropriate levels of contact, 2) avoiding interpersonal conflict, 3) engaging in personal sharing, 4) providing assistance, and 5) maintaining an appropriate level of self-sufficiency.

Method

Sample

A total of 204 undergraduates from a midsized Midwestern university participated in this study. Participants were recruited through psychology and biology courses, and invitations to participate were extended to undergraduates who had participated in an earlier study of young adults whose parents experienced serious mental illness. Study announcements specified that any students were eligible to participate, but that the researcher was especially interested in the opinions of students who have "a parent with drinking problem or mental health issues such as major depression, bipolar disorder, or schizophrenia."

Most participants (n = 117) indicated that both of their parents were nondistressed (i.e., had never "been diagnosed with a mental illness" or "had a problem with drinking"). Eightyseven participants reported at least one distressed parent. Since it was important to understand the independent contributions of parental drinking and parental mental illness to young adults' experiences of felt obligation, data from participants who reported a parent with both drinking problems and mental illness (n = 7) were not used in further analyses. This resulted in a sample of 197.

In the selected sample, most participants were female (73%) and Caucasian (81%). Participants had a mean age of 19.74 years (SD = 1.36). All participants had living parents. Most participants (70%) came from intact families, and the remaining 30% reported divorced parents. Table 1 displays the distribution of parental gender and parental distress status. Of those participants with distressed parents, 18 participants reported mothers with serious mental illness, 16 participants reported mothers with a drinking problem, 8 participants reported fathers with a serious mental illness, and 50 participants reported fathers with a drinking problem.

Procedure and Measures

After providing informed consent, participants were directed to an online questionnaire containing demographic information and the following measures. Five dimensions of felt obligation toward one's parents were assessed by the 34-item Felt Obligation Measure (Stein, 1992). Participants reported their felt obligation toward each parent by responding to each item on a scale ranging from 1 (Rarely) to 5 (Very Often). Higher scores indicate higher levels of felt obligation.

In addition, because research has indicated that parental conflict can negatively impact young adults' relationships with their parents (Neighbors, Forehand, & Bau, 1997), the 49-item Children's Perception of Interparental Conflict scale (CPIC; Bickham & Fiese, 1997; Grych, Seid, & Finch, 1992), was used to assess the perceived levels of conflict experienced by young adults. Participants indicated whether each item on the CPIC, was true for them on a three-point scale ranging from 1 to 3. Higher scores are indicative of more negative forms of conflict and conflict appraisal. These measures have been previously validated in samples of young adults. Table 2 displays the means, standard deviations of these measures. Table 3 displays the correlations of these variables.

Results

Preliminary Analyses

Preliminary analyses were undertaken to determine if the participants in the present study reported experiences of felt obligation similar to those reported by other young adults. Repeated measures ANOVA was used to examine if felt obligation differed as a function of parental role. Parental role (mother, father) served as the within-subjects repeated measures. There was a significant multivariate effect for felt obligation as a function of parental role (Wilks' Lambda = .846, F(1, 196) = 35.55, p < .001; Partial Eta² = .15). Pairwise comparisons indicate that

obligation to mother (M = 3.67, SE = .74) was significantly higher than obligation to father (M =3.32, SE = .93).

A series of repeated measures ANOVAs were run to examine felt obligation to parents as a function of participants' demographic characteristics. In all models, parental role (i.e., mother, father) served as within-subjects repeated measures. In each model a different demographic characteristic (i.e., gender, ethnicity, religion, parents' marital status) served as the betweensubjects variable. The multivariate effect for parental role was found in all models. The models with participants' ethnicity and participants' religion as between-subjects variables yielded no significant main effects or interaction effects.

In the model with participants' gender as a between-subjects variable, there was a significant main effect for gender, F(1, 195) = 5.21, p < .05, Partial Eta² = .03. Pairwise comparisons indicate that women (M = 3.56, SE = .06) reported higher levels of obligation than men (M = 3.30, SE = .10).

In the model with parental marital status as a between-subjects variable, there was a significant main effect for parents' marital status on obligation, F(1, 195) = 6.33, p < .05, Partial Eta² = .03. Pairwise comparisons indicated that participants' reported higher overall obligation to married parents (M = 3.58, SE = .06) than to divorced parents (M = 3.29, SE = .09). There was also a significant interaction between parental role and parents' marital status, F(1, 195) =18.72, p < .001, Partial Eta² = .09, such that participants from intact families (M = 3.48, SE =.06) reported significantly more obligation to their fathers than participants from divorced families (M = 2.93, SE = .15), unequal variances t(79.15) = -3.33, p = .001.

Maternal Distress and Felt Obligation to Mothers

Hierarchical regression analyses were used to assess the contributions of maternal distress status on the variance in participants' felt obligation to their mothers beyond other factors. In the first step, participants' gender was entered. In the second step, parents' marital status and level of perceived interparental conflict were entered. In the third step, mother's status drinking status and mother's mental illness status were entered as two separate variables. Six models were run with these predictors; criterion were overall felt obligation and the five dimensions of felt obligation. Table 4 displays the results of the full hierarchical regression models.

When overall felt obligation was the criterion, the model containing gender was significant [F(1, 196) = 5.57, p < .05], such that being female predicted higher obligation to mothers. With obligation to provide assistance as the criterion, the model containing only gender was significant [F(1, 196) = 3.88, p = .05], such that being female predicted higher obligation to provide assistance to mothers. In the model with maintaining ritual and contact as the criterion, the full model was significant [F(5, 196) = 2.37, p < .05]; however, gender was the only significant predictor. Again, being female predicted higher obligation to maintain ritual and contact. Similarly, with the criterion of obligation to engage in personal sharing, the full model was significant [F(5, 196) = 2.30, p < .05], and being female predicted higher obligation to personally share with mothers. None of the models were significant when obligation to avoid conflict [full model: F(5, 196) = 1.53, p > .05] and obligation to maintain self-sufficiency [full model: F(5, 196) = .86, p > .05] were the criterion.

Paternal Distress and Felt Obligation

Similar to the analyses predicting felt obligation to mothers, hierarchical regression analyses were conducted to understand the variance in felt obligation to fathers that could be accounted for by paternal distress status. Table 5 displays the results of the full hierarchical regression models predicting felt obligation to fathers.

With overall felt obligation to father as the criterion, the full model was significant [F(5,196) = 5.51, p < .01]. Being from a divorced family and having a father with a drinking problem predicted lower overall felt obligation to fathers. Results were similar when obligation to avoid conflict with fathers was the criterion. The full model was significant [F(5, 196) = 6.30, p <.01], and being from a divorced family and having a father with a drinking problem predicted lower obligation to avoid conflict with fathers. With obligation to personally share with fathers as the criterion, the full model was significant [F(5, 196) = 3.97, p < .01]. Having a father with a drinking problem predicted lower obligation to personally share with him. With obligation to provide assistance to fathers as the criterion, the full model was significant [F(5, 196) = 7.07, p]<.01]. Having divorced parents, perceiving a higher level of interparental conflict, and having a father with a drinking problem were all significant predictors of lower obligation to provide assistance to fathers. The full model with obligation to maintain ritual and contact with fathers as the criterion was significant [F(5, 196) = 6.13, p < .01]. In this model, being female, having married parents, and having a father with a serious mental illness predicted higher obligation to maintain rituals and contact with fathers. None of the models with the criterion of obligation to maintain self-sufficiency were significant [full model: F(5, 196) = 2.16, p > .05].

Discussion

The purpose of the present study was to examine how parental distress contributes to young adults' experiences of felt obligation toward their parents. Results of preliminary analyses regarding demographic information and felt obligation were consistent with previous research (Stein, 1992; Stein et al., 1998; Stein & McAuliffe, in preparation). Specifically, in the present sample women reported more felt obligation toward their parents than did men, young adults from married families reported greater obligation to their parents than young adults from divorced families, and obligation to fathers from married families was significantly higher than obligation to fathers from divorced families.

Results indicate that women had higher obligation to their mothers across various dimensions of felt obligation. Results also suggest that young adults' reports of felt obligation to mothers could not be accounted for by family context variables of parents' marital status and interparental conflict, and was not predicted by maternal distress status (serious mental illness or alcoholism). These results suggest that young adults' felt obligation to their mothers is relatively constant, even in the face of major family stressors such as divorce, interparental conflict, and maternal problems with drinking and maternal mental illness.

Results further indicate that young adults' experience of felt obligation to their fathers is quite different and more nuanced than their experience of felt obligation to their mothers. Above and beyond participant gender and family context variables, reported paternal drinking predicted lower overall felt obligation to fathers and lower obligation to fathers across many dimensions of felt obligation, including an obligation to avoid conflict, to engage in personal sharing, and to provide assistance. Notably, paternal drinking did not predict obligation to maintain rituals and contact with fathers. Collectively, these findings suggest that young adults whose fathers have

drinking problems feel as strong of an obligation to stay in regular contact with their fathers as their peers whose fathers do not have problems with drinking. However, young adults whose fathers have drinking problems appear to feel less obligation to enact more emotional components of obligation, such as personally sharing, providing assistance, and avoiding conflict. Young adults whose fathers drink may feel obligated to "go through the motions" of maintaining regular contact, however, they seem to have less obligation to personally disclose their own problems with their fathers, provide their fathers with personal and emotional assistance, and act in compliance with their father's wishes. Thus, obligation to fathers who drink may have a more superficial quality than obligation to fathers who do not.

Young adults' reports of felt obligation to maintain ritual and contact was related to paternal mental illness, such that fathers with mental illness elicited greater obligation in their young adult children to maintain ritual and contact than fathers who drink or who were not distressed. It may be the case that young adults perceive fathers with mental illness as needing more regular contact compared to fathers without mental illness. However, these results are preliminary, given the small sample of young adults who reported fathers with mental illness. Further research is needed to better understand the nuances that characterize young adults' obligation to fathers with mental illness.

Overall, the results of the present study highlight the relative complexity of young adults' reports of felt obligation to fathers in comparison with felt obligation to mothers. Obligation to mothers appeared consistent, regardless of whether or not mothers experienced serious mental illness or problems with drinking. However, obligation to fathers was noticeably impacted by paternal distress, especially paternal drinking.

Limitations

The findings of the present study provide a description of felt obligation in the relationships between young adults and their distressed parents. However, the present study is limited in several respects. The sample of young adults with distressed parents was relatively small, particularly young adults who reported a parent with serious mental illness. Although findings in the present study were statistically significant, further research with larger, more diverse samples of young adults with distressed parents is needed to better understand the strength and generalizability of findings.

Additionally, the present study relied on young adults' reports of their parents' status of having mental illness or a problem with drinking. Young adults' perceptions of their parents may not accurately reflect parents' actual diagnoses of mental illness or alcohol problems. Yet, previous research (Williams & Corrigan, 1992) has utilized similar methods to identify young adults whose parents have mental illness or alcohol problems. And, research has suggested that a single-item question about parent's drinking status yields results consistent with a lengthier young adult interview regarding parent alcoholism (Cuijpers & Smit, 2001). Future research assessing parental mental health status through multiple methods is needed to better understand how to best ascertain parental mental health status from young adult children.

Implications and Directions for Future Research

The present study takes an important first step in describing differences in felt obligation toward parents in young adulthood as a function of parents' level of distress. Findings suggest that various factors, including divorce and paternal drinking, impact young adults' felt obligation to their fathers, while felt obligation to mothers appears relatively stable across a variety of

circumstances. However, these results are preliminary and additional research is needed to replicate these findings and examine their utility.

Given that adults spend a great deal of their lives in relationships with their parents (Bengston, 2001), further research is needed to assess the impact that felt obligation to distressed parents may have on both parents and young adult children. Specifically, future research could focus on understanding how obligation to one's parents and parental distress status may be related to young adults' psychological well-being. Similarly, research is needed to explore parents' perspectives on their relationships with their young adult children with regard to parental distress status. Such research is important in facilitating the design of psychological and systems-level interventions that are maximally beneficial for both the young adult children and their parents.

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Table 1

Crosstabulation of Parental Gender and Distress Status

	Maternal Distress Status									
	Nondistressed Drinking Problem Serious Mental Illness T									
Paternal Distress Status										
Nondistressed	117	11	11	139						
Drinking Problem	41	5	4	50						
Serious Mental Illness	5	0	3	8						
Total	163	16	18	197						

Table 2

Descriptive Statistics of Felt Obligation Measure (FOM) and Interparental Conflict Measure

Measure	Mean	SD
Overall Felt Obligation to Mother	3.67	.74
FOM Ritual and Contact with Mother	3.64	.85
FOM Avoid Conflict with Mother	3.72	.81
FOM Provide Assistance to Mother	4.02	.86
FOM Self Sufficiency from Mother	3.53	.74
FOM Personal Sharing with Mother	3.45	.98
Overall Felt Obligation to Father	3.32	.93
FOM Ritual and Contact with Father	3.31	1.07
FOM Avoid Conflict with Father	3.45	.98
FOM Provide Assistance to Father	3.52	1.09
FOM Self Sufficiency from Father	3.33	.87
FOM Personal Sharing with Father	2.88	1.07
Children's Perceived Interparental Conflict	1.64	.40

Table 3

Correlation Matrix of Felt Obligation Measure (FOM) and Interparental Conflict Measure

-	1	2	3	4	5	6	7	8	9	10	11	12	13
1. Overall Felt Obligation to Mother													
2. FOM Ritual and Contact with Mother	.90**												
3. FOM Avoid Conflict with Mother	.91**	.75**											
4. FOM Provide Assistance to Mother	.90**	.74**	.76**										
5. FOM Self Sufficiency from Mother	.87**	.70**	.77**	.73**									
6. FOM Personal Sharing with Mother	.87**	.74**	.74**	.76**	.65**								
7. Overall Felt Obligation to Father	.53**	.51**	.44**	.45**	.47**	.47**							
8. FOM Ritual and Contact with Father	.50**	.59**	.38**	.40**	.40**	.42**	.93**						
9. FOM Avoid Conflict with Father	.46**	.41**	.44**	.38**	.40**	.41**	.95**	.84**					
10. FOM Provide Assistance to Father	.45**	.40**	.36**	.44**	.40**	.40**	.94**	.83**	.87**				
11. FOM Self Sufficiency from Father	.53**	.47**	.43**	.46**	.55**	.45**	.91**	.78**	.85**	.82**			
12. FOM Personal Sharing with Father	.48*	.43**	.41**	.39**	.42**	.50**	.88**	.78**	.78**	.80**	.72**		
13. Children's Perceived Interparental Conflict $p < 0.05$; ** $p < .01$	03	06	00	07	.07	10	18**	19**	17*	25**	08	14	

Table 4

Hierarchical Linear Regressions Predicting Dimensions of Felt Obligation to Mothers

Criterion	Predictor and Step	В	SE B	β	R^2	ΔR^2
Overall Felt	Obligation					
	Step 1.				.028	.028*
	Participant Gender ^a	.306	.120	.183		
	Step 2				.029	.001
	Parents' Marital Status ^b	002	.122	001		
	Interparental Conflict	017	.142	009		
	Step 3				.040	.012
	Maternal Mental Illness ^c	269	.187	104		
	Maternal Drinking ^d	130	.197	048		
Maintain Ri	tual and Contact					
	Step 1.				.032	.031*
	Participant Gender ^a	.381	.137	.198*		
	Step 2				.035	.003
	Parents' Marital Status ^b	017	.139	009		
	Interparental Conflict	050	.162	024		
	Step 3				.058	.023
	Maternal Mental Illness ^c	340	.212	115		
	Maternal Drinking ^d	368	.224	118		
Avoid Conf	lict					
	Step 1				.017	.017
	Participant Gender ^a	.277	.130	.153*		
	Step 2				.017	.000
	Parents' Marital Status ^b	.022	.132	.012		
	Interparental Conflict	.029	.154	.014		
	Step 3				.039	.021
	Maternal Mental Illness ^c	403	.203	145*		
	Maternal Drinking ^d	.059	.213	.020		
Engage in P	Personal Sharing					
Ziiguge iii I	Step 1				.032	.032*
	Participant Gender ^a	.429	.158	.194*	.002	.002
	Step 2	>	.100	.15	.041	.009
	Parents' Marital Status ^b	.025	.160	.012		
	Interparental Conflict	160	.187	065		
	Step 3				.057	.015
	Maternal Mental Illness ^c	335	.245	098		
	Maternal Drinking ^d	329	.258	092		
	-					

Provide Assistance					
Step 1				.020	.020*
Participant Gender ^a	.288	.140	.148*		
Step 2				.025	.005
Parents' Marital Status ^b	036	.142	019		
Interparental Conflict	132	.166	061		
Step 3				.031	.006
Maternal Mental Illness ^c	179	.218	060		
Maternal Drinking ^d	180	.230	057		
Maintain Self Sufficiency					
Step 1				.012	.012
Participant Gender ^a	.194	.120	.117		
Step 2				.018	.006
Parents' Marital Status ^b	002	.122	001		
Interparental Conflict	.137	.142	.075		
Step 3				.022	.004
Maternal Mental Illness ^c	118	.187	046		
Maternal Drinking ^d	.112	.197	.042		

^a 0 = male, 1 = female; ^b 0 = separated/divorced, 1 = married; ^c 0 = no mental illness, 1 = mental illness; ^d 0 = no drinking problem, 1 = drinking problem *p < .05, **p < .01

Table 5

Hierarchical Linear Regressions Predicting Dimensions of Felt Obligation to Fathers

Criterion	Predictor and Step	В	SE B	β	R^2	ΔR^2
Overall Felt	Obligation					
	Step 1.				.015	.015
	Participant Gender ^a	.186	.143	.089		
	Step 2				.081**	.096
	Parents' Marital Status ^b	.395	.149	.195**		
	Interparental Conflict	209	.171	090		
	Step 3				.030*	.126
	Paternal Mental Illness ^c	.448	.325	.095		
	Paternal Drinking ^d	305	.154	143*		
Maintain Rit	ual and Contact					
	Step 1.				.027	.027*
	Participant Gender ^a	.329	.163	.137*		
	Step 2				.111	.097**
	Parents' Marital Status ^b	.460	.170	.197**		
	Interparental Conflict	311	.195	117		
	Step 3				.138	.116*
	Paternal Mental Illness ^c	.739	.371	.137*		
	Paternal Drinking ^d	212	.176	087		
Avoid Confli	ict					
	Step 1				.009	.009
	Participant Gender ^a	.138	.149	.063		
	Step 2				.109	.100**
	Parents' Marital Status ^b	.517	.155	.242**		
	Interparental Conflict	140	.179	057		
	Step 3				.142	.032*
	Paternal Mental Illness ^c	.366	.340	.074		
	Paternal Drinking ^d	370	.161	164*		
Engage in Pe	ersonal Sharing					
86.	Step 1				.002	.002
	Participant Gender ^a	.026	.169	.011		
	Step 2				.044	.042*
	Parents' Marital Status ^b	.271	.175	.116		-
	Interparental Conflict	150	.202	056		
	Step 3				.088	.043*
	Paternal Mental Illness ^c	.361	.384	.066		-
	Paternal Drinking ^d	495	.182	201**		
	\mathcal{E}					

Provide Assistance					
Step 1				.015	.015
Participant Gender ^a	.277	.165	.092		
Step 2				.131	.116**
Parents' Marital Status ^b	.498	.172	.209**		
Interparental Conflict	411	.197	151*		
Step 3				.156	.025
Paternal Mental Illness ^c	.324	.376	.059		
Paternal Drinking ^d	369	.178	147*		
Maintain Self Sufficiency					
Step 1				.011	.011
Participant Gender ^a	.161	.139	.082		
Step 2				.037	.026
Parents' Marital Status ^b	.229	.145	.121*		
Interparental Conflict	061	.167	028		
Step 3				.052	.016
Paternal Mental Illness ^c	.372	.317	.085		
Paternal Drinking ^d	117	.150	089		

 $^{^{}a}$ 0 = male, 1 = female; b 0 = separated/divorced, 1 = married; c 0 = no mental illness, 1 = mental illness; d 0 = no drinking problem, 1 = drinking problem

^{*}p < .05, **p < .01