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Parenthood, Childlessness, and Well-Being: A Life Course Perspective

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Abstract

This article reviews recent research (1999 – 2009) on the effects of parenthood on wellbeing. We use a life course framework to consider how parenting and childlessness influence well-being throughout the adult life course. We place particular emphasis on social contexts and how the impact of parenthood on well-being depends on marital status, gender, race/ethnicity, and socioeconomic status. We also consider how recent demographic shifts lead to new family arrangements that have implications for parenthood and well-being. These include stepparenting, parenting of grandchildren, and childlessness across the life course.

Keywords

childlessness; life course; parenthood; wellbeing

Parenthood is a transformative experience—imposing a unique mix of stress and rewards for those who enter (Nomaguchi & Milkie, 2003). At least since McLanahan and Adam’s (1987) review, social scientists have generally concluded that, at least when children are young, the costs appear to outweigh the benefits in terms of effects on parents’ well-being. At the same time, research on later life families has generally concluded that adult children tend to have positive effects on parents’ well-being. Individuals who remain childless typically serve as a comparison group for those with minor and adult children but, given their growing numbers, childlessness has become an important research destination on its own right. Over the 2000s, research on the effects of parenthood on well-being has evolved in new directions—with greater theoretical nuance, attention to diversity, and the use of valuable longitudinal and qualitative data sets. We use a life course framework to organize a review of studies on parenthood and well-being that were published over the past decade and to suggest future directions for research on parenthood and well-being.

Given the long-standing view that parenthood carries both costs *and* benefits for parents’ well-being, a significant advance over the past decade is the inclusion of measures that tap into various dimensions of well-being. This is particularly important because it appears that parenthood and parenting may be more relevant to some dimensions of well-being than others at different points in the life course. Over the 2000s, the majority of studies on parenthood and well-being included a general measure of psychological distress or well-being, but studies have assessed other aspects of well-being including a sense of meaning and purpose in life, self-efficacy, loneliness, health behaviors, and physical health. In this review, we define well-being broadly in order to capture possible costs and benefits of parenthood for well-being across social groups and over the life course. We use the term “parenthood,” to refer to being a parent versus remaining childless. “Parenting” and “parental status” refer to different types of parents or parenting situations (e.g., based on age

or living arrangements of children). “Contexts” refers to socially structured contexts of parenthood as shaped by gender, marital status, socioeconomic status, and race/ethnicity.

A Life Course Framework

Research on parenthood, parenting, and wellbeing is comprised of two largely separate literatures, one focusing on the effects of parenthood and young children on well-being during early to middle adulthood and the other focusing on the effects of parenthood and adult children on well-being during middle to late adulthood. We suggest that a life course perspective be used to integrate these two bodies of work. These literatures can inform one another in ways that advance future research and theory on parenthood and well-being. Early parenting experiences do not become irrelevant to parents’ well-being after children grow up. Rather, early life course experiences have long-term implications for well-being throughout middle and later life (Ha, Hong, Seltzer, & Greenberg, 2008). A life course perspective directs attention to continuity and change in well-being over the life course and suggests how parenthood and the “linked lives” of parents and children influence trajectories of change in well-being over time (Milkie, Bierman, & Schieman, 2008). A life course perspective also takes inequality into account by emphasizing that individuals vary in their exposure to stressors and resources throughout life. Differential exposure to environmental risks and resources around parenthood can produce increasing disadvantage for the well-being of some and increasing advantage for others (Kendig, Dykstra, van Gaalen, & Melkas, 2007). This approach recognizes human agency and resilience as well as heterogeneity in relationships and life course experiences. Thus, individual choice and a sense of personal control in making decisions about parenthood may play an important role in shaping the effects of parenthood on well-being (Keeton, Perry-Jenkins, & Sayer, 2008).

We surveyed leading family journals in sociology, psychology, and gerontology and reviewed articles pertaining to any aspect of parenthood or parenting in relation to a measure of well-being. We also reviewed books that addressed this topic. Because of space constraints and a voluminous literature, the present review is selective but also comprehensive in identifying major strands in recent research. Major findings and themes from the past decade are discussed in four broad areas: (a) childlessness, (b) transition to parenthood, (c) minor children, and (d) adult children.

Childlessness and Well-Being

Although recent research focuses primarily on the effects of parenting on the well-being of different types of parents, there remains an underlying assumption that being a parent, compared to remaining childless, influences well-being. Recent decades have witnessed a trend toward increased childlessness and delayed childbearing. In 1975, 15.6% of women age 30 – 34 and 10.5% of women between 35 and 39 were childless. These percentages rose to 28% and 20%, respectively, in 2000 (U.S. Census Bureau, 2006). Not surprisingly, interest in the psychological implications of childlessness has also increased. Recent studies suggest that parents of minor children are more distressed than their childless counterparts (e.g., Nomaguchi & Milkie, 2003). In contrast, parents of adult children report levels of distress and well-being that are similar to those of the childless (Evenson & Simon, 2005; Pudrovska, 2008). Both types of effects depend on the social context of childlessness and parenting.

Generally, childless young adults report better well-being than parents (Nomaguchi & Milkie, 2003), although one study found that childlessness in young adulthood may be stressful in the context of thwarted fertility intentions, especially for women with lower family income (McQuillan, Greil, White, & Jacob, 2003). As for childlessness at midlife, Koropecj-Cox, Pienta, and Brown (2007) analyzed national, cross-sectional data to

compare the well-being of childless women and mothers in their 50s and found that childlessness was not associated with worse psychological outcomes in midlife. It was women who became mothers early in the life course who experienced lower wellbeing—largely because of marital disruption and fewer socioeconomic resources.

Several recent studies have explicitly compared the well-being of parents and the childless in later life. This issue is more relevant now than in the past because of increasing longevity, lower marriage rates, and increasing numbers of childless individuals—a combination of factors that may contribute to greater isolation and distress in older populations (Zhang & Hayward, 2001). Zhang and Hayward analyzed a national cross-section of Americans age 70 and older and concluded that any effects of childlessness on well-being were apparent only within the context of marital status and gender. Childlessness was associated with higher rates of depression and loneliness, but only for unmarried men. Consistent with this U.S. finding, a cross-national study based on data from Australia, Finland, and the Netherlands revealed that formerly married men who were also childless reported particularly poor health (Kendig et al., 2007). In contrast, unmarried childless women appeared to fare well in later life.

Bures, Koropecj-Cox, and Loree (2009) analyzed a national cross section of mid- and late-life adults and found that the childless exhibited less depression than parents. This positive image is further supported by cross-national data showing that never married childless women had high levels of social activity (Wenger, Dykstra, Melkas, & Knipscheer, 2007) and were more highly educated than other groups of women (Koropecj-Cox & Call, 2007). Socioeconomic and personal resources may shape expectations and meanings of parenthood and, in turn, these symbolic meanings influence well-being. For example, Koropecj-Cox (2002) found that, among the childless (age 50 – 84), negative attitudes toward childlessness were associated with lower levels of well-being (more loneliness and depression), and, among parents, worse than expected relationships with adult children were associated with lower well-being. Thus, structural factors may shape the probability of childlessness as well as moderate the consequences of childlessness on well-being.

In sum, just as parenthood is not a monolithic experience that affects well-being, childlessness is not the same experience for all individuals. The available evidence suggests that childlessness has few costs for psychological well-being and may even be associated with enhanced well-being, at least for certain social groups. Social contexts shape the meaning, experience, and consequences of childlessness in ways that may undermine well-being for some select groups (e.g., young women facing infertility and older unmarried men). Parenthood is increasingly viewed as a matter of choice, and voluntary childlessness has become more common. Yet there are also qualitative accounts of successful career oriented women who delay childbearing until it is too late to have children and then experience distress (Hewlett, 2002). Given heterogeneity among the childless, we do not have a solid understanding of different life course pathways that lead to childlessness, and these pathways are likely to have different implications for personal well-being. Future research should consider the reasons for childlessness as well as consequences for well-being. Moreover, the cultural meanings of childlessness have changed over recent decades, suggesting the possibility that effects will vary across cohorts and over historical time. With a few exceptions (e.g., White & McQuillan, 2006), existing research on childlessness is limited by cross-sectional designs and future research should consider how the effects of childlessness may change over time as well as across social groups and cohorts.

Transition to Parenthood

A theme of the 2000s is that parenthood, per se, does not predict well-being in a systematic way. Most studies over the past decade have worked to identify specific social contexts in which parenthood fosters well-being or distress. We first consider how the transition to parenthood is associated with well-being and then consider how parenting (of minor and adult children) influences well-being across diverse social contexts. A life course perspective emphasizes the importance of major life transitions in triggering shifts in well-being (Elder, Johnson, & Crosnoe, 2003). The transition to parenthood is a pivotal life course transition (Knoester & Eggebeen, 2006), and many studies in the 2000s focused on the *timing* of this transition in the life course. Demographic research on childbearing and the timing of first births has long employed a life course perspective to reveal how socioeconomic antecedents and consequences of early childbearing create life course trajectories of cumulative disadvantage for parents. Early transition to parenthood, particularly during the teen years, has been associated with truncated educational and work opportunities and increased marital instability (Hofferth, Reid, & Mott, 2001)—all factors that might undermine well-being in the short and long term (Booth, Rustenback, & McHale, 2008). Early transition to parenthood is a contemporary concern given the recent upturn in teenage pregnancy after nearly a decade of teenage pregnancy decline (Santelli, Lindberg, Diaz, & Orr, 2009).

A few recent studies consider the impact of early parenting transitions on mental health, with a focus on young adulthood. Booth and colleagues (2008) analyzed a longitudinal sample of young adults and found that, although socioeconomically disadvantaged adults were more likely to make early transitions to parenthood, they were not at increased risk for depression 5 years later. The authors concluded that early transitions “can be rational and sound” (p. 12) for certain individuals. This upbeat conclusion dovetails with Edin and Kefalas’s (2005) qualitative (in-depth interview) study on early parenthood for poor women. Although they did not focus on well-being, they concluded that poor women (age 15 to 56, average age 25) often viewed parenthood as a way to find meaning and purpose amidst limited life chances (notably, this study does not compare young mothers to their childfree peers or those who delayed parenthood). Knoester and Eggebeen (2006) considered the effects of transition to fatherhood for men (age 19 to 65) with a national longitudinal sample and, similar to Booth and colleagues, found no significant effect on men’s psychological well-being. Taylor (2009), using the Wisconsin Longitudinal Study (WLS), compared the psychological well-being of midlife adults who had children before and after the age of 20 and also found no significant effects of early childbirth on men’s or women’s psychological well-being.

In contrast to these studies, Mirowsky and Ross (2002) analyzed a cross section of individuals age 18 to 95 and concluded that early transitions to parenthood are associated with increased risk for depression. They found that men and women who have their first child prior to age 23 are more depressed than their childless peers but that, after age 23, those who have a child are less depressed than the childless. This suggests that later or on-time transition to parenthood might actually benefit well-being. Men experienced a monotonic increase in benefits the longer they delayed their first child. Women experienced increased benefits from age 23 to 30, but not beyond this age. These findings may contrast with the Booth and Eggebeen studies because Mirowsky and Ross considered long-term life course effects of early parenthood on depression rather than short-term effects of the transition experience among young adults. Although the Mirowsky study relied on cross-sectional data, it is unlikely that retrospective reports of age at first birth are biased. Adverse effects of early parenting transitions were also reported by Henretta (2007), whose longitudinal analysis showed that age at first birth was associated with increased mortality

risk for women who gave birth prior to age 20. Similarly, Taylor (2009) found that, at midlife, those who became parents before the age of 20 had worse self-rated health than those who became parents after the age of 20, and Spence (2008) found that early transition to parenthood was associated with more depression and activity limitations in late life.

Apart from age at first birth, effects of the transition to parenthood on well-being depend on gender and marital status. Nomaguchi and Milkie's (2003) longitudinal analysis showed that, compared to their married counterparts, unmarried men and women transitioning to parenthood experienced a reduction in self-efficacy, and unmarried men experienced an increase in psychological distress. Married women who transitioned to parenthood were *less* distressed than their childless counterparts, whereas the transition to parenthood had no effect on married men's distress levels. Woo and Raley (2005) extended this work to include cohabitators. They found that, compared to new mothers who were either married or single, cohabiting women who transitioned to parenthood experienced a greater decline in psychological well-being. Cohabiting fathers experienced lower levels of depression than single fathers. Keeton and colleagues (2008) studied the impact of the transition to parenthood on well-being for 1 year following births to working class dual earner couples. They found that a sense of control mediated the impact of parenthood on well-being among these couples. Marital quality may also mediate the impact of parenthood transitions on well-being. Two recent longitudinal studies of new parents found that mothers who perceived more support from their partner were less likely to experience an increase in depressive symptoms following the birth of a child (Smith & Howard, 2008). Women who were ambivalent about their marital relationship and perceived less support from husbands experienced a greater increase in depressive symptoms following the transition to parenthood (Simpson, Rholes, Campbell, Tran, & Wilson, 2003).

In sum, recent research emphasizes that the well-being of new parents cannot be fully understood without considering the timing and context of the transition to parenthood. Becoming a parent may be a profound stressor, with negative long-term consequences for some people and an important source of well-being for others. Yet recent studies provide mixed results on the long-term implications of early age at first birth. Emphasis on the contextual nature of new parenthood is consistent with the life course perspective that draws attention to heterogeneity among individuals experiencing the same transition under different circumstances and at different stages of the life course. Emphasis on context is particularly important, given demographic changes in age and marital status at first birth as well as the role of new reproductive technologies that facilitate childbearing at older ages (Friese, Becker, & Nachtigall, 2006; Santelli et al., 2009). Future research should continue to emphasize parenthood within the context of these trends. We now turn to studies that move beyond the transition to parenthood to focus on the effects of young children on parents.

Minor Children in Social Context

Parents of minor children report higher levels of distress than do parents of adult children or childless individuals in national surveys (Evenson & Simon, 2005). The primary explanation is that the presence of young children increases exposure to significant stressors, including daily demands and time constraints of parenting, increased strain between parents, and work-family conflict. In turn, stress undermines parental well-being. For example, Wickrama and colleagues (2001) found that parental stress was positively associated with increased risk for early onset hypertension in a sample of married individuals. Moreover, this effect was significant for women but not men, reflecting a general theme of gender differences in the effects of parenting on well-being, presumably because women shoulder primary responsibility for child care, even if they also work outside the home (Bianchi,

2000; Blair-Loy, 2003). Notably, most studies do not consider possible differences in the effects of parenting based on age of minor child (e.g., infant, preschool, teen), although some studies focus specifically on infants or preschool children (e.g., Jackson, 2000).

Single Parents

A major theme of recent research is that parenting of minor children is more stressful in some social structural contexts than others. In particular, parenthood is associated with higher levels of distress for the unmarried than the married (Evenson & Simon, 2005), and unmarried women are at greater risk than unmarried men (Hughes & Waite, 2002). Hughes and Waite analyzed Health and Retirement Survey data and concluded that single women with children (compared to married women and men living with or without children) were more disadvantaged across a range of health outcomes, including depressive symptoms, self-rated health, mobility limitation, long-term disability, and chronic conditions. Avison, Ali, and Walters (2007) found that single mothers were more distressed than married mothers over time largely because unmarried mothers were exposed to higher levels of stress across several life domains. In particular, single mothers faced more stress associated with caregiving for family members, finances, and work-home balance. Avison and colleagues suggest that policy initiatives aimed at encouraging marriage to enhance the well-being of single mothers would be better directed toward reducing the structural disadvantage and higher levels of stress that single mothers confront in their daily lives.

Single father families, virtually nonexistent before 1970, constituted more than 18% of all single-parent households in 2003 (Fields, 2003). Single fathers may encounter unique stressors and use coping strategies specific to those stressors (Cole, 2009). Future research should begin uncovering how and why these father-only families are formed, because the context of single fatherhood—in addition to the status itself—has important implications for fathers' well-being.

Married and Cohabiting Parents

The demands and time constraints of parenting also impose stress on relationships between parents (Twenge, Campbell, & Foster, 2003). In turn, relationship strain undermines physical and psychological well-being (Proulx, Helms, & Buehler, 2007). Although most of the research on parenting and relationship quality focuses on married parents (see Twenge et al. for a review), recent studies also address how parenthood influences relationships between cohabiting parents. Past research suggests that cohabiting prior to marriage is associated with lower marital quality (Phillips & Sweeny, 2005) but a recent longitudinal study by Tach and Halpern-Meekin (2009) showed that cohabiting prior to marriage undermined marital quality only for those couples who had a child prior to marriage. This is an important finding in light of recent demographic trends: About 60% of couples now cohabit prior to marriage, and about half of all births outside of marriage are to cohabiting parents (Bumpass & Lu, 2000). Changes in the demographic structure of childbearing have coincided with changes in the meaning and significance of marriage for parents. Childbearing has become increasingly separated from marriage and, for some, marriage now serves as a capstone of achievement, wherein individuals and couples seek to achieve financial stability before getting married (Cherlin, 2004) but not necessarily before having children (Edin & Kefalas, 2005). Williams, Sassler, and Nicholson (2008) also found that, compared to childless women, single mothers do not reap the same physical health benefits of getting married, partly because marital quality is lower for single mothers. In sum, it appears that premarital births set relationship trajectories on a disadvantageous course. Future research should consider how ongoing relationships between unmarried and previously married parents mediate the impact of parenting on well-being.

Stepparents

Roughly one fourth of all families with minor children include stepchildren, and about half of stepfamilies have nonresidential stepchildren (Stewart, 2005) with nearly a third of U.S. children spending some time in a stepparent household (Ganong & Coleman, 2004). Stepfamily characteristics are highly diverse, with shifting relationship types (stepsiblings, half siblings, stepgrandparents), relational dynamics, and living arrangements (Ganong & Coleman). When children are young and require continuous parental care, stepparenthood may be associated with elevated parental strain that is often exacerbated by marital conflict, role and boundary ambiguity, and incomplete institutionalization of stepfamilies (Stewart). Stepparenting may be especially stressful for *stepmothers* (Stewart). Because of traditional gender dynamics in stepfamilies, stepmothers tend to assume primary responsibility for relationships with minor and adult stepchildren and act as kinkeepers in the blended family (Schmeeckle, 2007). Yet Kohler, Behrman, and Skytthe (2005) found that having stepchildren in the home reduced self-reports of well-being for men but not women. For stepparents who remained married over time, Stewart found that the stress of boundary ambiguity declined with union duration (for marital and cohabiting unions). Most research on stepfamilies focuses on wellbeing of children rather than parents. A recent exception, relying on cross-sectional data, indicated that adults living with minor stepchildren were no more distressed than their childless peers (Evenson & Simon, 2005). Future research should consider whether selection processes play a role in that individuals who become stepparents and remain married may be those who feel more open to the parenting role.

Given the significant number of adults who stepparent at some point in their lives, it is important to consider how stepchildren affect well-being later in the life course. Evenson and Simon (2005) reported that having nonresidential adult stepchildren was associated with elevated levels of distress, relative to the childless and relative to other parents, but their study is limited by a cross-sectional design. Pudrovská's (2009) longitudinal analysis showed that having a stepchild does not compromise mental health of middle-aged and older adults and that the psychological implications of stepparenthood do not differ by gender. Whereas women may be more affected by enduring parental strains in young and middle adulthood, the effect of stepparenthood may be similar for mothers and fathers in later life when men's and women's parental roles tend to become more similar. At this point, research evidence is mixed, and generalizations cannot be drawn. This heterogeneity points to the importance of context in which the stepparent role unfolds, including characteristics of parents and children as well as the quality of family relationships. Parents who have both stepchildren and their own children may face unique stressors associated with parenting children with different biological relatedness, contributing to greater psychological distress. Moreover, the experience of stepparenthood may depend on timing in the life course—with different effects for those who become stepparents of a young child, an adolescent, or an adult child. Future research should explore how the effects of stepparenthood are shaped by the joint life course trajectories of stepparents and stepchildren.

Grandparents Who Parent

The role of grandchildren in the lives of their grandparents has received significant research attention, but we do not review that overall body of research here. Rather, we focus specifically on grandparents who play a direct parenting role in caring for their grandchildren. Grandparent-headed households increased by 30% between 1990 and 2000, with 63% headed by grandmothers. In 2002, approximately 5.6 million children under age 18 coresided with their grandparents. Of these children, 22.7% resided in a grandparent's household with no parent present (Fields, 2003). African American and Latino adults are more likely than White adults to be responsible for their grandchildren (African American, 4.3%; Latino, 2.9%; White, 1.0%; Goodman & Silverstein, 2006).

Several cross-sectional studies have found that grandparent caregivers are in worse physical health than their noncaregiver peers, but a longitudinal study of 12,872 grandparents (age 50 – 80) found “no evidence that caring for grandchildren has dramatic and widespread negative effects on grandparents’ health and health behavior” (Hughes, Waite, LaPierre, & Luo, 2007, p. S115). Yet, the effects of parenting by grandparents should be considered in context. Hughes and colleagues found that grandmothers caring for grandchildren in “skipped-generation” households (no parent present) were more likely than those who coparent to experience negative changes in health behavior, depression, and self-rated health. Goodman and Silverstein (2006) conducted a series of studies showing that psychological effects of caring for grandchildren depend on race/ethnicity and whether grandparents have sole responsibility for grandchildren (custodial grandparents) or share responsibility with adult children (coparenting grandparents). Controlling for stress resulting from adult children’s circumstances and precursors of custodial grandparenting, Goodman and Silverstein found that African American *custodial* grandmothers reported greater well-being than did *coparenting* grandmothers. Although this finding is inconsistent with Hughes and colleagues, Hughes et al. did not examine race differences in their sample of grandmothers. Greater well-being among African American custodial grandmothers may reflect a long historical tradition of surrogate parenting in the African American community. In contrast, the coparenting role is associated with greater well-being than is a custodial role among Latino grandmothers—signifying a cultural ideal of intergenerational reciprocity and close familial ties. Off-time or nonnormative grandparenting, particularly grandparenting involving custodial care of grandchildren, is highly stressful for grandparents (Hughes & Waite, 2002) and younger grandparents are more likely than older grandparents to perceive their role as stressful (Sands & Goldberg-Glen, 2000). Future research should attempt to parse out how much of the apparent negative effect of grandparenthood may be based on selection effects. As skipped-generation families are disproportionately poor and minority (Bryson & Casper, 1999), these grandparents would have been disadvantaged in terms of health even if they had not been caring for grandchildren.

Work-Family Stress

Work-family conflict emerged as a research emphasis beginning in the 1970s, as mothers’ labor force participation increased (Milkie, Mattingly, Nomaguchi, Bianchi, & Robinson, 2004). Even though female labor force participation has increased over time, the amount of time that mothers devote to child care has been stable, whereas fathers devote more time to child care than in the past (Bianchi, 2000). Research on work-family conflict continued over the past decade, and recent studies clarify that child-care stress is greater for some parents than others, particularly for low-income and single parents and for women (Crouter & Booth, 2004; Nomaguchi & Milkie, 2003). Although many studies identify this source of stress, few take the next step to consider how child-care stress affects well-being. Nomaguchi, Milkie, and Bianchi (2005) studied dual-earner mothers and fathers and found that time strains associated with child care contribute to psychological distress for mothers but not fathers. Meanings attached to work and family may also influence well-being. Goldberg and Perry-Jenkins (2004) conducted a longitudinal study of 97 dual-earner working class couples and found that partners’ division of child-care duties affects well-being but effects depend on gender ideology—women with more traditional views actually experienced more distress when their partner provided more care. Although not examining well-being specifically, Blair-Loy’s (2003) qualitative interviews with working mothers showed that competing ideologies of being a good mother and a good worker created distress, tension, and ambivalence regarding working outside the home and being a mother. Taken together, these studies point to the tension between work and family as a structural factor that potentially erodes parental well-being and further suggest that the degree and effects of this tension depend on social contexts.

Children's Emotional and Behavioral Problems

One strong line of research over the past decade focused on stress associated with children's emotional, developmental, and behavioral disorders (MacInnes, 2008). Unfortunately, these problems are not rare. The National Center for Health Statistics (2007) reports that 2.1% of children age 5 – 11 have speech problems, 1.8% have learning disabilities, 1.1% have mental retardation or other developmental problems, and 1.2% have other mental, emotional, or behavioral problems. Learning disability becomes more apparent with age: Among children age 12 – 27, 2.6% have learning disabilities. Early, Gregoire and McDonald (2002) analyzed 164 families of children with emotional disorders over an 18-month period and found that parental strain associated with children's emotional and developmental disorders had significant adverse effects on parents' psychological functioning. Gross, Shaw, Moilanen, Dishion, and Wilson (2008) analyzed a sample of parents who had children at risk for conduct disorder over a 2-year period and found that children's behavioral problems contributed to mothers' depression but not fathers'. A cross-sectional study using daily telephone interviews with 82 middle-age parents found parents of children with disabilities had elevated levels of negative affect, stress, and physical symptoms (Seltzer et al., 2009).

A diary study of parents with autistic children found that parents' coping strategies influenced the degree to which daily parenting stressors affected their well-being (Pottie & Ingram, 2008). Parents who used more problem-focused, social support, positive reframing, emotional regulation, and compromise coping experienced higher levels of well-being. This study points to personal resources that may buffer parents from the effects of parenting stress. A few studies point to the importance of linked lives across three generations in providing support for children with disabilities (for a review, see Mitchell, 2007). For example, S. Green (2001) found that secondary assistance from grandparents helps parents of children with disabilities to have a positive outlook and avoid physical exhaustion. Future research should consider how personal and social resources that may influence well-being are distributed across social groups.

Although recent work establishes the importance of children's problems for parents' well-being, research in this area has not considered how effects might vary across social contexts (e.g., marital status), an emphasis that should be included in future research. Moreover, certain contexts may increase the incidence or severity of children's problems. For example, studies show that multiple family transitions (e.g., marriages, divorces, cohabitations) increase children's risk for emotional and behavioral disturbances (see Cherlin, 2009, for a review). The life course concept of linked lives points to the importance of research that considers the parallel life course trajectories of parents' and children's well-being.

Summary

Studies clearly establish that parenting stress adversely affects parents' well-being. There is general consensus that parental stress is greater as individuals make the transition to parenthood and when children are young (Kluwer & Johnson, 2007). Moreover, individuals in certain social contexts—for example, unmarried, women, lower socioeconomic status—are more likely to experience parenting as stressful because they encounter more life strains around parenting (Crouter & Booth, 2004). In turn, parental stress mediates the impact of minor children on parental well-being. Next, we consider how the strains and rewards of parenting may change as parents and their children age.

Adult Children in Social Context

In a review of 1990s research on families of later life, Allen, Blieszner, and Roberto (2000) concluded that research on the effects of adult children on parents was an important yet

understudied area. The past decade witnessed advances in this area with two basic assumptions driving research. First, relationships with children remain salient and important to parents' well-being throughout life. This is reflected in frequent contact between parents and adult children and in their mutual exchange of support and affection (Knoester, 2003; Mandemakers & Dykstra, 2008). Second, the quality of intergenerational relationships matters for parents' well-being (Koropecj-Cox, 2002; Milkie et al., 2008). Studies consistently show that emotionally close and supportive ties with adult children enhance parents' well-being, whereas strained and conflicted relationships with children undermine well-being (Knoester). Relationships with adult children are more likely to be characterized by support than strain, but the strained aspects of relationships appear to be more salient for well-being (Knoester). Most survey research on relationships with adult children has been based on questions about one focal child or on global reports about relationships with all of one's adult children, but recent studies have shown that a strained relationship with any one child in a family can undermine parental well-being even if relationships with other children are generally positive (Ward, 2008). Like research on parenting minor children, research on parenting adult children shows that the experience and consequences of parenting for wellbeing are shaped by social structural contexts of parenting, perhaps particularly marital status and gender. Studies have shown that divorced fathers have more distant and strained relationships with adult children, whereas divorced mothers may experience closer and more supportive relationships with adult children (Shapiro, 2003). It appears that strains with adult children have stronger adverse effects on unmarried parents (Greenfield & Marks, 2006), whereas support from adult children may be particularly beneficial to widowed parents (Ha, 2008; Ha, Carr, Utz, & Nesse, 2006). One would further expect the experience and consequences of having adult children to vary depending on whether or not parents share a residence with children.

Coresidence of Parents and Adult Children

Research on the effects of coresidential adult children on parents' well-being emerged in the 1980s and 1990s and, to a lesser extent, continued over the past decade (U.S. Census Bureau, 2007). In 2007, 55% of young men and 47.5% of young women between 18 and 24 years lived with their parent(s), and 14.2% and 9.3% of men and women, respectively, age 25 – 34 lived with their parents. Adult children who coreside with parents are less likely to be married and employed and have lower levels of education than children living independently (Pudrovska, 2009). Parents' gender may be an important consideration in effects of coresidence on well-being. Pudrovska found that living with adult children (postcollege age) was associated with decreased psychological well-being for mothers but not fathers. From a life course perspective, coresidential adult children violate normative expectations with regard to the timing of nest leaving. The parenting role may be more salient to women's sense of self, so that raising independent and successful children is particularly important to mothers' well-being (Carr, 2004). Further, because women perform most household labor, the addition of a coresidential adult child may increase household labor more for women, differentially contributing to women's well-being.

Adult Children and Unique Stressors

Whereas research prior to the 2000s largely emphasized the positive effects of adult children on parents, more recent research emphasizes contexts in which adult children adversely affect parental well-being. Milkie et al. (2008) considered two stress processes through which adult children adversely affect parents' mental health in later life (age 65 and older): children's negative treatment of parents and effects of children's own stressful life events on parents. Milkie and colleagues hypothesized that "being an older parent is not an equivalent experience across different social locations" (p. 102); rather, the parenting role may be more salient to groups who have less power in other domains. They found general support for

their hypotheses: Negative treatment of parents by children was associated with more depression and anger in parents, but effects on depression were limited to Blacks, and effects on anger were limited to women. Negative events in adult children's lives (e.g., unemployment) also affected Blacks more than Whites.

Other studies have considered that adult children may develop or continue to experience a range of developmental, behavioral, mental health, or physical health problems that are stressful for aging parents. Among 64- to 65-year-old participants in the Wisconsin Longitudinal Study in 2004, roughly 3% reported that they had a child with a mental illness including severe depression and about 2.4% report having a child with a developmental disability. Greenfield and Marks (2006) found that 8% of adult child respondents reported alcohol or substance abuse problems and 38% reported financial problems in a national sample. Greenfield and Marks's cross-sectional analysis revealed that adult children's problems (e.g., alcohol, emotional, at school or work, legal) were associated with lower levels of psychological well-being (across several measures of well-being) and that these effects were magnified for unmarried parents (although they found no gender differences in effects).

Recent work emphasized the life course view of linked lives and the *cumulative* effect of parenting experiences on well-being. Ha et al. (2008) considered how having children with developmental or mental health problems affects parental well-being at different stages of the life course. Although they found that parents of impaired children exhibited higher levels of negative affect, more somatic symptoms, and lower psychological well-being than parents of unimpaired children, their results also suggested support for an adaptation model in that adverse effects attenuated with age. These results are limited by a cross-sectional design, but this study suggests specific ways that parenting stress may shape parent well-being throughout the life course. K.M. Green, Ensminger, Robertson, and Juon (2006) also addressed life course effects of children's problems. They analyzed longitudinal data spanning more than 30 years to show that more recent incarceration of adult sons was associated with greater psychological distress for older African American mothers—also suggesting that effects may attenuate with time. This effect was further mediated by parents' social context as shaped by financial strain and a greater burden of grandparenting. Although it is rare for children to precede their parents in death, this loss has a lasting impact on parents, regardless of its timing in the life course. Rogers, Floyd, Seltzer, Greenberg, and Hong's (2008) cross-sectional analysis showed that the death of a child from infancy through age 34 (average age, 18) was associated with lower levels of parents' psychological and physical well-being many years beyond the loss. Although these effects were diminished by having additional children at the time of death, they were not affected by the number of years that had passed since the death. Taken together, these studies show how earlier stressful experiences with children may influence long-term health and well-being of parents.

Ambivalence

An additional strand of research in the 2000s, launched by Luescher and Pillemer's seminal work in 1998, emphasized the importance of studying both the positive *and* negative aspects of adult child/parent relationships as expressed in "ambivalence" (V. Bengtson, Giarrusso, Mabry, & Silverstein, 2002). Generally speaking, ambivalence refers to the contradictions that individuals feel in their relationships (V. Bengtson et al.). Connidis and McMullin (2002) emphasize the structural roots of ambivalence and the tension between structural expectations and demands around parenting. Such tension may impose considerable stress for parents. To date, most research on ambivalence has focused on predictors of ambivalence between the generations (e.g., child's failure to attain independence; Pillemer & Suitor, 2002), but Fingerman, Pitzer, Lefkowitz, Birditt, and Mroczek (2008) took the

next step and found that intergenerational ambivalence was inversely associated with parents' psychological well-being. Although these results are limited by cross-sectional data—as psychological distress may contribute to feelings of ambivalence and vice versa—they provide a foundation for future research on ambivalence and well-being. Presently, we know little about the association between ambivalence and parents' wellbeing and the direction of causality in this association.

Caregiving in Later Life

A review of the caregiving literature is beyond the scope of the present review (see Silverstein & Giarrusso, this volume, for a review); however, it is important to recognize that adult children are a potential resource for impaired parents. This is especially the case for unmarried parents who may not have access to other informal caregivers (Pinquart & Sorenson, 2007). Although adult children may be an important resource for aging parents, studies have shown that parents are more likely to give than to receive support from adult children and that parents who provide financial and instrumental assistance to their adult children exhibit fewer depressive symptoms than other parents (Byers, Levy, Allore, Bruce, & Kasl, 2008; Silverstein, Conroy, Wang, Giarrusso, & Bengtson, 2002).

Summary

Recent research on parenting adult children clearly shows that parenthood is a role that never ends. Studies emphasize the “linked lives” of parents and adult children and reveal multiple ways in which relationships with children remain an important influence on parental wellbeing throughout the life course. Not surprisingly, the quality of relationships with children is positively associated with parents' mental health. Moreover, the way children turn out and succeed or fail in socially desirable roles is related to parents' psychological outcomes and self-concepts. This conclusive demonstration of parents' and children's interdependent life course trajectories is an important contribution of this decade's research, although we need to move from studies based on one focal child to research designs that consider multiple children in the family. Attention to parents' relationships with all their children may shed more light on parental ambivalence, because research consistently shows that intergenerational relationships can entail both positive and negative consequences for parents. Studies of this decade point to the importance of exploring contexts in which parent-adult child relationships are beneficial or deleterious to parental well-being. Race, gender, marital status, living arrangements, and transitions and stressors in the lives of parents and children create diverse contexts in which parent-child relationships unfold, and we cannot understand the influence of parenthood on well-being without understanding these contexts.

Decade Contributions and Future Research: A Life Course View

Parenthood and parenting shape life experiences and have significant effects on psychological and physical well-being over the life course. The nature of these ongoing effects and the mechanisms (e.g., stress, support) through which they occur differ depending on the context of parenting as shaped by age of children, family structure, and sociodemographic characteristics. If we compartmentalize individual studies into age-restricted snapshots, we fail to understand how parenthood shapes life trajectories in meaningful and lasting ways, as well as how certain key transitions and contexts may alter life trajectories. The life course perspective offers a way to weave together the many strands of research on parenthood and well-being and to see this cumulative process in an integrated big picture way. In this section, we use key life course concepts to synthesize major research themes of the past decade and to identify important directions for future research on parenthood and well-being. Highly specialized suggestions for future research can also be

found throughout this review and should be considered in this life course framework. A life course approach is fruitful not only as a theoretical foundation but also as a methodological guide for research on parenthood and health.

Change, Dynamics, and Cumulative Processes

A life course perspective takes a diachronic approach to the study of families and views both continuity and change as dynamic processes (M. Bengtson & Allen, 1993). The proliferation of longitudinal studies of parenthood in recent years is an important development that is consistent with the emphasis on a contextual and dynamic approach (e.g., K. M. Green et al., 2006; Nomaguchi & Milkie, 2003; Woo & Raley, 2005). Researchers have used panel data to examine how changes in parental wellbeing are shaped by the demands of parenting minor children (Avison et al., 2007; Early et al., 2002) as well as by the interactions with and circumstances of adult children (Ha, 2008; Milkie et al., 2008). For example, psychosocial implications of the transition to parenthood have been studied by following initially childless individuals over time to take into account pretransition mental health and other factors (Nomaguchi & Milkie).

A growing number of studies of the parental experience in young adulthood, midlife, and later life use panel data sets, such as the National Survey of Families and Households (Nomaguchi & Milkie, 2003), the Fragile Families and Child Wellbeing Study (Meadows, McLanahan, & Brooks-Gunn, 2008), and the National Longitudinal Study of Adolescent Health (Booth et al., 2008). Surprisingly, despite the availability of these and other longitudinal data sets, many studies continue to rely on cross-sectional data. Consistent with the life course emphasis on change and trajectories, prospective designs and panel data should be used to address the issue of endogeneity, model change, and continuity in parental well-being over time and to uncover determinants of current well-being that originate earlier in life (Booth et al.; Kluwer & Johnson, 2007).

Taking the long view enables family researchers to consider how certain types of parenting stress that occur early in the life course may affect long-term, in addition to short-term, functioning of parents (Booth et al., 2008; Henretta, 2007). The life course concept of cumulative advantage/disadvantage provides a way of thinking about and analyzing the impact of parenthood on well-being throughout adulthood. Certainly, research emphasizes that parenting of young children tends to be stressful and that this stress is greater for some parents than others—for example, the unmarried (Evenson & Simon, 2005). Parenthood and parenting could then influence trajectories of increasing advantage or disadvantage for well-being over the life course. The strains of parenting minor children (e.g., time and financial constraints) may create additional disadvantage and increased risk for distress among young parents (MacInnes, 2008) and this increased risk may be carried forward to influence well-being late in the life course (Greenfield & Marks, 2006; Ha et al., 2008).

Furthermore, understanding parents' wellbeing trajectories may benefit from broadening the range of dependent variables examined. The impact of parenting on psychological well-being is an active area of research, but fewer studies consider how parenthood affects physical well-being (e.g., overall health status and mortality risk), even though recent evidence points to the importance of further research on these outcomes (Denney, 2010; Grundy & Kravdal, 2008; Kendig et al., 2007; Mirowsky, 2005). Scholars should clarify how parenthood influences health outcomes over the life course. For example, parenthood may have stronger effects on *psychological* well-being early in the life course when children impose daily stress and stronger effects on *physical* health later in life when the long-term effects of parenting on health behaviors and psychological wellbeing begin to reveal themselves. Future work that considers how different facets of parenting (e.g., stress, support, ambivalence) influence a range of well-being measures can reveal a more nuanced

understanding of parenthood and wellbeing across the life course (Greenfield & Marks, 2006; Nomaguchi & Milkie, 2003; Pudrovska, 2009).

Linked Lives and Multiple Methods

The concept of linked lives—positing that historical events and individual experiences are interrelated through the linked fates of family members (M. Bengtson & Allen, 1993)—has been influential in research on parenthood at all stages in the family life course, although it is particularly prominent in studies of older parents and their adult children. Recent research clearly shows that parents and children affect each other over the life course, and the events and transitions in the lives of one generation have repercussions for the other generation (Early et al., 2002; Greenfield & Marks, 2006; Milkie et al., 2008). The theoretical emphasis on linked lives and intertwined trajectories of parents and children calls for data and methods that transcend the individual level and incorporate perspectives and experiences of both generations. Surprisingly, this strong and consistent theoretical focus on linked lives has not yet been fully implemented in methodological aspects of parenthood research. Most studies of older parents and adult children rely on reports of either parents or children, but not both sides (Greenfield & Marks), even in qualitative interpretive studies (Carr, 2004; Schmeckle, 2007). Research on the psychological implications of parenting minor children has considered the linked lives of mothers and fathers. Recent studies of the effects of parenthood on marital quality increasingly incorporate couples, obtaining reports from both members of the parental dyad, and use multilevel modeling (Crouter & Booth, 2004; Kluwer & Johnson, 2007). Yet, despite advances in theoretical understanding of linked lives of family members, research on the effects of young children on couples' marital happiness or on couples balancing work and family demands is often based on individual level data as surveys typically collect information from one member per household. Because the lives of mothers and fathers as well as parents and children are interdependent, future research should continue substantiating the theoretical emphasis on linked lives with family level data and models. Findings from recent studies—together with the concept of linked lives—underscore the importance of incorporating perspectives of multiple family members.

Related to linked lives is the notion of *interlocking trajectories or pathways* suggesting that the life course is characterized by “the interlock of multiple role trajectories and the interconnections between multiple role transitions over time” (Macmillan & Copher, 2005, p. 860). This concept may be particularly important for parents of minor children for whom time and labor-intensive demands of the parental role are taxing, and the problem of combining parenthood with other major social roles is acute. Recent research has advanced our understanding of the context of parenthood by paying particular attention to parents' marital and union statuses (Avison et al., 2007; Evenson & Simon, 2005; Nomaguchi & Milkie, 2003; Woo & Raley, 2005). Future research should involve more detailed exploration of the ways that parenthood interacts with family, work, and other roles over the life course to influence well-being of parents with minor and adult children. Increasing complexity of the context of family life calls for shifting the research focus from main effects of parenthood to interactions of parenthood with other roles.

Multiple Clocks

A life course perspective incorporates three temporal dimensions: individual time, generational time, and historical time (M. Bengtson & Allen, 1993; Macmillan & Copher, 2005). This view of multiple clocks focuses on the intersection of social and cultural contexts, cohort experiences, and individual biographies (M. Bengtson & Allen). From a life course perspective, it is crucial to examine the interplay of age, cohort, and period effects on the experiences of parenthood. For example, Koropecj-Cox et al. (2007) explored psychological implications of motherhood and childlessness among middle-aged women

who came of age in the 1950s and discussed the extent to which cohort and period influences shaped the well-being of childless women and mothers in late midlife.

Demographic trends and social norms around parenthood change over time and the experience and effects of parenthood change with those trends and norms (Hewlett, Rankin, & West, 2002). An important goal for future research is to empirically examine how the link of parenthood and well-being has changed over historical time. Given incredible social change over the past several decades, we should ask if parenthood has become more or less important to well-being over time or in different ways across social groups. Future research on parenthood may particularly benefit from the age-period-cohort (APC) approach that allows one to model explicitly not only maturational developmental changes over the individual life course (i.e., age effects), but also period and cohort differences in the consequences of parenthood for physical and mental health. More specifically, it will be useful to consider how the effects of childlessness and parenthood on well-being have changed over historical time and across birth cohorts.

Heterogeneous Life Courses

A life course perspective underscores heterogeneity in structures and processes related to development. An important implication is that diversity is expected to increase over time with aging, both at the cohort and individual levels (M. Bengtson & Allen, 1993). In many studies, however, diversity is acknowledged theoretically without being analyzed explicitly. Research on middle-aged and older parents has disproportionately focused on heterosexual married couples (Ha, 2008), White adults (Carr, 2004; Pillemer & Suito, 2002; Pudrovskaya, 2008), and middle-class families (Pillemer & Suito). A study based on Black and White older parents reported pronounced race differences in the effects of parent-child relationships and adult children's problems on parents' mental health (Milkie et al., 2008). Overall, more attention should be devoted to the nature and meaning of parenthood and intergenerational relationships among racial and ethnic minorities, lower socioeconomic status (SES) groups, and parents in same-sex relationships who may face unique challenges as well as access to unique social resources.

Compared to studies of older families, research on parenting minor children and on psychological implications of the transition to parenthood has addressed diversity to a greater extent. A number of recent studies reflect experiences of young adults from disadvantaged backgrounds (e.g., Booth et al., 2008). Moreover, some studies of parenting stress in families with young children focus specifically on understudied populations that may be in particular need of intervention, for example, single African American mothers in poverty (Jackson, 2000). Yet even research on young children has mostly examined diversity along the lines of race and SES, with little attention paid to the well-being of same-sex couples parenting minor children. An important direction for future research will be a more nuanced exploration of how different configurations of gender, race, SES, and sexuality create different experiences of parenthood in young adulthood and later life. This will involve going beyond the assessment of main effects and group differences in effects to focusing on the possibility of conditioning effects. For example, the experience of parenthood and the impact of parenthood on well-being may qualitatively differ across social groups (e.g., by gender, race, SES, sexual orientation).

Agency

A life course approach emphasizes the social creation of meanings attached to family roles and considers individuals as active agents in interaction with social contexts and structures (M. Bengtson & Allen, 1993). Qualitative methods provide opportunities for studying agency and symbolic meanings by incorporating participants' voices, unique perspectives,

and accounts of lived experiences of parenthood and childlessness. Several recent qualitative studies explore the ways in which parents and children interpret family relationships and roles. For example, Schmeeckle (2007) examined gendered dimensions of relationships in stepfamilies from the vantage point of adult stepchildren. MacInnes (2008) used in depth interviews to examine how mothers' childbearing intentions are constructed in the context of caring for a child with disability. Overall, however, research on the implications of parenthood for well-being has been dominated by quantitative studies—whether large or small scale. Our knowledge of the experiences and meanings of parenthood over the life course will be dramatically improved by increasing the volume of qualitative research, especially qualitative studies of *families* that provide perspectives of multiple family members. Moreover, mixed methods—combining statistical analyses of survey data with qualitative analyses of interviews with the same participants (e.g., Carr, 2004; MacInnes)—may provide more nuanced and contextualized advances in research on parenting and well-being.

Conclusion

Social scientists have considered the effects of parenthood on well-being from the beginning of social science (Durkheim, 1897/1951), but we have moved far beyond a simple comparison of parents to nonparents. Research over the past decade reflects demographic trends and increasing diversity in family structures. Parenthood provides costs and benefits for adults' well-being, and the balance of costs to benefits reflects structural demands, resources, and tensions that further depend on one's position in the life course. Family scholars made significant advances in the study of parenthood and wellbeing over the past decade. High-quality longitudinal data sets, attention to theory, broader appreciation for life course processes, growing recognition of diversity in these processes, and the prolific research activity of well-established scholars as well as a new generation of scholars has come together to create a solid foundation for future research on parenthood and wellbeing. Parenthood and parenting experiences have significant effects on well-being over the life course, potentially contributing to cumulative advantage for some and to disadvantage for others.

Although recent studies recognize that parenting stress is greater for some groups than others, we lack a solid understanding of the various mechanisms (e.g., financial, relationship quality, access to child care and social supports) through which parenting affects well-being. The strains of parenting are not distributed equally—with women, unmarried parents, and lower SES individuals shouldering more strain and its consequences. Recent work calls attention to the burden of parenting in American society and the absence of public support for parents and children (Hewlett et al., 2002). Research on parenting stress and well-being provides impetus for public policies that address these issues. Future research should continue to focus on diversity in family forms and implications for well-being over the life course of parents and their children.

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