

# Relationship Quality with Parent, Daughter Role Salience, and Self-Esteem of Daughter Caregivers

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**SUMMARY.** This study examined the effects of two aspects of relationship quality with parent (relationship strain and affective closeness) on daughter caregivers' self-esteem, and whether their effects are moderated by daughter role salience. Cross-sectional data from 137 married daughter caregivers with children were analyzed. Hierarchical regression analysis shows that relationship strain has negative effects on the daughters' self-esteem, regardless of daughter role salience, whereas the positive effects of affective closeness on self-esteem are stronger for

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daughters whose daughter role is salient than for those less salient. The findings have implications for how practitioners can help married daughters manage relationship strain with their parents, examine the personal meaning of their daughter role, and bolster their own self-esteem while engaged in parent care. [Article copies available for a fee from The Haworth Document Delivery Service: 1-800-HAWORTH. E-mail address: <docdelivery@haworthpress.com> Website: <<http://www.HaworthPress.com>> © 2005 by The Haworth Press, Inc. All rights reserved.]

**KEYWORDS.** Caregiving, intergenerational relationships, identity salience

### ***INTRODUCTION***

Past research has suggested that adult women with a surviving parent are likely to become caregivers to their parents (Brody, 1985; Himes, 1994). Numerous studies have examined the stress of parent care on adult daughters' well-being, indicated by depressive symptoms, anxiety, and physical health (e.g., Dura, Stukenberg, & Kiecolt-Glaser, 1991; Li, Seltzer, & Greenberg, 1999). Relatively few, however, have investigated specifically whether the parent care experience influences the self-esteem of adult daughters, although self-esteem has often been employed as an unmeasured construct in interpretations of the stress-distress process (Lee & Shehan, 1989; Thoits, 1991).

In this study, we investigate whether the quality of the relationship with the parent in a caregiving context is associated with the self-esteem of daughter caregivers. To assess the quality of relationship, we examine two aspects of relationship quality between daughters and parents: affective closeness and relationship strain. Further, we examine whether the salience of the daughter role moderates the association between these two aspects of relationship quality and the daughters' self-esteem.

To explore how the caregiving context may influence self-esteem, we will utilize identity theory and the life course perspective. Theorists have suggested that the self-concept is composed of multiple identities (Rosenberg, 1979; Stryker, 1980). *Identities* refer to self-in-role meanings and "are claimed and sustained in reciprocal role relationships" (Thoits, 1983, p. 175; Atkinson, 1989). Stryker (1980) notes that identities within the self-concept are organized hierarchically on the basis of salience. The more salient identities are those that the individual values

more, and which would, if threatened, have more detrimental effects on the self-concept. The idea of identity salience is similar to the concept of psychological centrality proposed by Rosenberg (1979). Indeed, Rosenberg and Pearlin (1978) illuminate how self-esteem is related to central vs. peripheral axes of self-concept in the following passage:

Some elements of the self-concept are at the center of attention, at the heart of the individual's major concerns, others are at the periphery. . . . Thus, the impact of any given component on global self-esteem will depend on its importance or unimportance, centrality or periphery, in the individual's cognitive structure. (p. 67)

In relation to our parents, each of us has a child identity. According to the life course perspective, the salience of the child identity within an individual should vary across the life span (Atkinson, 1989). For instance, among young girls, the child (daughter) identity may be a primary component of their self-concept because few other identities have developed. As women enter adulthood and acquire other social roles, such as wife and mother, the psychological importance of the daughter identity may decrease. However, when the parent becomes dependent and needs care, the salience of the daughter identity may again emerge, partly because of increased interactions with the parent during caregiving, and partly because of the threat of losing the parent (Cicirelli, 1991). In other words, in a caregiving context, the daughter's self-esteem may be more sensitive to the relationship with her parent, due to the increased salience of the daughter identity, which the caregiving context brings to the fore.

Indeed, past studies of the general population have shown a concurrent association between the psychological well-being of adult children and relationship quality with their aging parents (Barnett, Kibria, Baruch, & Pleck, 1991; Umberson, 1992; Welsh & Stewart, 1995), suggesting that parents continue to play a significant role in adult children's lives. Studies of adult child caregivers have also shown that a better relationship with the parent care recipients is related to more caregiving effectiveness, and less caregiving stress, burden, and depressive symptoms of adult child caregivers (Carpenter, 2001; Townsend & Franks, 1995; Walker, Martin, & Jones, 1992).

### ***IDENTITY SALIENCE HYPOTHESIS***

Although the daughter identity may be more salient at the stage when the parent needs care compared to other periods of adulthood, individual variations among daughter caregivers in the salience of the daughter role are expected, as accumulating literature suggests that individuals differ in the importance they attach to the roles they occupy (Krause, 1994; Thoits, 1992). As mentioned earlier, theorists have argued that experiences encountered in relation to a salient role would have a stronger psychological impact than those related to a less salient role. This proposition has been referred to as *identity salience hypothesis* and has been tested in a number of past studies, mostly in the context of role stress (Krause, 1994; Martire, Stephens, & Townsend, 2000; Simon, 1992; Thoits, 1992). Mixed support for this hypothesis has been reported, however. For instance, Simon found that salience of the parental identity increases one's vulnerability to parental strains, but Thoits (1992) did not find identity salience to moderate the effect of perceived stress in a role-identity domain on psychological distress.

While spanning different roles, these past studies have one distinct thread in common: they have focused on stressful or negative role experiences in testing the identity salience hypothesis. Whether and how the effects of positive role experience are conditioned by identity salience, however, have rarely been examined. If identity salience increases one's vulnerability to role stress because it threatens a valued aspect of self (Burke, 1991; Thoits, 1991), then it should amplify one's benefit from positive role experience because a valued aspect of one's self-concept is affirmed. To our knowledge, this amplification hypothesis has not been tested in previous studies.

### ***RELATIONSHIP QUALITY WITH PARENT***

In the present study, we examine both the positive and negative aspects of the daughter-parent relationship, as experienced by daughter caregivers. The positive aspect refers to the daughter's feelings of closeness to her parent, and the negative aspect refers to the daughter's feelings of strain in the interaction with the parent. A close parent-child relationship has been suggested as indicating a strong attachment bond, and should provide the daughter a sense of security and comfort, as well as affirmation of self (Atkinson, 1989). A close relationship with the parent is also socially valued and reinforced.

On the contrary, relationship strain with the parent is against social norms regarding parent-child relationships. To daughter caregivers, in particular, the increased interactions associated with a strained parent relationship may serve as an uncomfortable reminder of the tension resonating within the daughter identity. Here, we address the extent to which daughter caregivers' feelings of closeness and strain in the relationship with their parents are associated with their self-esteem, and the moderating role of daughter role salience in the association between these two aspects of relationship quality and self-esteem.

### ***HYPOTHESES***

Four hypotheses are tested in this study.

1. Relationship strain is negatively associated with the self-esteem of daughter caregivers.
2. The negative association of relationship strain and self-esteem is stronger for daughters whose daughter role is highly salient than those less salient.
3. Affective closeness is positively associated with the self-esteem of daughter caregivers.
4. The positive association of affective closeness and self-esteem is stronger for daughters whose daughter role is highly salient than those less salient.

### ***METHODS***

#### ***Sample***

The data for this analysis were taken from the second wave of a longitudinal study of women in Wisconsin entitled Well-Being of Women (WBW). We focused on the Wave 2 point of data collection because the question about daughter role salience was not asked at Wave 1.

The WBW study sample was recruited through a probability sampling procedure. In 1991, using random-digit dialing procedures, the State of Wisconsin Bureau on Aging identified two probability samples: 2,250 persons aged 60 or older, and 500 persons younger than 60 who provided care to a relative older than 60. To ensure a sufficiently large pool of caregivers for the study, the base was supplemented with

an additional 1,000 households, also obtained through random-digit dialing procedures. For additional details about the sampling plan, see Li, Seltzer, and Greenberg (1999).

We telephoned these persons in 1993 to determine their current caregiving status. A daughter was classified as a caregiver if she provided assistance to a parent, aged 60 or older, due to his or her aging or disability, with at least one of the following tasks: housework, preparing meals, managing finances, yard work, shopping, taking medications, getting around inside the house, eating, dressing, bathing, using the toilet, getting in and out of bed, and remembering things. Of those who met the study criteria, 79.3% agreed to participate.

At Wave 1, 211 daughters with living biological parents were interviewed. By Wave 2, 37 parents had died and 5 daughters refused to be re-interviewed, leaving 169 daughters in the WBW study. For the present analysis, we selected only daughters who were also mothers and were married at Wave 2. We made this decision for two reasons: First, the vast majority of the WBW sample were married (85%) and had children (92%); and second, the measure of daughter role salience was based on a question that asked about perceptions of important family roles. To limit the study sample to daughter caregivers who were married and were mothers ensured that all sample members occupied the same primary family roles, thereby reducing the possibility of measurement artifact. Consequently, the final sample for this analysis was 137.

Table 1 presents the characteristics of the study sample. The daughters averaged 59 years of age. Virtually all were white (96%). Fewer than half (45%) had attended college and about half (50%) were employed. Their average household income in 1995 was \$47,737. The daughters had provided care to their parents for an average of 8 years and about 4% were caring for both parents.

The parents of these daughters averaged 85 years old, and were mostly mothers (84%). The majority were widowed (80%) and only 17% were still married. The parents had various major conditions that resulted in the need for care, such as Alzheimer's disease (22%), arthritis (11%), heart trouble (10%), walking difficulty (7%), and blindness (6%). Most of the parents (56%) lived in their own homes, about one-fifth (21%) lived in a nursing home or institutional setting, and only a minority (6%) lived with their daughter caregivers.

TABLE 1. Sample Characteristics

| <b>Characteristics of Daughters</b> |        |
|-------------------------------------|--------|
| Age (mean years)                    | 58.8   |
| White (%)                           | 95.6   |
| Education (%)                       |        |
| < high school                       | 6.6    |
| high school graduate                | 54.7   |
| some college                        | 29.2   |
| bachelor's degree or more           | 16.1   |
| Employed (%)                        | 50.4   |
| Income (mean \$)                    | 47,737 |
| Duration of care (mean years)       | 8.2    |
| Caring for both parents (%)         | 3.6    |
| <b>Characteristics of Parents</b>   |        |
| Age (mean years)                    | 85.2   |
| Female (%)                          | 84.0   |
| Marital status (%)                  |        |
| Married                             | 16.8   |
| Widowed                             | 80.3   |
| Divorced                            | 2.9    |
| Reason for care (%)                 |        |
| Alzheimer's disease                 | 21.8   |
| Arthritis                           | 11.3   |
| Heart trouble                       | 9.8    |
| Walking difficulty                  | 6.8    |
| Blindness                           | 6.0    |
| Others                              | 44.3   |
| Living arrangement (%)              |        |
| Own home                            | 56.2   |
| Nursing home                        | 21.2   |
| With daughter caregiver             | 5.8    |
| Others                              | 16.8   |

### **Data Collection and Measures**

Data were collected by personal interviews with the daughters, primarily in their homes. The key study variables were measured as follows:

*Relationship Strain.* Five items from the Zarit Burden Interview (Zarit, Reever, & Bach-Peterson, 1980) were used to indicate strains in the relationship between the daughter caregiver and her parent. These five items asked the daughter the extent to which she felt strained, angry, guilty, resentful, and nervous or depressed in the interaction with

her parent. Each item was rated from not at all (1) to extremely (3). The relationship strain measure was obtained through an exploratory factor analysis using Wave 1 data and a confirmatory factor analysis using Wave 2 data (data available from the first author). The alpha reliability of the relationship strain scale in this sample was .86.

*Affective Closeness.* Affective closeness with the parent was assessed with 5 items from the Positive Affect Index, which has been used widely in studies of intergenerational relationships (Bengtson & Black, 1973). The items ask how much the daughter understands, trusts, is fair to, respects, and has affection for her parent. Each item was rated from not at all (1) to extremely (6). Alpha reliability of the affective closeness scale in this sample was .83.

*Daughter Role Salience.* Daughter caregivers were asked to list and rank up to 3 of their most important family roles at the time. Almost half of the daughters (46%) did not include the role of daughter in any of these roles. This skewed distribution led us to dichotomize the daughter role salience variable, with coding 1 for daughters who included the daughter role in their important family roles and 0 for those who did not.

*Control Variables.* Our decision about control variables was informed by previous literature (Harter, 1990; Lee & Shehan, 1989; Reitzes & Mutran, 1994) as well as preliminary data analysis. Correlation coefficients were computed between self-esteem and 20 background variables, including socio-demographic variables of the daughters (e.g., age, education, income, employment status, grandmother status), their level of social participation and marital satisfaction, as well as the parents' socio-demographic characteristics (e.g., gender, living arrangement) and impairment levels (e.g., cognitive limitations, behavioral problems). Background variables that had a significant correlation ( $p < .05$ ) with self-esteem were included as control variables. Consequently, four variables were chosen: Education, measured dichotomously (0 = no college, 1 = some college or more); grandmother status (0 = no grandchildren, 1 = one or more grandchildren); self-rated health from 1 = poor to 4 = excellent; and marital satisfaction which was measured with an index of 17 items from the Marital Satisfaction Questionnaire for Older Persons (Haynes, Floyd, Lemsky, Rogers, Winemiller, Heilman, Werle, Murphy, & Cardone, 1992). Each item was rated from very dissatisfied (1) to very satisfied (6). The scale had an alpha of .97.

*Self-Esteem.* The dependent variable, self-esteem, was measured by the Rosenberg Self-Esteem Scale (Rosenberg, 1965). The scale consists of 10 items that require respondents to report feelings about the

self. A sample item is “I feel I have a number of good qualities.” Each item was rated on a 4-point Likert scale from strongly disagree (1) to strongly agree (4). The alpha reliability of the scale was .87.

### ***Data Analysis***

Zero-order correlation was used to examine the bivariate relationships of all study variables, with particular interest in the correlation between the two dimensions of relationship quality with parent (i.e., relationship strain and affective closeness). We also compared the two groups of daughters—those for whom the daughter role was salient and those for whom it was not salient—on all study variables. To examine the main and moderating effects of the two dimensions of relationship quality and daughter role salience, hierarchical linear regression was conducted. Relationship strain and affective closeness were analyzed in separate models first, due to their high correlation. Three successive blocks of independent variables were entered to predict the self-esteem of daughter caregivers: first control variables and daughter role salience (Model 1), then relationship quality variable, as measured by either relationship strain or affective closeness (Model 2), and lastly, a multiplicative term of relationship quality  $\times$  daughter role salience (i.e., either relationship strain  $\times$  daughter role salience or affective closeness  $\times$  daughter role salience) (Model 3). The two relationship quality variables were centered before forming the multiplicative terms (Aiken & West, 1991). The main effects of relationship quality on the daughter’s self-esteem were tested in Models 2, while the moderating effects of daughter role salience were tested in Models 3. In order to examine whether the two dimensions of relationship quality have independent effects on self-esteem, we also conducted an analysis with both relationship strain and affective closeness as simultaneous predictors of self-esteem, which was reported after the separate analyses. Note that our use of the term *effects* in this study implies associations rather than causal relationships, as our data are cross-sectional in nature.

## ***RESULTS***

### ***Descriptive Findings***

Table 2 presents the mean and standard deviation of each study variable, as well as the zero-order correlation among them. Note that the

TABLE 2. Means, Standard Deviations, and Zero-Order Correlations of Study Variables (N = 137)

|                           | 1      | 2      | 3    | 4    | 5    | 6   | 7    | M (SD)        |
|---------------------------|--------|--------|------|------|------|-----|------|---------------|
| 1. Self-esteem            | –      |        |      |      |      |     |      | 34.48 (4.63)  |
| 2. Relationship strain    | -.28** | –      |      |      |      |     |      | 6.85 (2.01)   |
| 3. Affective closeness    | .17    | -.66** | –    |      |      |     |      | 24.90 (3.68)  |
| 4. Daughter role salience | -.03   | .03    | -.15 | –    |      |     |      | .46 (.50)     |
| 5. Education              | .22**  | -.11   | .03  | -.02 | –    |     |      | .45 (.50)     |
| 6. Grandma                | .21*   | .01    | -.03 | .12  | -.11 | –   |      | .62 (.49)     |
| 7. Health                 | .17*   | -.10   | -.03 | .15  | .03  | .07 | –    | 3.06 (.63)    |
| 8. Marital satisfaction   | .24**  | -.10   | .18* | -.04 | -.00 | .04 | .18* | 81.02 (16.60) |

Note. \* $p < .05$ ; \*\* $p < .01$  (2-tailed)

means of relationship strain (6.85 out of a possible range of 5-15) and affective closeness (24.90 out of a possible range of 5-30) are at the low and high end of their scales, respectively, which suggests that most daughters feel more positively than negatively in the relationship with their parents. When using the means of relationship strain and affective closeness to divide our sample into high and low levels in each of these variables, we found a mixed pattern of feelings toward their parents among the daughters: 45% were high in closeness and low in strain, 29% high in strain and low in closeness, 15% high in closeness and high in strain, and 11% low in closeness and low in strain.

The two dimensions of relationship quality—relationship strain and affective closeness with parent—have a relatively high negative correlation ( $r = -.66$ ), suggesting that they are dependent on each other. Yet each has some unique variance that is not shared by the other. Both dimensions of relationship quality are correlated with self-esteem of the daughters. Daughter role salience, however, is not correlated significantly with self-esteem, nor with either dimension of relationship quality. We compared the two groups of daughters (i.e., daughter role salient and daughter role not salient) on all study variables and the 20 background variables used to determine control

variables mentioned earlier (e.g., daughter's age and employment status, parent's cognitive limitations and behavioral problems) and found that they do not differ significantly on any of these variables (results not shown here).

### *Relationship Strain with Parent and Self-Esteem of Daughter Caregivers*

We conducted multiple regression analysis to examine the main effects of relationship strain on the daughters' self-esteem, and whether its effects are moderated by daughter role salience, controlling for education, grandmother status, self-rated health, and marital satisfaction of the daughters. The results are presented in Table 3. Model 1 has only the control variables and daughter role salience as predictors. In Model 2 the relationship strain variable was added, which is statistically significant and explains an additional 5% of the variance of the daughters'

TABLE 3. Effects of Relationship Strain with Parent on Self-Esteem of Daughter Caregivers

| Independent Variables                           | Model 1               |           | Model 2      |         | Model 3      |         |
|---|-----------------------|-----------|--------------|---------|--------------|---------|
|   | b (s.e.) <sup>a</sup> | $\beta^b$ | b (s.e.)     | $\beta$ | b (s.e.)     | $\beta$ |
| Education<br>(1 = some college or more)         | 2.23 (.74)**          | .24       | 2.01 (.73)** | .21     | 1.94 (.73)** | .21     |
| Grandma<br>(1 = grandmother)                    | 2.16 (.77)**          | .23       | 2.16 (.75)** | .23     | 2.16 (.75)** | .23     |
| Health<br>(1-4, poor to excellent)              | .87 (.61)             | .12       | .73 (.59)    | .10     | .81 (.60)    | .11     |
| Marital satisfaction                            | .06 (.02)*            | .21       | .05 (.02)*   | .19     | .05 (.02)*   | .19     |
| Daughter role salience<br>(1 = salient)         | .59 (.75)             | .06       | .51 (.73)    | .06     | .53 (.73)    | .06     |
| Relationship strain                             | –                     | –         | –.52 (.18)** | –.23    | –.35 (.24)   | –.25    |
| Relationship strain<br>X Daughter role salience | –                     | –         | –            | –       | –.40 (.37)   | –.09    |
| R <sup>2</sup>                                  | .17                   |           | .22          |         | .23          |         |
| $\Delta R^2$                                    |                       |           | .05**        |         | .01          |         |

Note. \*p < .05; \*\*p < .01 (2-tailed)

<sup>a</sup>Unstandardized regression coefficients (standard errors)

<sup>b</sup>Standardized regression coefficients. The Friedrich (1982) approach was used to obtain the standardized solutions, as suggested by Aiken and West (1991) for regression equations that involve interaction terms.

self-esteem. The multiplicative term, relationship strain  $\times$  daughter role salience, was added in Model 3 and is not statistically significant. F-ratio test indicates that Model 3 is not significantly different from Model 2. Thus, the results do not support the identity salience hypothesis; rather, relationship strain has negative effects on the daughters' self-esteem, regardless of the salience of the daughter role. Other predictors of self-esteem include education, grandmother status, and marital satisfaction of the daughter-daughters who have college or more education, are grandmothers, and are more satisfied with their marital relationship have higher self-esteem.

### *Affective Closeness with Parent and Self-Esteem of Daughter Caregivers*

The multivariate analysis of affective closeness is presented in Table 4. Following the same procedure used for relationship strain, we first examined the main effect of affective closeness on self-esteem (Model 2)

TABLE 4. Effects of Affective Closeness with Parent on Self-Esteem of Daughter Caregivers

| Independent Variables                           | Model 1               |           | Model 2      |         | Model 3      |         |
|---|-----------------------|-----------|--------------|---------|--------------|---------|
|   | b (s.e.) <sup>a</sup> | $\beta^b$ | b (s.e.)     | $\beta$ | b (s.e.)     | $\beta$ |
| Education<br>(1 = some college or more)         | 2.23 (.74)**          | .24       | 2.20 (.74)** | .24     | 2.17 (.72)** | .23     |
| Grandma<br>(1 = grandmother)                    | 2.16 (.77)**          | .23       | 2.17 (.76)** | .23     | 2.22 (.75)** | .23     |
| Health<br>(1-4, poor to excellent)              | .87 (.61)             | .12       | .91 (.60)    | .12     | 1.06 (.59)   | .14     |
| Marital satisfaction                            | .06 (.02)*            | .21       | .05 (.02)*   | .19     | .05 (.02)*   | .18     |
| Daughter role salience<br>(1 = salient)         | .59 (.75)             | .06       | .43 (.75)    | .05     | .44 (.74)    | .05     |
| Affective closeness                             | —                     | —         | .16 (.10)    | .13     | -.05 (.13)   | .18     |
| Affective closeness<br>X Daughter role salience | —                     | —         | —            | —       | .51 (.20)*   | .20     |
| R <sup>2</sup>                                  | .17                   |           | .19          |         | .23          |         |
| $\Delta R^2$                                    |                       |           | .02          |         | .04*         |         |

Note. \*p < .05; \*\*p < .01 (2-tailed)

<sup>a</sup>Unstandardized regression coefficients (standard errors)

<sup>b</sup>Standardized regression coefficients. The Friedrich (1982) approach was used to obtain the standardized solutions, as suggested by Aiken and West (1991) for regression equations that involve interaction terms.

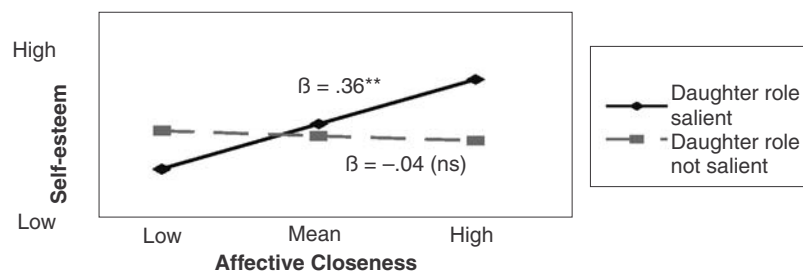
and found that to be statistically non-significant. The multiplicative term of affective closeness and daughter role salience, which was entered into Model 3, is statistically significant. An F-test indicates that Model 3 explains more of the variation (an additional 4%) in daughters' self-esteem than Model 2. The results therefore suggest that the effects of affective closeness on the daughters' self-esteem vary, depending on the salience of the daughter role.

We used the procedure suggested by Aiken and West (1991) to plot the interaction effect of affective closeness and daughter role salience. Figure 1 depicts the slope of self-esteem on affective closeness for the two groups of daughters (daughter role salient vs. daughter role not salient). We used the self-esteem scores at low (one standard deviation below the mean), mean, and high (one standard deviation above the mean) levels of affective closeness, to construct the regression lines for the two groups. As shown, for daughters with salient daughter role, a closer relationship with their parents is associated with higher self-esteem (standardized regression coefficient,  $\beta = .36^{**}$ ), whereas for those whose daughter role is not salient, affective closeness has minimal effects on their self-esteem. ( $\beta = -.04$ , *ns*).

### *Simultaneous Effects of Relationship Strain and Affective Closeness on Self-Esteem*

When both relationship strain and affective closeness were entered into the model to predict the daughters' self-esteem, a similar pattern of

FIGURE 1. Moderating Effects of Daughter Role Salience in the Association of Affective Closeness with Parent and Self-Esteem of Daughter



Note:  $**p < .01$ ; *ns* = not significant at  $p < .05$ .  
 $\beta$  = Standardized regression coefficients.

results as reported above was observed. Table 5 presents the simultaneous analysis.

Model 1 shows that the main effect of relationship strain is statistically significant, whereas that of affective closeness is not, which is consistent with the results when each dimension of relationship quality was analyzed separately. However, the standard errors of the coefficients of relationship strain and affective looseness are much larger, compared to the main effect models with only one dimension of relationship quality in the model, which suggests that multicollinearity may be an issue.

The interaction effect of relationship strain and daughter role salience was tested in Model 2 and is not statistically significant, whereas the interaction effect of affective closeness and daughter role salience,

TABLE 5. Simultaneous Effects of Relationship Strain and Affective Closeness on Self-Esteem

| Independent Variables                           | Model 1               |           | Model 2          |         | Model 3           |         |
|---|-----------------------|-----------|------------------|---------|-------------------|---------|
|   | b (s.e.) <sup>a</sup> | $\beta^b$ | b (s.e.)         | $\beta$ | b (s.e.)          | $\beta$ |
| Education<br>(1 = some college or more)         | 1.99 (.73)**          | .21       | 1.93 (.73)**     | .21     | 1.94 (.71)**      | .21     |
| Grandma<br>(1 = grandmother)                    | 2.16 (.75)**          | .23       | 2.15 (.75)**     | .23     | 2.21 (.73)**      | .23     |
| Health<br>(1-4, poor to excellent)              | .69 (.60)             | .09       | .79 (.61)        | .11     | .83 (.59)         | .11     |
| Marital satisfaction                            | .06 (.02)*            | .20       | .05 (.02)*       | .19     | .05 (.02)*        | .19     |
| Daughter role salience<br>(1 = salient)         | .56 (.74)             | .06       | .56 (.74)        | .06     | .59 (.72)         | .06     |
| Relationship strain                             | -.58 (.24)*           | -.25      | -.40 (.30)       | -.27    | -.65 (.24)**      | -.28    |
| Affective closeness                             | -.05 (.14)            | -.04      | -.04 (.14)       | -.03    | -.31 (.16)        | -.01    |
| Relationship strain<br>X Daughter role salience | —                     | —         | -.39 (.37)       | -.08    | —                 | —       |
| Affective closeness<br>X Daughter role salience | —                     | —         | —                | —       | .56 (.20)*        | .22     |
| R <sup>2</sup>                                  | .22                   |           | .23              |         | .27               |         |
| $\Delta R^2$                                    |                       |           | .01 <sup>c</sup> |         | .05* <sup>c</sup> |         |

Note. \* $p < .05$ ; \*\* $p < .01$  (2-tailed)

<sup>a</sup>Unstandardized regression coefficients (standard errors)

<sup>b</sup>Standardized regression coefficients. The Friedrich (1982) approach was used to obtain the standardized solutions, as suggested by Aiken and West (1991) for regression equations that involve interaction terms.

<sup>c</sup>Change of R<sup>2</sup> as compared to Model 1.

tested in Model 3, is significant. Both findings are consistent with those reported before. Overall, this simultaneous analysis suggests that relationship strain with the parent has negative effects on the self-esteem of daughters, independent of daughter role salience and affective closeness (as well as education, grandmother status, health, and marital satisfaction). In contrast, affective closeness has stronger positive effects on the self-esteem of daughters who value the role of daughter highly as opposed to those who do not, net of the effects of relationship strain and other control variables.

### **DISCUSSION**

Our findings suggest that the self-esteem of daughter caregivers is associated with both relationship strain and affective closeness with the parent. On one hand, the negative effects of relationship strain are uniform across all daughters, regardless of the salience of the daughter role. On the other hand, the positive effects of affective closeness are conditioned by daughter role salience, with greater benefits for daughters whose daughter role is salient than for those for whom the role is less salient. Thus, the findings partially support the identity salience hypothesis that daughter role salience amplifies the positive effects of affective closeness with the parent, but do not support the hypothesis in relation to relationship strain. These findings are consistent with a previous study that did not find parent care centrality to moderate the effect of parent care stress (Martire et al., 2000). However, this study has advanced the literature by examining the moderating role of identity salience in relation to positive role experience. Our findings suggest that identity salience increases the psychological benefits that one can derive from positive role experience, possibly because a valued aspect of the self is validated and affirmed (Welsh & Stewart, 1995).

Studies of social relationships have suggested that the detrimental effects of negative social exchanges are greater than the beneficial effects of positive social exchanges (Rook, 1990). To some extent, our findings support this assertion, as the negative effects of relationship strain on self-esteem are uniform, whereas the positive effects of affective closeness are conditioned by daughter role salience. However, the stronger impact of negative exchanges than positive exchanges may be truer for some groups than others. Our analysis shows that for daughters whose daughter role is salient, the effects of relationship strain on self-esteem ( $\beta = -.23^{**}$ ) are not greater than that of affective closeness ( $\beta = .36^{**}$ ),

whereas for daughters whose daughter role is not salient, the stronger detrimental impact of relationship strain ( $\beta = -.23^{**}$  vs.  $\beta = -.04$ , ns, for affective closeness) is obvious. Future research on the impact of positive and negative social exchanges may need to consider the subjective importance that individuals attach to different role relationships.

### ***Implications for Practice***

Our findings have implications for professionals working with older families. With the increase of life expectancy, more women will assume the role of parent care. While much attention has been given to caregiver burden and distress, our study suggests that caregiving needn't be viewed solely as a negative predicament. Rather, our study suggests the view that parent care offers an opportunity for daughters to improve their sense of self, as well as one that poses risk for devaluation of the self. From this perspective, practitioners working with caregiving families may focus on strengthening the salient components of the self-concept of daughter caregivers. Indeed, past studies have shown that self-esteem is an important psychological resource that buffers the negative effects of stress on physical and mental health (Seeman, Berkman, Gulanski, Robbins, Greenspan, Charpentier, & Rowe, 1995; Shamir, 1986). Thus, helping daughter caregivers to preserve and increase positive self-evaluation should be a priority.

Our findings suggest that relationship strain is a major correlate of the daughters' negative self-assessment, therefore, reducing strains in the daughter-parent relationship should be a goal of intervention. An early study showed that a cognitive-behavioral intervention that assisted adult daughters with widowed mothers to reduce unrealistic expectations of their responsibility for their mothers and to interact with them in a manner that promotes the mother's self-reliance was effective in decreasing the daughters' feelings of burden and increasing their positive feelings towards their mothers (Scharlach, 1987). This may be a promising approach when working with daughter caregivers, especially those who experience high levels of relationship strain with their parents. The negative effects of relationship strain on the self-esteem of daughter caregivers appear to be ubiquitous, at least not conditioned by the salience of the daughter role, suggesting the need to develop more effective strategies to manage such strains in the caregiving context.

At the same time, helping professionals should build on the strength of the daughter-parent relationship and help adult daughters to maximize the benefits they can derive from the parent care experience. Our findings

suggest that those who feel close to their parent and attach great importance to the role of daughter are more likely to have a positive self-assessment. Thus, helping daughter caregivers to examine the personal meaning of the daughter role, as well as appreciate their feelings of closeness to their parents, may be effective strategies to bolster their self-esteem.

Our descriptive findings suggest that the majority of daughter caregivers experienced the relationship with their parents quite positively with few strains, which challenges the stereotype of daughter caregivers and suggests the need for careful individualized assessment when working with caregiving families. In particular, practitioners should recognize the variety of feelings that daughters may have toward their parents. For instance, our data suggests that some daughters may be ambivalent (high in both closeness and strain) and some may feel detached (low in both closeness and strain) in relating to their parents. Separate assessment of the positive and negative dimensions of the daughter-parent relationship would help to detect more complex feelings.

In sum, our study suggests that parent care can be an opportunity for growth for adult daughters, although it also poses risks. Careful assessment of the daughter's experience, especially feelings of strain and closeness with their parents, as well as the salience of the daughter role would help professionals to develop individualized care plans that promote positive self-concept and reduce the risk of negative self-assessment for daughter caregivers.

### ***Strengths and Limitations***

This study employed a sample of daughter caregivers who were themselves mothers and were married to examine the effects of both positive and negative interactions with parent on the self-esteem of daughters, and the extent to which the effects of each dimension of relationship quality are conditioned by daughter role salience. The study sample was based on a larger sample of daughter caregivers recruited through a probability sampling procedure, which has an advantage over previous studies that relied on samples recruited through advertisements or organizations. However, the study has several methodological caveats that should be noted.

First, our sample was predominately white, which is characteristic of the older population in Wisconsin. The generalization of our findings to other racial/ethnic group therefore is not warranted. Second, this sample of married daughter caregivers with children does not represent daughter caregivers who are unmarried and/or not parents. Although we found the same pattern of results in an additional analysis with all daughter caregivers in the larger study, the predominance of married

daughters with children in this larger sample prevents us from generalizing the findings to other daughters. Third, our sample size is relatively small which may have limited the statistical power to test our hypotheses. Overall, the study speaks to the importance of assessing the quality of the relationship between daughter caregivers and their parent care recipients, especially in terms of its relevance to the self-esteem of daughters. Our study suggests that in order to help daughter caregivers to maximize the benefits and minimize the negative effects of parent care, the positive and negative dimensions of the daughter-parent relationship should be differentiated, and the salience of the daughter role should be examined.

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