THE INFLUENCE OF SINGLE-MOTHER MIGRATION
ON SOCIAL AND EMOTIONAL ADJUSTMENT OF JAMAICAN
ADOLESCENTS

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DEDICATION

To my lovely wife Karen.

Did you ever know that you’re my hero,

And everything I’d like to be?

I can fly higher than an eagle,

‘Cause you are the wind beneath my wings.

(Bette Midler)
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ABSTRACT

The purpose of this study was to investigate the relationship between single-mother migration and the social and emotional adjustment in Jamaican adolescents, and to examine what factors influence adolescent adjustment. The participants were 187 Jamaican adolescents ages 13 to 17 years, from five high schools and two junior high schools from a rural area. There were 64 males and 123 females. The participants were divided into two groups – migrant and non-migrant. There were 100 participants in the migrant and 87 in the non-migrant groups.

Multivariate analyses of variance (MANOVA) and regression analyses revealed no significant differences between the groups in social adjustment. For emotional adjustment the migrant group reported higher self-esteem and lower depression compared to the non-migrant group. Results also showed that adolescent adjustment was predicted by family support and single-mother absence.

Implications for future research suggest the utilization of a mixed method approach to examine adolescent adjustment and point to the need for further research to reinforce and expand the findings of this study.
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CHAPTER ONE

Introduction

Migration and single-mother parenting are common features of Caribbean life. For many decades Caribbean people have sought employment abroad due to high unemployment rates and economic hardships (Glennie & Chappell, 2010; Smith, Lalonde, & Johnson, 2004). In the last 50 years more women than men have migrated and many of the migrants are single mothers (Gopaul-McNicol, 1993; Hine-St Hilaire, 2008). The increase in the number of single mothers migrating is problematic since almost half of all households in the Caribbean are headed by single mothers. Research has shown that approximately 45% of Caribbean households are headed by women (Hine-St Hilaire, 2008; Leo-Rhynie, 1997; Stuart, 1996). Single mothers generally migrate to create a better economic environment for their children, and in most instances they engage in serial migration, meaning that the mothers migrate without their children, leaving them in the care of extended family members, older siblings, or friends (Pottinger, 2005). In many instances mothers migrate without adequately preparing their children for their (the mothers’) departure. For example, the children may not know of their mother’s intention to migrate ahead of time, and at times no adequate preparations
are made for the care of the children (Arnold, 2006; Suarez-Orozco, Todorova, & Louie, 2002).

Research evidence reveals that though single-mother migration often has positive outcomes for both parent and children, there are negative outcomes as well (Arnold, 2006). For example, many young children in Jamaica who are affected by their single mothers’ migration often experience social and emotional problems (Pottinger, 2005), and the same is true of adolescents whose mothers have migrated (Crawford-Brown, 1999). It has even been found that some adolescents who reunite with their parents abroad experience significant problems as they try to re-adjust to their parents after lengthy periods of separation (Arnold, 2006; Dudley-Grant, 2001). Problems experienced by adolescents are many and diverse, but two that could have a significant life-long influence on their overall well-being are social and emotional adjustment (Procidano & Heller, 1983).

*Social Adjustment*

Social adjustment is a fundamental skill that human beings need in order to function effectively in social settings (Compas & Reeslund, 2009). Social adjustment may be viewed as the extent to which a person develops competence in inter-personal communication, forms healthy relationships, establishes his/her independence, displays social connectedness, and demonstrates good coping skills (Bukowski, Hoza, & Boivin, 1993). The ability of adolescents to develop the social skills necessary for social adjustment is influenced to a great extent by the nurturing and support they receive in the home setting, especially their relationship with their parents (Mueller, 2009). Adolescents who report a positive relationship with their parents, and who feel comfortable turning to
them for support, have been found to have a greater sense of mastery of their social environment (Paterson, Pryor & Field, 1995). Social support, that is, the adolescents’ perception that they are cared for, esteemed, and valued by persons in their social network, is essential for the process of social adjustment (Demaray, Malecki, Davidson, Hodgson, & Rebus, 2005), and the family plays a very important role in providing this kind of support for adolescents (Bronfenbrenner, 1979). Any disruptions to normal family functioning, however, such as a prolonged separation of parent and adolescent, could negatively impact the development of appropriate social skills by the adolescent to negotiate the social environment (Compas & Reeselund, 2009). In addition to social adjustment problems, single-mother migration also causes other challenges for Jamaican adolescents, one of which is emotional adjustment (Pottinger, 2005; Smith et al., 2004).

*Emotional Adjustment*

Emotional stability is an essential requirement for normal, healthy functioning, but often the attainment of stability necessitates overcoming internal and external challenges, a task which calls for emotional adjustment (Marcotte, Marcotte, & Bouffard, 2002). Emotional adjustment is an individual’s ability to maintain emotional equilibrium in the face of internal and external stressors (Bukowski, Hoza, & Boivin, 1993). Of the factors that influence adolescent emotional adjustment, one of the most important is the home (Bronfenbrenner, 1979). It has been found for example, that high levels of parental support and approval are protective factors against depression in adolescents (Mueller, 2009), and that high levels of family cohesion and close family relations are found to be buffers to some internalizing behaviors for adolescents (Demaray et al., 2005). Overall adolescents have the best emotional outcomes when they have positive caring
relationships that value, respect, and support them, thus helping to raise their self-esteem (Mueller, 2009). In many instances, however, adolescents whose single mothers have migrated do not have these positive relationships, and may be susceptible to various internalizing behaviors. There is evidence, however, of attenuating factors which can reduce the negative effects of single-mother migration (Suarez-Orozco et al., 2002). These factors include the extended family, support from the transnational family, and child-shifting (Gopaul-McNicol, 1993; Suarez-Orozco et al., 2002).

**Significance of the Study**

This study is important in that it sought to address issues related to migrant single mothers and their children that are not adequately addressed in the literature. For example, a large number of children and adolescents are affected by migration separation which may last for 10 years or more (Smith et al., 2004; Thomas-Hope, 1999). Specifically, not much research has been done on the effect of single-mother migration on adolescent adjustment in Jamaica. There is a fair amount of literature addressing the impact of parental migration on children (e.g. Arnold, 2006; Pottinger, 2005; Smith et al., 2004; Suarez-Orozco et al., 2002). There is also much research on adolescent adjustment problems when Jamaican adolescents reunite with parents in their adopted countries (Arnold, 2006; Dudley-Grant, 2001; Glasgow & Gouse-Sheese, 1995). But the literature which addresses the effect of single-mother migration on adolescents while the adolescents are still living in Jamaica is significantly limited.

It is important to investigate this issue because unlike adolescents from two-parent homes who still have a parent around when one parent migrates, adolescents from single-mother homes are often left without a parent-figure when their single mothers
migrate. The research findings on the effect of parental migration on adolescents in general may therefore not be generalizable to adolescents who are from single-mother homes since for adolescents from single-mother homes the experience of living without a parent is different from that of adolescents who live with both parents. Also, the study investigated the factors which contributed to negative or positive experiences of adolescents of migrant single mothers who live with guardians. Possible factors included support from the extended family, parent-adolescent communications, child-shifting, and the length of time the mothers were absent (Gopaul-McNicol, 1993; Stuart, 1996; Suarez-Orozco et al., 2002). This study will add to the body of knowledge with regard to the impact of single-mother migration on the social and emotional adjustment of adolescents who continue to live in Jamaica. In light of the research findings, the purpose of this study was to investigate the relationship between single-mother migration and social and emotional adjustment in Jamaican adolescents, and to ascertain what factors influenced adolescent adjustment.

**Major Research Questions**

1. Do Jamaican adolescents whose single mothers migrate experience greater social adjustment problems than Jamaican adolescents whose single mothers do not migrate?

2. Do Jamaican adolescents whose single mothers migrate experience greater emotional adjustment problems than Jamaican adolescents whose single mothers do not migrate?

3. Are the social and emotional adjustments of Jamaican adolescents whose single mothers migrate affected by gender?
4. To what extent are the social and emotional adjustments of adolescents whose single mothers migrate influenced by support from the extended family, length of single-mother absence, and parent-adolescent communication?

Research Hypotheses

The findings that this study expected to uncover were expressed in the following hypotheses:

1. Jamaican adolescents whose single mothers migrate experience greater social adjustment problems than Jamaican adolescents whose single-mothers do not migrate.

2. Jamaican adolescents whose single mothers migrate experience greater emotional adjustment problems than Jamaican adolescents whose single mothers do not migrate.

3. There are gender differences in the way Jamaican adolescents of migrant single-mothers experience social and emotional adjustments.

4. The social and emotional adjustments of Jamaican adolescents whose single mothers migrate are influenced by support from the extended family, length of single-mother absence, and parent-adolescent communication.

Definition of Terms

Migrant single mothers: Migrant single mothers were defined as single mothers who are living abroad. For the purpose of this study migrant single mothers were defined as single mothers who had been living abroad for at least six months.

Extended family: Extended family was defined as blood relatives of adolescents other than the immediate family who are actively involved in caring for and supporting
the adolescent. Examples of extended family members are grand-parents, aunts, uncles, and cousins.

*Transnational family:* The transnational family was defined as extended family members who reside in other countries but are mutually supportive of, and are in constant contact with relatives in Jamaica.

*Child-shifting:* Child shifting was defined as the informal practice where children are reared by family members or adults other than their biological parents.

*Social adjustment:* Social adjustment was defined as the extent to which the adolescent develops competence in inter-personal communication, forms healthy relationships, establishes his/her independence, displays social connectedness, and demonstrates coping skills. Social adjustment was operationalized as the perception of peer acceptance and perception of family social support, and was measured by the Self-Perception of Profile for Children – Peer Acceptance subscale (SPPC – PA), and the peer and family subscales of the Vaux Social Support Record (VSSR).

*Emotional adjustment:* Emotional adjustment was defined as an individual’s ability to maintain emotional equilibrium in the face of internal and external stressors. Emotional adjustment was operationalized as self-esteem and depression, and was measured by the Rosenberg Self-esteem Scale (RSES) and the Beck Youth Inventory – Depression (BYI – D).
CHAPTER TWO

*Literature Review*

*Normative Adolescent Development*

Adolescence is a period of dramatic physical, psychosocial and cognitive changes that all individuals experience as they transition from childhood to adult status. Physical changes include a rapid acceleration in growth, and the development of primary and secondary sex characteristics (Susman & Dorn, 2009). Psychosocial changes are social transitions in the person’s self-concept and the way the person relates with other persons (Woolard & Scott, 2009). Psychosocial changes are driven by the emerging sense of identity which transforms how adolescents view themselves and others around them, such as their families (Woolard & Scott, 2009). These changes tend to make adolescents more mature and able to think about, and make decisions on a range of issues that they did not have to attend to during childhood. These issues include intimacy, sexuality, future work, and family roles (Coleman & Hagell, 2007; Halpern-Felsher, & Cauffman, 2001; Woolard & Scott, 2009).

Cognitive and hormonal changes condition adolescents to think and behave in radically different ways from their childhood patterns (McElhaney, Allen, Stephenson, &
Hare, 2009). Cognitive development enables the adolescent to think beyond what is real to what is possible, and to engage in abstract, multidimensional, and relativistic thinking (Clark & Delia, 1976; Daniel & Klaczynski, 2006). One of the most important outcomes of adolescent cognitive development is the emergence of autonomy. As their sense of autonomy and identity develops adolescents begin to see the world from a different perspective, and are apt to behave according to the new perceptions they have of the world around them and the new meanings they attach to these perceptions (McElhaney et al., 2009).

Adolescent autonomy manifests itself in at least three ways – emotional, behavioral, and cognitive. Emotional autonomy is a process that begins in infancy and peaks in adolescence and is a gradual progressive sharpening of the person’s sense of self as an autonomous, competent person, separate from his/her parents (McElhaney et al., 2009). Emotional autonomy is the process of individuation whereby adolescents begin to establish their emotional independence from their parents. This process is characterized by connectedness, separation, and detachment, (Beyers, Loeber, Wilstrom, & Stouthamer-Loeber, 2001). Connectedness reflects the close parent-adolescent relationship characterized by mutual reciprocity, trust, and dependency. Adolescents who score high on this dimension tend to regard parents as available and easy to talk to (Beyers et al., 2001). Separation reflects interpersonal distance between parents and adolescents, and is impacted by the adolescent’s de-idealization of the parents; however, the adolescent is still likely to turn to the parents for support in times of crisis (Bosma, Jackson, Zijssling, Zani, Cicognani, & Xerri, 1996). Detachment describes a process of transformation of the parent-adolescent relationship in which the adolescents become
increasingly independent without totally severing the parental bond (Hart & Felger, 1995; McElhaney et al., 2009; Simona, 2009).

Behavioral autonomy is the ability to use the advice of other persons to help one to make independent decisions, but retaining the responsibility of making one’s own decisions (Halpern-Felsher & Cauffman, 2001). Along with the emergence of behavioral autonomy, adolescents’ identities begin to emerge, and this tends to spur significant changes in the way they perceive persons and situations. As a result they tend see their parents differently than how they viewed them previously. For example they are now able to engage in perspective taking and hypothesizing (McElhaney et al., 2009). With their developing sense of identity they begin to de-idealize their parents and to view them in both positive and negative lights. Adolescents tend also to show a marked change in their attitudes toward parental control and decision making about issues affecting them. For example, they are likely to view some disciplinary techniques more negatively, though in childhood they would likely have submitted without question to their parents’ decisions and actions (Hart & Felger, 1995; McElhaney et al., 2009). Adolescents are more willing to disagree with, and to challenge their parents, as is evident in the increased frequency and intensity of the conflicts they engage in during this period (Bosma et al., 1996; Laursen, Coy, & Collins, 1998; McElhaney et al., 2009). This increased conflict is attributed to their increasingly autonomous thinking and growing sense of identity which prompt them to not only express their own opinions, but also to define areas of conflict as actively exercising their rights rather than yielding to parental dictates (McElhaney et al., 2009; Smetana, Braeges, & Yau, 1991).
The development of cognitive autonomy is highlighted by adolescents’ ability to think in more advanced and sophisticated ways than they were able to as children, such as abstract, multidimensional, and relativistic thinking (Daniel & Klaczynski, 2006). Cognitive autonomy is not fully established until later adolescence, but early adolescents show signs of increasing sophistication in the way they think about moral, political, and religious issues; their beliefs become rooted in general principles, and their beliefs become increasingly centered in their own value system, instead of the system of values passed down by authority figures (Hart & Fegley, 1995). Adolescents are better able to think independently and are now able to consistently see themselves as separate from their parents/caregivers (McElhaney et al., 2009). Thus they are able to form opinions that are different from those of their parents and other adults, conceptualize aspects of their day-to-day lives as more contingent on personal choice and less on parental directive, and increasingly define themselves as separate individuals with their own thoughts, feelings, and actions (McElhaney et al., 2009; Smetana et al., 1991).

Although the achievement of autonomy may lead to differences of opinions and increasing conflicts between parents and adolescents, it does not mean that the adolescent seeks total freedom from parental influence – they just want more freedom. More importantly, their increasing autonomy does not mean that they perceive their parents as irrelevant. Rather they perceive the parental role as more advisory and collegial, and less authoritarian (Halpern-Felsher & Cauffman, 2001). Two indications of how well adolescents navigate through this period are how they relate to other persons (social development) and how they feel about themselves (emotional development).
Social Development

Social development is a measure of the ability of individuals to competently navigate the social demands of their immediate environment (Howes, Phillips, & Whitebook, 1992). In order to competently navigate the environment the individual must develop social skills such as listening, being responsive to others, the ability to engage in conversation, and the acceptance of responsibilities (Howes, Phillips, & Whitebook, 1992). The adolescent’s social development involves mobilizing personal and environmental resources to achieve good interactional outcomes in a given context. Personal resources include the use of internal schemas to interpret stimuli encountered in the environment to determine what the appropriate responses are in particular contexts (Howes, Phillips, & Whitebook, 1992).

The extent to which the adolescent achieves the social competence required for normative social development is dependent on a variety of influences including social support from the family and his/her relationship with his/her parents, especially the mother (Adams, 1985; Allen, McElhaney, Land, Kuperminc, Moore, & O’Beirne, 2003; Lloyd, 2002). Family social capital, or social support, including wider kinship relations, can provide valuable support for adolescents as they go through the period of transition (Marcotte, Marcotte, & Bouffard, 2002). Social support is defined as the adolescent’s perception that he/she is cared for, esteemed, and valued by persons in his/her social network. Although social support can come from multiple sources including parents, teachers, siblings, and peers (Demaray, Malecki, Davidson, Hodgson, & Rebus, 2005), the family plays a very important role in providing this kind of support for adolescents (Bronfenbrenner, 1979).
The family is important in that it provides a safe environment in which individuals can freely explore their surroundings, which enhances and influences their own development (Bronfenbrenner, 1979). In adolescence the roles of the family with regard to adolescents’ social development are different than what they are at the childhood stage, but they are just as important as in childhood, and when the family fails to perform these roles it is likely to negatively impact adolescents’ development (Coleman & Hagell, 2007; Compas & Reeslund, 2009). Research shows that adolescent actions correlate highly with the actions of their families, thus highlighting the role of the family in providing a setting where adolescents can rehearse and perfect the roles they perform in social settings outside of the family (Mueller, 2009). Longitudinal research on social support has consistently conceptualized social support (including family social support) as a dynamic process, that is, it changes from one time period to another (Demaray et al., 2005). Because of its dynamic nature, the presence or absence of social support can influence adolescent development both positively and negatively. Perceptions of increased social support have been found to be related to improved behavioral and academic adjustment by adolescents (Demaray et al., 2005).

In addition to family support in general, the parents play a crucial role in the social development of the adolescent. It has been found, for example, that warm and supportive parental practices are positively associated with prosocial behaviors by adolescents (Demaray et al., 2005). While it is true that individuals become increasingly independent during adolescence and rely on their peers more than they did previously, they still need and value the support of their parents (Hay & Ashman, 2003). This is true, especially when parents exhibit their knowledge of the complexities of the adolescence
process and provide warm and supportive guidance for their adolescents (Morrison, Laughlin, Miguel, Smith, & Widaman, 1997). Research indicates that such display of parental warmth, understanding, and support can have a huge, favorable impact on adolescents’ development. This is so because the typical response of adolescents in such circumstances is to perceive their parents as role models, leading to greater trust and mutual respect (e.g. Adams, 1985). Social interaction is influenced to a greater extent by how a person feels than by external stimuli, and the processes of social and emotional development are closely related and inseparable in terms of how they impact and shape adolescent personality and social interaction.

*Emotional Development*

Emotional development is the process of learning to control one’s feeling or affect in order to adapt to specific contextual demands (Campos, 2005). Emotional development involves emotional regulation, emotional competence, and emotional intelligence. Emotional regulation is the ability to effectively manage arousal in order to adapt and achieve a targeted goal (Brownell & Kopp, 2007; Denham, Bassett, & Wyatt, 2007; Thompson & Goodvin, 2007). Emotional competence is the development of skills for use in social contexts such as having an awareness of one’s emotional state, and detecting the emotional state of others (Saarni, 2006); emotional intelligence is the ability to monitor one’s own and others’ feelings, and to use that information to guide thinking and action (Salovey & Mayer, 1990).

Emotional development is a critical process in overall adolescent development, and affects and is affected by a variety of internal and environmental factors such as mood fluctuation, depression, self-esteem, parental support, attachment, and family
support. Emotional development in adolescence is often influenced by mood fluctuations (Bukowski, Hoza, & Boivin, 1993). Research has shown that early adolescence is a period that is characterized by extreme emotions. These emotional fluctuations may be related to the variability of hormones during this period (Grecas & Schwalbe, 1986). For example, Larson and Richards (1994) found that adolescents reported more extreme and more fleeting emotions than their parents did. Larson & Lampman-Petraitis (1989) also found that from the fifth to the ninth grade both males and females experienced a sharp decline in happiness, and adolescents were more likely than preadolescents to report negative emotions.

In some instances mood fluctuations may lead to depression. According to the Diagnostic and Statistical Manual of Mental Disorders 4th edition, Text Revised (DSM-IV-TR), depression is one of a class of mood disorders that are characterized by combinations of negative dispositions such as depressed mood, loss of interest in pleasure, loss of energy, diminished ability to think, and feelings of worthlessness (APA, 2003). Research has found that a combination of internal and external attributions is responsible for the onset of depression (e.g., Abramson, Metalsky, & Alloy, 1989). Internal attributions include variables such as pessimism, low self-esteem, self-consciousness, and poor coping skills (Lewinsohn, Roberts, Seeley, Rhode, Gotlib, & Hops, 1994), and external attributions include various types of family disruption, inter-parental conflict, perceived maternal rejection, and day to day stressful circumstances (Rudolph, Kurlakowsky, & Conley, 2001). It is generally reported that females are more likely to be diagnosed as depressive than are males (e.g., Bohman, Jonsson, Knorring, Knorring, Paaren, & Olsson, 2010; Murakumi, 2002; Rudolph et al., 2001).
Mood swings in adolescence not only lead to depression at times, but also tend to influence adolescents’ sense of self-esteem, that is, how positively or negatively they think of themselves. The literature shows that early adolescents tend to have lower self-esteem than pre-adolescents or older adolescents (Connolly & Konarski, 1994; Harter, 1999; Reimer, 1996). However, parents can play a very important role in raising and maintaining adolescent self-esteem. It has been found that adolescents’ perceptions of parental support correlate highly and positively with high self-esteem (Grecas & Schwalbe, 1986). Adolescents’ self-esteem has been found to be directly affected by their relationship with their parents. In one study male self-esteem was found to be more strongly related to parental control, while the female self-esteem was more related to parental support (Grecas & Schwalbe, 1986). In another study, involvement in shared activities with parents was found to correlate positively and highly with adolescent self-esteem (Demo, Small, & Savin-Williams, 1987). In this study it was found that communication, participation with parents in shared activities, conversations, and support, were positively related to high self-esteem in adolescents.

It is interesting to note that though parental support in general tends to have a positive effect on adolescent self-esteem, some research seems to indicate that the mothers have a particularly important role that only they can perform. For example, Allen and his colleagues (2003) found that maternal attunement is a very important influence on adolescent emotional development (Allen et al., 2003). They explain that maternal attunement is the extent to which a mother is attuned to her adolescent’s internal states, whereby her knowledge and understanding of the adolescent is such that she is able to respond appropriately to the adolescent’s striving for autonomy, yet making herself a
reference point of comfort in times of emotional stress (Allen et al., 2003). They also found that the strength of the mother-adolescent relationship – the extent to which mother and adolescent are able to maintain a strong relationship despite disagreements – significantly and positively impacts adolescent development (Allen et al., 2003). In support of the special role that mothers play in adolescents’ development, Demo and colleagues (1987) found that often adolescents’ reports of family relations were more congruent with the reports of the mothers than with the reports of the fathers, which probably emphasizes the extent to which mothers are more attuned to their children’s internal states (Demo et al., 1987).

As parents interact with their children they automatically develop relational bonds called attachment. The attachment process starts in infancy and becomes stronger as the child learns to trust and rely on his/her caregiver, most often the mother (Bowlby, 1973). Attachment behaviors may be classified broadly as secure and insecure attachment, but there are sub-categories of insecure attachment as well. Secure attachment is related to the availability and responsiveness of the caregiver, while insecure attachment is related to the unavailability and unresponsiveness of the caregiver (Ainsworth, 1989). Therefore, when a child has to endure lengthy separations from his/her caregiver it is likely that the attachment bond will weaken (Bowlby, 1973). In adolescence, persons who are securely attached tend to think positively about themselves and others, while persons who are insecurely attached tend to have negative thoughts about themselves and others (Bartholomew & Shaver, 1998). Secure attachment to parents in adolescence may facilitate the adolescent’s emotional competence and well-being, as reflected in such
characteristics as self-esteem and emotional adjustment (Cooper, Shaver, & Collins, 1998).

In addition to parental support and attachment, adolescents’ emotional development relies on family support in general. Demaray and colleagues (2005) found that social support from the family is a strong influence on emotional adjustment in adolescence; for example high levels of family cohesion and close family relations are found to be buffers to the internalizing of some behaviors for adolescents, especially females (Demaray et al., 2005). It has also been found that high levels of family support, parental attachment, and approval, are protective factors against depression in adolescents (Mueller, 2009). Adolescents have the best emotional outcomes when they have positive caring family relationships that value, respect, and support them, thus helping to raise their self-esteem (Mueller, 2009). The rapid and confusing changes that adolescents experience often give rise to negative outcomes such as conflict and distress, but interactions with the family can enhance adolescent development through the support the adolescent receives from the family (Coleman & Hagell, 2007).

Obviously the parents and family have a very important role to play in the normal development of individuals, and especially so during the adolescence phase of development. Any disruptions to normal family functioning therefore can have serious implications for the adolescent (Compas & Reeselund, 2009). One of the most traumatic types of disruptions that many children and adolescents contend with is serial migration, a very common problem for Caribbean adolescents.
**Migration in the Caribbean**

For the typical Jamaican adolescent the challenges of adolescence are no more complicated than it is for adolescents in any other country, but for those whose single mothers migrate to other countries, the challenges can become overwhelming. Many Jamaican adolescents navigate this difficult period while trying to cope with disruptions in family functioning, and without the support of their single mothers, both situations caused by migration. Migration and single-mother household are common features of life in the Caribbean, and when single-mothers migrate it often creates problems for the children left behind (Miner, 2003; Smith et al., 2004).

The Caribbean has a very long history of migration, which is a very normal and common aspect of life. In the last four decades in Jamaica, for example, the migration rate has averaged 20,000 persons per annum (Pottinger, 2005; STATIN, 2010). The most recent census revealed that the size of the population in 2008 was 2.6 million persons (STATIN, 2010). The main reasons for Caribbean migration are high unemployment and economic hardships. The unavailability of jobs prompts many in the Caribbean to seek employment opportunities in other countries. Caribbean migration typically takes one of three patterns: *family, seasonal, or serial*, migration (Smith et al., 2004). *Family* migration involves the family migrating together as a unit; *seasonal* migration takes place when one parent works in a foreign country for up to 6 months before returning to the home country; *serial* migration is a two-stage process which takes place when the parents migrate either singly or together, but without the children, with the intention of obtaining permanent residence in the country where they work, and having their children join them at a later date (Smith et al., 2004; Suarez-Orozco et al., 2002). The type of migration in
which people engage is usually dictated by economic circumstances. People in the higher socio-economic groups are more likely to engage in family migration, but those from the lower socio-economic group tend to engage in serial migration.

Serial migration is often a lengthy process, with the period between the time the parents migrate and the time the children join them ranging from three to 10 years. It normally takes the parents that long to satisfy the legal, immigration, and financial requirements of the host country before their children can join them (Pottinger, 2005; Smith et al., 2004; Suarez-Orozco et al., 2002). In the absence of the parents, the children are raised by other family members or friends until they can be reunited as a family (Mitriani, Santisban, & Muir, 2004).

One of the most important issues concerning migration in the last 50 years is the change in the pattern of migration, along with the implications it has for Caribbean children, adolescents, and families. In the period before the 1960s more men than women migrated (Gopaul-McNicol, 1993). However, since the 1960s, more women (primarily single mothers) than men have migrated (Miner, 2003; Smith et al., 2004). One reason for this change of pattern is that in the United States, which attracts the majority of Caribbean migrants, more employment opportunities, such as household helpers and nurses’ aides, have been created for women than men (Hine-St. Hilaire, 2008). In addition to the availability of jobs overseas, many who decide to seek jobs are single mothers. When single mothers migrate the care of their children becomes a matter of concern both because of the need to find suitable guardians and because of the magnitude of the problem. Single-mother migration is a serious problem in Jamaica because of the preponderance of single-mother households (Gopaul-McNicol, 1993; Hine-St Hilaire,
Research has shown that approximately 45% of Jamaican households are headed by single mothers (Leo-Rhynie, 1997; Stuart, 1996). Various hypotheses have been advanced to explain the absence of the fathers in many Caribbean homes. These include the effect of the migration of large numbers of men, and the loose and temporary arrangements of cohabiting relationships (Stuart, 1996). On the other hand the dominance of women in Caribbean society and the central role they play in the family are well documented (Hine-St Hilaire, 2008; Leo-Rhynie, 1997; Miner, 2003; Stuart, 1996). Even in homes where the father is resident the mother is likely to be the chief decision maker. Against this background, when a woman migrates, her prolonged absence tends to have huge implications for the family, and when a single mother migrates the problems are likely to be even greater.

**Impact of Migration on Children and Adolescents**

Migration has both positive and negative effects on the family, and though in some instances the negative effects can cause significant disruptions, in other instances there are family characteristics that cushion the damaging effects that migration can cause. One of the most important impacts of migration on the Caribbean family is the increased standard of living associated with migration (Seaga, 2005). As noted above, the opportunity for employment is one of the chief reasons for Caribbean migration. Caribbean workers go abroad in search of jobs to better themselves and their families economically (Smith et al., 2004). It is customary therefore for migrants to send remittances (money) back to their home country to support their children, parents and extended family members. Also, because many intend to return to their home countries after they retire, they remit funds for investment ventures and to construct residences in
anticipation of their return home (Seaga, 2005). One source noted that Jamaican families who have at least one family member living abroad receive an annual average of US $640 in remittances from the family member working abroad (Glennie & Chappell, 2010). The World Bank estimated that in 2007 remittance inflows to the Jamaican economy totaled two billion dollars, making it one of the most important contributions to the national income (Glennie & Chappell, 2010).

Another important positive effect of migration on the family is the increase in social status as a result of having someone living abroad (Glennie & Chappell, 2010). Because of high unemployment and low-performing economies many Caribbean people experience severe living conditions. Living and working overseas is regarded by many as one way of achieving their goal of economic independence, and those families who have members living abroad are regarded as privileged (Larmer & Moses, 1996). The status of the family is also enhanced by the opportunities for travel and exposure that are associated with having a family member living abroad, as children and parents of the migrant family member are able to travel to spend vacations and holidays with the migrant family member. In addition to the current status of having a member living abroad, children of migrant parents are usually motivated by the prospect of going abroad to join their parents, because the goal of migration is that the entire family will eventually relocate to the foreign country (Larmer & Moses, 1996).

Despite the positive outcomes of migration, there are negative impacts on the family as well, such as confusion in young children who were not properly prepared for their parents’ migration, ambiguous grief, attachment problems, and anger and loneliness. One of the most damaging effects of serial migration on the family is that children are
often left vulnerable and unsupervised, exposing them to negative psychological outcomes (Pottinger, 2005; Suarez-Orozco et al., 2002). The literature indicates that almost 50% of households in the Caribbean are single-parent homes (Leo-Rhynie, 1997) and given that many of the migrants are single mothers the implication is that because of single-mother migration many children are deprived of a resident parent. In some respects therefore, serial migration leads to a total breakdown in the immediate family (Pottinger, 2005).

The negative effects of the breakdown of the family unit are not solely attributable to departure of the single mother, but often more so to the manner in which the single mother left (Suarez-Orozco et al., 2002), as often the children are not told in advance of the single mother’s intention to migrate. As a result they are often unprepared for the disruption caused by the single mother’s migration. In addition to the absence of the single mother and the failure to prepare the child for the single mother’s migration, sometimes no adequate preparations are made for the care of the children while the single mother is away (Larmer & Moses, 1996). Parents in general may fail to prepare their children for a number of reasons. For example, parents often adopt an authoritarian style of parenting in which they typically make decisions without consulting with or informing their children about the decisions taken. Also, in some instances not much thought is given to how the children will be cared for while the parents are away. At times, especially in the case of single-parent homes, an older sibling or a friend is left to care for the children, which sometimes results in deprivation and exposure to abuse (Pottinger, 2005).
The growing clinical literature suggests that issues of grief and loss are among factors that affect children who are separated from other family members by migration (Pottinger, 2005). The grief experienced by these children is different from that experienced by a child whose parents are either dead or divorced. A child whose parents are dead or divorced is sad because of the loss; however, the grieving process helps the child to come to terms with the loss and he/she is most likely able to adjust to the reality that the person or the relationship is gone permanently. Grief and loss for children separated by migration is different – it is ambiguous in nature (Suarez-Orozco et al., 2002). The explanation is that grieving for them is about a temporary loss. They are grieving the loss of the parent but they are not sure for how long they will grieve, because they do not know when or if their parent will come back for them. The ambiguity is also evident in the contrasting reactions of the children to their parents’ migration, as on occasions they will express loneliness and sadness, but on other occasions, happiness, such as when a barrel arrives with food, clothing and other items (Pottinger, 2005). In other words they are grieving the loss of someone who is physically absent but psychologically present in the form of food, clothing, and gifts (Pottinger, 2005).

The absence of single mothers can lead to many other adjustment problems for children and adolescents, such as conduct disorder. For example, in a study done among Jamaican adolescent males in a correctional facility for male juvenile adolescents it was found that the absence of parents (especially mothers) is a significant factor in the development of conduct disorder in children and adolescents (Crawford-Brown, 1999). The study was done among 124 inmates and was divided into two groups - a conduct-disordered group and a non-conduct-disordered group. The study found that in the
conduct-disordered group, 87% of the mothers were absent from the homes, compared with 32% in the nonconduct-disordered group. The reason for most of the mothers’ absence was migration. It was noted previously that many Caribbean households are headed by women; of even greater importance is the reality that women are often seen as the most influential figure in the family, even in those households where men are present (Glasgow & Gouse-Sheese, 1995). Evidently, as the central figure in the family, women play a very significant role in the functioning of the family, and it appears that when they are absent the family loses its stability, and children and adolescents are exposed to a variety of negative outcomes.

These negative outcomes include anger, fear, and loneliness. Children often report feelings of anger, fear, and loneliness. For example, in a study conducted by Pottinger (2005) among primary school children whose parents had migrated, 47% said that they felt lonely, afraid, and angry, and 77% worried that no one would protect them (Pottinger, 2005). Research evidence shows that the longer the separation between parents and children, the more angry and lonely the children tend to get (Suarez-Orozco et al., 2002). The period of separation is often between three and 10 years (Smith et al., 2004). In this period children are likely to feel that they have been abandoned and that the migrant parent no longer cares for them. There is evidence in the literature of reunions between parents and children which are marred by high expectations of the parents for a wonderful reunion, and perceptions of the children that the parents do not really care about them (e.g. Chamberlain, 2006; Smith et al., 2004), thus resulting in conflict.

In addition to the vulnerabilities faced by adolescents generally, it is even more challenging for adolescents who are from single-parent homes and have experienced
family disruptions. Research has suggested that children who are from single-parent families and have experienced family disruptions have more difficult lives and tend to have more limited and less desirable outcomes than children who are not affected this way (Antaramian, Huebner, & Valois, 2008). The main risks for children from single-parent homes are the risks of poverty, less time to interact with parents, thus less emotional support, and fewer opportunities for development (Compas & Reeselund, 2009). Research has indicated a clear disparity between outcomes of children from two-parent families and those from other family types such as single parent or reconstituted families (Coleman & Hagell, 2007).

While adolescents from single-parent homes are at risk compared with children from two-parent homes, those who are raised without a parent have an even greater challenge which has the potential for significant negative impact on their development. Adolescents whose single parents have migrated are often reared by persons other than their biological parents or a relative (Chamberlain, 2006). The adolescents’ reaction to this arrangement can be quite varied, depending on whether the alternate family is a part of the extended family or are just acquaintances. For example, adolescents who are living with an alternate family are likely to respond negatively if pejorative terms such as “looked after” adolescents, “somebody else’s child” or “problematic” are used in reference to the adolescents (Compas & Reeslund, 2009). An adolescent who has the perception of being so labeled is likely to be uncomfortable and be vulnerable to negative outcomes (Compas & Reeslund, 2009). Fortunately, at least for some adolescents, the adversities of migration separation are soothed by environmental conditions that reduce the hardships associated with the absence of single mothers.
**Attenuating Factors for Migration Effects**

The tendency to spontaneously attribute negative outcomes to the practice of serial migration has been questioned in the literature. Suarez-Orozco and colleagues (2002), for example, have challenged the assumption that Caribbean children and adolescents whose parents have migrated are at risk of mal-adjustment (Suarez-Orozco et al., 2002). They argue that some of the unique features of the Caribbean family ensure that the possible negative outcomes resulting from the absence of the parents are kept at a minimum (Suarez-Orozco et al., 2002). They highlight features of the Caribbean family such as the extended family, child-shifting, and the transnational family as customs and processes that counteract the possible negative effects of parental absence (Arnold, 2006; Fog-Olwig, 1999; Suarez-Orozco et al., 2002).

In the Caribbean the extended family is a very important component of the family structure. The extended family comprises blood relatives other than the immediate family including grand-parents, uncles, aunts, and cousins (Leo-Rhynie, 1997). At times an extended family comprising three or more generations may inhabit the same dwelling, but at other times they have separate dwellings. Regardless of the logistical structure, there is a bond among these family members that allows them to cooperate in tasks such as raising the children and taking care of the sick and older family members (Arnold, 2006; Smith et al., 2004). They will pool their resources to achieve financial, economic, or social goals (Miner, 2003).

Because of the presence of the extended family, many children who are left behind by their migrant parents are cared for by close family members, and are not at risk of abuse or negative psychological outcomes as children in other cultures may be (Hine-
St. Hilaire, 2008). In fact the literature notes that in many cases it is the presence of the extended family which allows many single mothers to migrate, as in the majority of cases they are able to leave their children in the care of their own mothers (Miner, 2003). It shows that because of the nature and activism of the extended family children tend to be as comfortable with members of the extended family as they are with their own mothers (Suarez-Orozco et al., 2002). The literature shows that the absence of the mother does not significantly disrupt the normal functioning of the adolescent as these other figures can provide some support in the absence of the mother (Miner, 2003). More important, after enduring the initial stress of the single mother’s migration the child is likely to respond more positively to members of the extended family (Smith et al., 2004; Suarez-Orozco et al., 2002). The ease with which children can adjust to alternate living arrangement is attributable in part to the practice of child shifting which is prevalent in the Caribbean.

**Child Shifting**

Along with the role of the extended family, the practice of child-shifting helps to make adjustment easier after the migration of the parent because it is a fairly common practice. Child-shifting is where a child is allowed to live with a family member other than the biological parent, such as a grand-parent, an aunt, or cousin, and that family member rears the child as his/her own child (Miner, 2003). Child-shifting is done for various reasons, including economic reasons such as where a parent is unable to provide for that child, or for support, such as in the case of a grandparent or aunt who lives alone (Leo-Rhynie, 1997). Child-shifting helps to ease the stresses of migration since it is likely that the child who has to move to a new household may not feel stigmatized (Hine-St. Hilaire, 2008). This is possible because child-shifting is a common practice, the particular
child is likely to have experienced child-shifting before, and it is likely that the new home is with a blood relative with whom the child already has an established relationship.

*The Transnational Family*

Another factor that possibly cushions the impact of potential negative effects of migration on the Caribbean family is the emergence of a transnational family (Chamberlain, 2006). The concept of a transnational family is that of a nuclear or extended family unit which spreads across national boundaries in which critical family functions such as economic and emotional support are shared among family members (Stuart, 1996). One of the basic features of the Caribbean family is its ability to adapt to new social forces and reconstruct in response to both internal and external pressure (Bruce, Lloyd, & Leonard 1995). Additionally, as a result of the networks that developed and those that were in place to facilitate migration, Caribbean transnational families often operate as a single unit. Even after they have been living abroad for many years, they continue to be intimately involved in the affairs of their home country, and within the context of transnational families, Caribbean families in migrant destination countries try as much as possible to maintain their Caribbean identities (Scotland, 2006).

The transnational family, despite being separated physically by migration uses the means of modern technology (such as travel by air, telecommunications, computer technology) to maintain the link between those in the home country and those who have migrated (Chamberlain, 2006). The transnational family structure strengthens family membership despite the members being separated physically, and is a powerful cultural identity in the immigrant’s adopted country (Stuart, 1996). The Caribbean transnational family dates back to the post World-War II era, when Caribbean migration to the United
Kingdom increased dramatically. Since then migration to other countries such as the United States and Canada has increased, and members of the Caribbean transnational family reside in large numbers in these countries.

The transnational family seeks to address current issues and problems that affect family members, just as a normal family located in one household would do (Chamberlain, 2006). For example, when adolescents become despondent, and express feelings of abandonment and rootlessness brought about by prolonged parent-child separation, members of the transnational family other than the mother may feel obliged to intervene to reassure the adolescent (Scotland, 2006). In other words, the transnational family helps to make family disruptions such as parental absence more acceptable to the children and adolescents in different ways. For example, when remittances are sent periodically and the parent makes regular visits the parents are kept in the children’s conscious memory in a favorable way and this is facilitated by the continuous communication pattern of the transnational family (Fog-Olwig, 1999).

In addition to facilitating the flow of material benefits, the transnational family also fosters the maintenance of strong emotional attachment as children are able to appreciate that their parents are absent in an effort to create a better future for them (Fog-Olwig, 1999). This helps children, despite being physically separated from their parents, to develop close emotional bonds with their parents, which not only helps to counter the negative effects that migration could cause, but creates a favorable connection which is likely to make permanent reunion easier (Chamberlain, 2006).

According to Chamberlain (2006), the transnational family highlights the tendency of Caribbean people to focus on the celebratory, rather than the problematic
aspects of their relationships. Chamberlain (2006) suggests that despite the many challenges and disadvantages of migration, the Caribbean people will find a way to make migration an asset rather than a liability. The effect of the transnational family can be seen in the way Caribbean immigrants support and maintain connections with their home countries through visits, letters, and electronic means, thus diminishing the negative impacts that migration may cause initially (Fog-Olwig, 1999). Increasingly they make use of modern technology to make communication and support easier and more meaningful (Glennie & Chappell, 2010).

*Theoretical Framework – Bronfenbrenner’s Ecological Model*

The theoretical framework that was used to guide this study is Bronfenbrenner’s ecological model of development (Bronfenbrenner, 1979). In his ecological model Bronfenbrenner proposes that development involves proximal processes which are complex reciprocal reactions of active, evolving human organisms with other persons, as well as objects and symbols in the immediate environment. In this theory the child is at the center of many levels of contexts (or systems) that interact to influence development over time. He described five systems, each of which is progressively distant from the child but which nevertheless impact development. They are the micro-system, meso-system, exo-system, macro-system, and chrono-system.

The microsystem includes those relationships and interactions that are closest to the child, such as family, peers, and school. In this study the micro-system included the guardians of the adolescents whose parents have migrated, as well as extended family members with whom they had daily contact. The meso-system comprises the connections between the influences closest to the child, such as the relationships between parents or
between parents and schools. In this study the meso-system included contacts between the extended family members and the guardians of adolescents whose parents have migrated.

The exosystem includes the larger social context, such as the surrounding community, that impacts children indirectly through their parents. In this study the exosystem included immigration laws and other regulations of the countries in which migrant mothers reside. For example, immigration laws prevent the immediate contact or reunion of adolescents with their parents, and the workplace regulations that govern the mothers’ employment prevent them from visiting their adolescents as frequently as they would have liked. The fourth level, the macrosystem, is the most distant from the child and includes cultural values, economic conditions, political systems, and laws, all of which flow back through the inner levels to influence the child. In this study, the macrosystem included the economic conditions which prompted the mothers’ decision to migrate.

Finally the chrono-system incorporates the unique influence of a child's personal history. The chronosystem has to do with how the passage of time affects development. In this study the adolescent had adjusted to a lifestyle in which he/she did not have a parent who was physically present who he/she could relate to. Instead, he/she lived with a surrogate parent, while the real parent was available only periodically.

The ecological model demonstrates that development does not take place in a vacuum. Though personal attributes have a role in an individual’s development, the environment - both proximal and distal – plays a very important role as well. For example, a child who lives in a depressed part of the city and has a caregiver who is aloof and unsupportive, has no siblings, and very few friends, is likely to experience greater
social adjustment problems than another child who lives with warm, supportive, middle-
class parents in an affluent section of the city. As the ecological model highlights, the 
child is really a product of the surrounding environment.

Research evidence reveals that young children in Jamaica report negative 
psychological outcomes as a result of separation caused by parental migration, but also points to factors such as the extended family that minimize the magnitude of negative effects. There is also research evidence that children and adolescents exhibit conflicting reactions to the absence of their parents, and that greater periods of separation tend to result in the development of anger and feelings of abandonment by adolescents (Lashley, 2000). Research also shows that some adolescents who reunite with their parents abroad experience significant problems as they try to re-adjust to their parents.

However, despite addressing the issue of parental migration, the research does not adequately address the specific question of the effect of single-mother migration on adolescents. Given the high percentage of households in Jamaica that are headed by single mothers, and the fact that many of these single mothers migrate to other countries in search of jobs, it is important to understand the effect their absence has on their adolescent children. Also, while the literature addresses the experience of adolescents who migrate and join their parents abroad, there is not much research that addresses how adolescents feel while they are still in Jamaica awaiting a reunion with their parents. In light of the gaps in the literature, this study attempted to answer the following questions:

*Do Jamaican adolescents whose single mothers migrate experience greater social adjustment problems than Jamaican adolescents whose single mothers do not migrate?*
Do Jamaican adolescents whose single mothers migrate experience greater emotional adjustment problems than Jamaican adolescents whose single mothers do not migrate?

Are the social and emotional adjustments of Jamaican adolescents whose single mothers migrate affected by gender?

To what extent are the social and emotional adjustments of adolescents of single mothers who migrate influenced by support from the extended family, length of single-mother-absence, and parent-adolescent communication?

Research hypotheses

The findings that this study expected to uncover were expressed in the following hypotheses:

- Jamaican adolescents whose single mothers migrate experience greater social adjustment problems than Jamaican adolescents whose single mothers do not migrate.
- Jamaican adolescents whose single mothers migrate experience greater emotional adjustment problems than Jamaican adolescents whose single mothers do not migrate.
- There are gender differences in the way Jamaican adolescents of migrant single-mothers experience social and emotional adjustments.
- The social and emotional adjustments of Jamaican adolescents of single mothers who migrate are influenced by support from the extended family, length of single-mother-absence, and parent-adolescent communication.
CHAPTER THREE

Method

Participants

Participants in this study were 187 students (123 females, 64 males) ages 13 to 17, from two junior high and five high schools in rural Jamaica (See Table 1).

Table 1.

Demographic Characteristics of Participants

<table>
<thead>
<tr>
<th>Age</th>
<th>Migrant</th>
<th></th>
<th>Non-Migrant</th>
<th></th>
<th></th>
<th></th>
</tr>
</thead>
<tbody>
<tr>
<td></td>
<td>13 14 15 16 17</td>
<td>Sub-Total</td>
<td>13 14 15 16 17</td>
<td>Sub-Total</td>
<td></td>
<td></td>
</tr>
<tr>
<td>Female</td>
<td>17 16 18 9 3</td>
<td>63</td>
<td>14 22 13 9 2</td>
<td>60</td>
<td>123</td>
<td></td>
</tr>
<tr>
<td>Male</td>
<td>9 14 7 6 1</td>
<td>37</td>
<td>9 10 6 2 0</td>
<td>27</td>
<td>64</td>
<td></td>
</tr>
<tr>
<td>Total</td>
<td>26 30 25 15 4</td>
<td>100</td>
<td>23 32 19 11 2</td>
<td>87</td>
<td>187</td>
<td></td>
</tr>
</tbody>
</table>

The schools are from various parts of the parish but are typical of most schools in rural Jamaica with regard to socioeconomic status, patterns of migration, and attitudes to migration. The majority of the Jamaican population is of African descent. The major groups are, people of African descent who comprise 90.7% of the population, mixed-
race who comprise 7.3%, and East Indians who comprise 1.3% (STATIN, 2010). The sample included 100 adolescents whose single mothers had been living abroad for more than six months, and 87 adolescents who were living with single mothers who had never migrated. The sample size was influenced by the calculation of Onwuegbuzie and Leech (2004) of the minimum number of participants needed for a correlation study. According to Onwuegbuzie and Leech (2004) a one-tailed correlational study should have a minimum of 64 participants and a two-tailed correlational study should have a minimum of 82 participants to achieve a significant result. A number larger than the minimum was decided on to achieve a satisfactory estimate of power to off-set the possibility of attrition.

Students who were living with both parents and those who were living with a single parent who is a father were excluded since the focus of the study was on adolescents whose parents were single mothers. This exclusion was on the basis that adolescents who were living with both parents or with their single fathers were likely to have different experiences from adolescents who were living with their single mothers. In the vast majority of cases adolescents whose single mothers had migrated were living with a grandparent or an aunt (See Table 2). Most of those whose single mothers had migrated indicated that they communicated with their single mothers either daily or weekly and that the most common means of communication was by telephone (See Table 2).
Table 2.

*Guardian, Frequency, and Mode of Communication with Migrant Single Mother*

<table>
<thead>
<tr>
<th>Guardian</th>
<th>N</th>
</tr>
</thead>
<tbody>
<tr>
<td>Grandmother</td>
<td>44</td>
</tr>
<tr>
<td>Grandfather</td>
<td>17</td>
</tr>
<tr>
<td>Aunt</td>
<td>19</td>
</tr>
<tr>
<td>Sibling</td>
<td>12</td>
</tr>
<tr>
<td>Other</td>
<td>8</td>
</tr>
<tr>
<td><strong>Total</strong></td>
<td><strong>100</strong></td>
</tr>
</tbody>
</table>

Frequency of Communication

<table>
<thead>
<tr>
<th>Frequency</th>
<th>Count</th>
</tr>
</thead>
<tbody>
<tr>
<td>Daily</td>
<td>37</td>
</tr>
<tr>
<td>Weekly</td>
<td>33</td>
</tr>
<tr>
<td>Every Two Weeks</td>
<td>17</td>
</tr>
<tr>
<td>Monthly</td>
<td>8</td>
</tr>
<tr>
<td>Rarely/Never</td>
<td>5</td>
</tr>
<tr>
<td><strong>Total</strong></td>
<td><strong>100</strong></td>
</tr>
</tbody>
</table>

Mode of Communication

<table>
<thead>
<tr>
<th>Mode of Communication</th>
<th>Count</th>
</tr>
</thead>
<tbody>
<tr>
<td>Telephone</td>
<td>85</td>
</tr>
<tr>
<td>Email</td>
<td>4</td>
</tr>
<tr>
<td>Skype/Facebook</td>
<td>9</td>
</tr>
<tr>
<td>No Communication</td>
<td>2</td>
</tr>
<tr>
<td><strong>Total</strong></td>
<td><strong>100</strong></td>
</tr>
</tbody>
</table>
Procedure

Approval for the study was obtained from the Ball State Institutional Review Board (See Appendix G). Permission was requested and obtained from the Chief Education Officer (See Appendix H), the Director of the regional office of the Ministry of Education, and the principals of each of the schools to conduct the study in the schools. Classes for participation were chosen based on the proportion of students who were from single-mother homes. Classes with the largest components of students from single-mother homes were determined beforehand by reference to school records. Oral and written invitations were extended to students who met the criteria to participate in the study. Informed consent forms were then sent to the parents and guardians requesting their permission for their adolescents to participate in the study (See Appendices I & J). A packet of materials including a letter of introduction from the researcher, consent and assent forms, and a brief description of the study, was sent to the parents. Students whose parents/guardians signed and returned the consent forms were assembled in a classroom where they signed the assent forms and completed the instruments as well as the demographic form. The participants were reminded that their answers would be treated confidentially, and that if they experienced any feelings of discomfort they should speak with their guidance counselor.

Measures

Demographic questionnaire. The participants completed a 10-item demographic questionnaire that was prepared by the researcher for this study (See Appendix A). The questionnaire elicited information such as participant’s current age and age at mother’s
migration, and living arrangements. Along with the questionnaire the participants completed a 10-item scale developed for this study to assess how adolescents perceived their communication with their migrant mothers and how they felt about their mothers’ absence.

*Social adjustment.* Social adjustment was examined by measuring adolescents’ perception of peer acceptance and their perception of social support.

*Perception of peer acceptance.* Perception of peer acceptance was measured by the Self-perception Profile for Children (Harter, 1985). The Self-perception Profile for Children (SPPC) is a 45-item 4-point, *Likert-type* scale, with nine subscales measuring nine dimensions of self-concept (See Appendix B). For the purposes of this study, only one subscale was used - the Peer Acceptance subscale. The Peer Acceptance subscale has six items and measures adolescents’ perception of their social acceptability among their peers. For each item the adolescents indicated their response to the statement from *strongly disagree* to *strongly agree*. The fourth and sixth items were reversed scored. These items are: *I wish that more people my age would want to be my friend,* and, *I find it hard to make friends.* Higher scores indicate a higher perception of self. In a study conducted among 105 at-risk youth ages 14 to 18 years in Naples, Italy, the internal consistency measured by the Cronbach alpha coefficient of each domain ranged from 0.68 to 0.86 (Simona, 2009).

*Perceived Social Support.* Perceived social support was measured by the Vaux Social Support Record (VSSR). The VSSR (Daly, Shin, Thakral, Selders, & Vera, 2009) is a nine-item instrument with three subscales that measure social support from teachers, family, and peers. The VSSR is an adaptation of the Social Support Appraisals (1986)
scale that was designed to assess the degree to which a person feels cared for, respected, and involved (See Appendix C). Each subscale contains 3 items that use a 4-point response format ranging from strongly disagree to strongly agree. Examples of items include, I have friends I can talk to, who care about my feelings and what happens to me. For the purposes of this study only the family and peer subscales were used. Higher scores indicate perceptions of greater social support. Good internal consistency estimates for the family and peers subscales were demonstrated in a sample of 123 seventh and eighth grade students, ages 12 to 15 years, from a public elementary/middle school in a large Midwestern city in the United States. The enrollment at this school exceeded 1000 students who represented 20 different countries and spoke 20 languages including English. The sample was comprised of 72 (59%) Latinos/Latinas, 15 (12%) African Americans, 11 (9%) Asian Americans, 1 (1%) Native American, and 24 (20%) bi-racial. No Caucasians were included in this study because it was focused on ethnic minorities. The coefficient alpha was 0.80 for family support, and 0.84 for peer support (Daly et al., 2009).

Emotional adjustment. Emotional adjustment was assessed by measuring adolescents’ self-esteem and depression.

Self-esteem. Self-esteem was measured by the Rosenberg Self Esteem Scale (RSES). The Rosenberg Self Esteem Scale (Rosenberg, 1965) is a 10-item Likert-type 4-point scale (from strongly disagree to strongly agree) which measures an individual’s global self-esteem (See Appendix D). The 10 items are first-person cognitive-perceptual statements of self-satisfaction, self-worth, self-respect and personal pride. Five items, numbers 1, 3, 4, 7, and 10 are worded positively, example (1) on the whole, I am satisfied
with myself, and (4) *I am able to do things as well as most other people.* The other five items are worded negatively, example, (2) *at times I think I am no good at all,* and (8) *I wish I could have more respect for myself.* The negatively worded items were reverse-scored; high scores indicate high self-esteem, and low scores indicate low self-esteem. The RSES has demonstrated reasonable psychometric properties as evidenced by acceptable convergent, discriminant, and predictive validity scores (Hatcher & Hall, 2009). When used with a sample of 98 African American single mothers, the instrument demonstrated high internal consistency, with an alpha of 0.83. It also showed correlation coefficients of 0.76, 0.72, and 0.66 correlated with various subscales of the Global Self-Worth Scale (Hatcher & Hall, 2009).

Depression. Depression was measured by the Beck Youth Inventory - Depression (BYI-D). The Beck Youth Inventory - Depression (Beck, Beck, & Jolly, 2001) is a 20-item scale designed to assess negative thoughts, feelings of sadness, and physiological symptoms of depression in children and adolescents (See Appendix E). Participants rate each statement on a 4-point scale of *never, sometimes, often, always.* All items are phrased in negative valence, with higher scores reflecting greater depressive symptoms. Examples of items are: *I think my life is bad,* *I have trouble sleeping,* and *I feel empty inside.* The Beck Youth Inventory – Depression (BYI-D) has demonstrated high internal consistency as measured by Cronbach’s alpha (Stapleton, Sander, & Stark, 2007).

When used with a sample of 859 girls ages nine to 13 years, Cronbach’s alpha for 13 year-olds was 0.92, and the correlation of BYI-D with the Children’s Depression Inventory (CDI) was 0.86 (Stapleton, Sander, & Stark, 2007). This sample included girls from Grades four to seven in a large suburban school district in south western United
States. The ethnicities identified were, Latino 33%, Caucasian 26%, African American 18%, and Asian American 5%.

*Single-mother absence*. Single-mother absence was assessed by the Absence subscale of the Mother-Adolescent Relationship scale, which was developed by the researcher for use in this study (See Appendix F). The Mother-Adolescent Relationships (MAR) scale is a 10-item 4-point, *Likert-type* scale with responses ranging from *strongly disagree* to *strongly agree*; it has two subscales – Absence and the Communication subscales. The Absence subscale has five items and was used to assess how the adolescents felt about their mothers’ absence. Examples of items in the subscale are, *I understand why my mother is away*; and, *I am satisfied that my mother is doing the best she can*. The 10th item in the scale was reversed. The item is: *When I think of my mother being away I am angry*. Higher scores indicate that adolescents have a positive attitude toward their mothers’ absence.

*Communication with single mother*. Adolescents’ communication with their mothers was assessed by the Communication subscale of the MAR scale (See Appendix F). The Communication subscale of the MAR has five items. Examples are *I look forward to hearing from my mother*, and, *When I speak with my mother, she is interested to hear what I have to talk about*. The fifth item in the scale is reverse scored. The item is: *My mother does not care to talk with me*. Higher scores indicate that adolescents were positively influenced by their communication with their mothers.
Data Analysis

The data were analyzed based on the major research questions.

Research Question 1: Do Jamaican adolescents whose single mothers migrate experience greater social adjustment problems than Jamaican adolescents whose single mothers do not migrate?

Research Question 2: Do Jamaican adolescents whose single mothers migrate experience greater emotional adjustment problems than Jamaican adolescents whose single mothers do not migrate?

Research Question 3: Are the social and emotional adjustments of Jamaican adolescents whose single mothers migrate affected by gender?

To answer research questions one, two, and three, descriptive analyses were conducted to identify the means and standard deviations of the adolescents whose single-mothers had migrated and those whose single-mothers had not migrated. Multivariate analyses of variance (MANOVA) were then conducted to detect if there were significant differences between the groups, as well as gender differences within the groups. The independent variable was single-mother migrant status and had two levels – migrant and non-migrant. The dependent variables were social adjustment, operationalized as perception of peer acceptance and perception of social support; and emotional adjustment, operationalized as self-esteem and depression.

Research Question 4: To what extent are the social and emotional adjustments of adolescents whose single mothers migrate influenced by support from the extended family, length of single-mother-absence, and parent-adolescent communication?
To answer research question four bivariate correlation coefficient analyses were first conducted on the data to determine the strength and direction of relationships among the variables. Separate hierarchical regression analyses were conducted on the data to determine which factors influenced Jamaican adolescents’ social and emotional adjustment. The predictors were expected to be support from the extended family, length of single-mother absence, and parent-adolescent communication. The dependent variables for social adjustment were perception of peer acceptance and perception of social support, and the dependent variables for emotional adjustment were self-esteem and depression. Hierarchical regression analyses were conducted because the literature suggests that family support, length of mother-absence, and adolescent-mother communication are important factors affecting adolescent adjustment (e.g. Smith et al., 2004; Suarez-Orozco et al., 2002). It was hypothesized that of the three predictors, extended family support was the strongest influence on adolescent adjustment. Extended family support was therefore the first predictor to be entered into the analysis, followed by mother absence, and parent-adolescent communication.
The main purpose of this study was to determine if Jamaican adolescents whose single mothers had migrated experienced greater social and emotional problems than Jamaican adolescents whose single mothers had not migrated. The study also sought to answer two other questions. One was to determine if the social and emotional adjustment of Jamaican adolescents whose single mothers had migrated was affected by gender, and the other was the extent to which adolescent adjustment was influenced by support from the extended family, length of single-mother absence, and mother-adolescent communication. The data were analyzed, and the results are reported, based on the major research questions.

Social Adjustment

Descriptive analyses were conducted to identify the means and standard deviations for adolescents whose single-mothers had migrated and those whose single-mothers had not migrated. The results are shown in Table 3.
Table 3.

Mean Scores and Standard Deviations of Adolescents on Social Adjustment Measures

<table>
<thead>
<tr>
<th></th>
<th>N</th>
<th>Migrant</th>
<th></th>
<th>Non-Migrant</th>
<th></th>
</tr>
</thead>
<tbody>
<tr>
<td></td>
<td></td>
<td>Mean</td>
<td>SD</td>
<td>Mean</td>
<td>SD</td>
</tr>
<tr>
<td>SPPC-PA</td>
<td>187</td>
<td>2.68</td>
<td>.55</td>
<td>2.82</td>
<td>.62</td>
</tr>
<tr>
<td>VSSR-P</td>
<td>187</td>
<td>3.05</td>
<td>.81</td>
<td>3.10</td>
<td>.81</td>
</tr>
</tbody>
</table>

Note. Range: Minimum = 1; Maximum = 4.
SPPC-PA = Self-Perception Profile for Children-Peer Acceptance Subscale; VSSR-P = Vaux Social Support Record – Peer Subscale.

A multivariate analysis of variance (MANOVA) was conducted to detect if the mean differences between the migrant and non-migrant groups were statistically significant. The independent variable was single-mother migrant status and had two levels – migrant and non-migrant. The dependent variables were perception of peer acceptance (measured by the SPPC-PA) and perception of peer social support (measured by the VSSR-P). The MANOVA revealed no significant difference between the migrant and non-migrant groups (Wilks’ lambda = .977, F (2, 184) = 2.000, p = .119, partial eta² = .023, power = .437). Box’s Test of Equality was not significant (p = .633), indicating that the assumption of homogeneity was met.

### Emotional Adjustment

Descriptive analyses were conducted to find out if there were differences in the means and standard deviations of the adolescents whose single-mothers had migrated and those whose single-mothers had not migrated. The results are shown in Table 4.
Table 4.

*Mean Scores and Standard Deviations of Adolescents on Emotional Adjustment Measures*

<table>
<thead>
<tr>
<th></th>
<th>N</th>
<th>Migrant</th>
<th></th>
<th>Non-Migrant</th>
<th></th>
</tr>
</thead>
<tbody>
<tr>
<td></td>
<td></td>
<td>Mean</td>
<td>SD</td>
<td>Mean</td>
<td>SD</td>
</tr>
<tr>
<td>RSES</td>
<td>187</td>
<td>3.03</td>
<td>.56</td>
<td>2.86</td>
<td>.55</td>
</tr>
<tr>
<td>BYI-D</td>
<td>187</td>
<td>1.88</td>
<td>.59</td>
<td>2.12</td>
<td>.60</td>
</tr>
</tbody>
</table>

Note. Range: Minimum = 1; Maximum = 4.
RSES = Rosenberg Self-Esteem Scale; BYI-D = Beck Youth Inventory – Depression.

A multivariate analysis of variance (MANOVA) was conducted to detect if the differences between the migrant and non-migrant groups were statistically significant. The independent variable was single-mother migrant status and the dependent variables were self-esteem (RSES) and depression (BYI-D). The MANOVA revealed a significant difference between the migrant and non-migrant groups (Wilks’ lambda = .941, F (4, 182) = 2.876, p = .024, partial $\eta^2 = .059$, power = .771). As shown in Table 5, the Tests of Between-Subjects Effects results revealed significant differences between the groups on both self-esteem and depression variables. On the self-esteem variable a significant effect revealed that the migrant group had higher self-esteem than the non-migrant group ($SS^2 = 1.455$, $F = 4.720$, $p = .031$, partial $\eta^2 = .025$, power = .580). On the depression variable a significant effect revealed that the migrant group had lower depression than the non-migrant group ($SS^2 = 2.684$, $F = 7.540$, $p = .007$, partial $\eta^2 = .039$, power = .780). No significant interaction effects were observed between migrant status and gender.
Table 5.

**MANOVA Results for the Emotional Adjustment Variables.**

<table>
<thead>
<tr>
<th>Variable</th>
<th>SS²</th>
<th>F</th>
<th>p</th>
<th>Partial Eta²</th>
<th>Power</th>
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</thead>
<tbody>
<tr>
<td>RSES</td>
<td>1.455</td>
<td>4.720</td>
<td>.031</td>
<td>.025</td>
<td>.580</td>
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<tr>
<td>BYI – D</td>
<td>2.684</td>
<td>7.540</td>
<td>.007</td>
<td>.039</td>
<td>.780</td>
</tr>
</tbody>
</table>

Note. Range: Minimum = 1; Maximum = 4.
RSES = Rosenberg Self-Esteem Scale; BYI-D = Beck Youth Inventory – Depression.

Overall Means and Standard Deviations for Females and Males on Social and Emotional Adjustment

Descriptive analyses were conducted to detect if there were overall gender differences in the means and standard deviations of the entire sample based on social and emotional adjustment. The results are shown in Table 6.

Table 6.

**Overall Mean Scores and Standard Deviations of Females and Males for Peer Acceptance, Peer Social Support, Self-esteem, and Depression.**

<table>
<thead>
<tr>
<th></th>
<th>Female</th>
<th></th>
<th>Male</th>
</tr>
</thead>
<tbody>
<tr>
<td></td>
<td>Mean</td>
<td>SD</td>
<td>Mean</td>
</tr>
<tr>
<td>SPPC-PA</td>
<td>2.75</td>
<td>.63</td>
<td>2.75</td>
</tr>
<tr>
<td>VSSR-P</td>
<td>3.14</td>
<td>.84</td>
<td>2.96</td>
</tr>
<tr>
<td>RSES</td>
<td>2.95</td>
<td>.58</td>
<td>2.96</td>
</tr>
<tr>
<td>BYI-D</td>
<td>2.10</td>
<td>.63</td>
<td>1.78</td>
</tr>
</tbody>
</table>

Note. Range: Minimum = 1; Maximum = 4.
SPPC-PA = Self-Perception Profile for Children – Peer Acceptance Subscale; VSSR-P = Vaux Social Support Record – Peer Subscale; RSES = Rosenberg Self-Esteem Scale; BYI-D = Beck Youth Inventory – Depression.
A follow-up MANOVA was also conducted to examine whether the gender differences detected in the means in the total sample were statistically significant. The independent variable was participant gender and the dependent variables were peer acceptance, peer social support, self-esteem, and depression. The MANOVA revealed an overall significant effect between the groups (Wilks’ lambda = .915, F (4, 182) = 4.203, p = .003, partial eta² = .085, power = .919). The Box’s Test of Equality revealed a non-significant effect (p = .525), which indicated that the assumption of homogeneity was satisfied. The Tests of Between-Subjects Effects revealed a significant difference for depression (SS² = 4.236, F = 12.188, p = .001, partial eta² = .062, power = .935), showing that overall females reported higher depression than males. No significant interaction effects were detected between gender and age.

*Overall Means and Standard Deviations According to Age for Social and Emotional Adjustment.*

To find out whether there were age differences in the overall sample, descriptive analyses were run to identify the means and standard deviations. The results are shown in Table 7.
Table 7.

*Overall Mean Scores and Standard Deviations According to Age for Peer Acceptance, Peer Social Support, Self-esteem, and Depression.*

<table>
<thead>
<tr>
<th>Age</th>
<th>N</th>
<th>SPPC-PA</th>
<th>VSSR-P</th>
<th>RSES</th>
<th>BYI-D</th>
</tr>
</thead>
<tbody>
<tr>
<td></td>
<td></td>
<td>M</td>
<td>SD</td>
<td>M</td>
<td>SD</td>
</tr>
<tr>
<td>13</td>
<td>49</td>
<td>2.66</td>
<td>.60</td>
<td>2.77</td>
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<td>14</td>
<td>62</td>
<td>2.86</td>
<td>.96</td>
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<tr>
<td>15</td>
<td>44</td>
<td>2.93</td>
<td>.59</td>
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<td>16</td>
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<td>17</td>
<td>6</td>
<td></td>
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<td></td>
</tr>
</tbody>
</table>

Note. Range: Minimum = 1; Maximum = 4.

SPPC-PA = Self-Perception Profile for Children – Peer Acceptance Subscale; VSSR-P = Vaux Social Support Record – Peer Subscale; RSES = Rosenberg Self-Esteem Scale; BYI-D = Beck Youth Inventory – Depression.

*Gender and Migrant Status*

To find out whether there were gender differences in the migrant group, descriptive analyses were conducted to identify the means and standard deviations. The results are shown in Table 8.
Mean Scores and Standard Deviations on Social and Emotional Adjustment for Female and Male Adolescents Whose Single Mothers Have Migrated.

<table>
<thead>
<tr>
<th></th>
<th>Female</th>
<th></th>
<th>Male</th>
<th></th>
</tr>
</thead>
<tbody>
<tr>
<td></td>
<td>Mean</td>
<td>SD</td>
<td>Mean</td>
<td>SD</td>
</tr>
<tr>
<td>SPPC-PA</td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>VSSR-P</td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>RSES</td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>BYI-D</td>
<td></td>
<td></td>
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<td></td>
</tr>
<tr>
<td></td>
<td>2.84</td>
<td>.67</td>
<td>2.77</td>
<td>.53</td>
</tr>
<tr>
<td></td>
<td>3.13</td>
<td>.84</td>
<td>2.92</td>
<td>.75</td>
</tr>
<tr>
<td></td>
<td>3.05</td>
<td>.61</td>
<td>3.00</td>
<td>.48</td>
</tr>
<tr>
<td></td>
<td>1.96</td>
<td>.63</td>
<td>1.74</td>
<td>.50</td>
</tr>
</tbody>
</table>

Note. Range: Minimum = 1; Maximum = 4.
SPPC-PA = Self-Perception Profile for Children – Peer Acceptance Subscale; VSSR-P = Vaux Social Support Record – Peer Subscale; RSES = Rosenberg Self-Esteem Scale; BYI-D = Beck Youth Inventory – Depression.

A multivariate analysis of variance (MANOVA) was conducted to detect if the gender differences within the migrant group were statistically significant. The independent variable was participant gender and the dependent variables were peer acceptance (SPPC-PA), peer support (VSSR-P), self-esteem (RSES), and depression (BYI-D). The MANOVA revealed no overall significant effect between females and males (Wilks’ lambda = .928, F (4, 95) = 1.844, p = .127, partial eta² = .072, power = .541).

Predictors of Social and Emotional Adjustment

A bivariate correlation coefficient analysis was conducted to ascertain the strengths and directions of the relationships between the variables. The results are displayed in Table 9. As the table shows, there were statistically significant correlations among the variables. For example there was a correlation of .383 between family support
(VSSR-F) and self-esteem (RSES) which suggests, predictably, that as family support increases, self-esteem also increases. There was also a positive correlation of .368 between family support and peer social support (VSSR-P), suggesting that as family support increases, peer support also increases.

Table 9.


<table>
<thead>
<tr>
<th></th>
<th>VSSR-F</th>
<th>MAR-C</th>
<th>MAR-A</th>
<th>BYI-D</th>
<th>RSES</th>
<th>SPPC-PA</th>
<th>VSSR-P</th>
</tr>
</thead>
<tbody>
<tr>
<td>VSSR-F-Family</td>
<td>1</td>
<td>.464</td>
<td>.374</td>
<td>-.260</td>
<td>.383</td>
<td>.105</td>
<td>.368</td>
</tr>
<tr>
<td>MAR-Communication</td>
<td>.464</td>
<td>1</td>
<td>.600</td>
<td>-.100</td>
<td>.319</td>
<td>.089</td>
<td>.334</td>
</tr>
<tr>
<td>MAR-Absence</td>
<td>.374</td>
<td>.600</td>
<td>1</td>
<td>.102</td>
<td>.163</td>
<td>.019</td>
<td>.363</td>
</tr>
<tr>
<td>BYI-D</td>
<td>-.260</td>
<td>-.100</td>
<td>.102</td>
<td>1</td>
<td>-.480</td>
<td>-.269</td>
<td>-.089</td>
</tr>
<tr>
<td>RSES</td>
<td>.383</td>
<td>.319</td>
<td>.163</td>
<td>.480</td>
<td>1</td>
<td>.312</td>
<td>.357</td>
</tr>
<tr>
<td>SPPC-PA</td>
<td>.105</td>
<td>.089</td>
<td>.019</td>
<td>-.269</td>
<td>.312</td>
<td>1</td>
<td>.466</td>
</tr>
<tr>
<td>VSSR-P</td>
<td>.368</td>
<td>.334</td>
<td>.363</td>
<td>-.089</td>
<td>.357</td>
<td>.466</td>
<td>1</td>
</tr>
</tbody>
</table>

Note. Underline = significant at .05 level

VSSR-F = Vaux Social Support Record – Family Subscale; MAR-A = Mother Adolescent Relationship Scale – Absence Subscale; MAR-C = Mother Adolescent Relationship Scale – Communication Subscale; BYI-D = Beck Youth Inventory – Depression; RSES = Rosenberg Self-Esteem Scale; SPPC-PA = Self-Perception Profile for Children – Peer Subscale; VSSR-P = Vaux Social Support Record – Peer Subscale.

At the same time, the table shows negative correlations between some of the variables. For example there was a negative correlation (-.480) between self-esteem
(RSES) and depression (BYI-D), suggesting that as self-esteem increases, depression decreases. Table 9 also revealed that there were no severe problems with multicollinearity. Multicollinearity is the situation where two predictor variables are almost perfectly correlated, that is, they are effectively duplicates of each other (Wittink, 1988). When multicollinearity is encountered in regression analysis it means that both predictor variables are seeking to explain the same variance in the criterion variable. In such a situation standard error is likely to be high and the result of the regression is also likely to be unreliable (Wittink, 1988). Table 9 shows that there is no obvious case of multicollinearity among the variables since the highest correlation is .600 (between mother absence and mother-adolescent communication).

Separate hierarchical regression analyses were conducted on the data to determine which factors predicted Jamaican adolescents’ social and emotional adjustment. Consistent with the literature which indicates that the extended family is an important influence on the Jamaican family it was hypothesized that family support was the most important predictor influencing adolescents’ social and emotional adjustment. Therefore family support (VSSR-F) was entered in the regression first, followed by single-mother absence (MAR-A) and single-mother communication (MAR-C).

Predictors of Social Adjustment

The results of the hierarchical regression analyses conducted on the social adjustment variables are reported in Table 10. Perception of peer acceptance (SPPC-PA) and perception of peer social support (VSSR-P) were the criterion variables, and family support (VSSR-F), single-mother absence (MAR-A) and single-mother communication (MAR-C) were the predictor variables. Family support was entered in Step 1 of the
regression, and single-mother absence and single-mother communication were entered in Step 2. The option used in Step 2 was Stepwise regression. The results indicate that adolescents’ perception of peer acceptance was not influenced by any of the predictors – family support, single-mother absence, or single-mother communication. However, there was a significant effect on peer social support (VSSR-P). The model retained family support and single-mother absence as the predictors that significantly affect peer social support, but excluded single-mother communication from the final model because it was not a significant predictor of peer social support. The final model explains 23.4% of the variance in peer social support ($R^2 = .234$, $p < .05$). Single-mother absence strengthens the model by five percentage points ($\Delta R^2 = .05$, $\beta = .235$, $p < .05$), but family support is the stronger predictor of peer social support ($\beta = .344$, $p < .001$). The model shows family with a positive value for unstandardized coefficients ($b = .321$) suggesting that as family support increases, the perception of peer social support increases as well. The model also shows a positive unstandardized coefficient value for single-mother absence ($b = .333$), suggesting that as adolescent attitude toward single-mother absence becomes more positive, perception of peer social support increases.
Hierarchical regression analyses were conducted to determine which factors predicted adolescent emotional adjustment. The criterion variables were self-esteem and depression, and the predictor variables were family support, single-mother absence and single-mother communication. Family support was entered in Step 1 of the hierarchical model, and single-mother absence and single-mother communication were entered in Step 2, using the Stepwise option. The results indicate that both self-esteem and depression were influenced by the predictor variables. Self-esteem was predicted by family support only, while depression was predicted by both family support and single-mother absence, but not single-mother communication (see Tables 11 and 12).

The results for self-esteem are shown in Table 11. As the table shows, the model explains 19.4% of the variance in self-esteem ($R^2 = .194, \beta = .440, p < .05$). It also shows that family support has a positive unstandardized coefficient value ($b = .284$) suggesting
that as family support increases, adolescent self-esteem increases as well. The model excluded single-mother absence and single-mother communication because neither was a significant predictor of adolescent self-esteem.

Table 11.


<table>
<thead>
<tr>
<th></th>
<th>b</th>
<th>S.E</th>
<th>β</th>
<th>t</th>
<th>p</th>
</tr>
</thead>
<tbody>
<tr>
<td>Model 1</td>
<td>VSSR-F</td>
<td>.284</td>
<td>.059</td>
<td>.440</td>
<td>4.851</td>
</tr>
</tbody>
</table>

Note. R² = .194

The results for depression are reported in Table 12. The results show that the model explains 25.2% of the variance in depression (R² = .252, p < .05). Single-mother absence strengthens the model by 7.8% (ΔR² = .078, β = .301, p < .05), but family support is the stronger predictor of adolescent depression (β = -.530, p < .001).
Table 12.


<table>
<thead>
<tr>
<th>Variable</th>
<th>b</th>
<th>S.E</th>
<th>β</th>
<th>t</th>
<th>p</th>
</tr>
</thead>
<tbody>
<tr>
<td>Model 1</td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>VSSR-F</td>
<td>-.283</td>
<td>.062</td>
<td>-.418</td>
<td>-4.553</td>
<td>.000</td>
</tr>
<tr>
<td>Model 2</td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>VSSR-F</td>
<td>-.359</td>
<td>.064</td>
<td>-.530</td>
<td>-5.115</td>
<td>.000</td>
</tr>
<tr>
<td>MAR-Absent</td>
<td>.311</td>
<td>.098</td>
<td>.301</td>
<td>2.974</td>
<td>.002</td>
</tr>
</tbody>
</table>

Note. $R^2 = .175$ for Model 1; $R^2 = .252$ for Model 2; $\Delta R^2 = .078$ for Model 2.

The model indicates that family support has a negative value for unstandardized coefficient ($b = -.359, p < .001$), suggesting that as family support declines depression increases. At the same time the unstandardized coefficient for single-mother absence has a positive value ($b = .311, p < .05$), suggesting that as single-mother absence increases, depression also increases. Single-mother communication was excluded because it did not significantly affect adolescent depression.
CHAPTER 5

Discussion

This study explored the influence of single-mother migration on the social and emotional adjustment of Jamaican adolescents, and the extent to which family support, adolescents’ attitudes towards the absence of their mothers, and mother-adolescent communication, predicted adolescent adjustment.

Social Adjustment

One of the hypotheses of this study was that Jamaican adolescents whose single mothers have migrated (the migrant group) would experience greater social adjustment problems than Jamaican adolescents whose single mothers have not migrated (the non-migrant group). Contrary to previous studies that found that children of migrant parents experience social adjustment difficulties, the results of this study revealed that there were no significant differences between the migrant and non-migrant groups with regard to social adjustment.
Emotional Adjustment

It was hypothesized that adolescents who belong to the migrant group would have lower self-esteem and higher depression than adolescents belonging to the non-migrant group. However, the findings of the study indicate that the migrant group has higher self-esteem and lower depression than the non-migrant group.

Self-esteem

The findings of this study revealed that adolescents in the migrant group reported higher self-esteem than adolescents in the non-migrant group. This finding is in contrast to what was anticipated – that the migrant group would report lower self-esteem than the non-migrant group. Possible explanations for the migrant group’s higher self-esteem include their higher standard of living, higher social status, and the anticipation of reuniting with their mothers soon. As explained earlier, Jamaicans typically migrate in order to find employment, and routinely send money and material goods to family members back home (Gopaul-McNicol, 1993). The additional source of income from family members overseas automatically ensures that families are better able to meet their material needs. In addition, social mobility is achieved for persons who have family members living abroad (Larmer & Moses, 1996). Not only are such persons able to buy clothes and accessories that are unaffordable for many others, but often they sport status symbols such as expensive cellular phones, brand name shoes and sneakers, and electronic gadgets and equipment that set them apart as those who have family members living abroad (Glennie & Chappell, 2010). The anticipation that one will soon join one’s mother abroad is another possible source of high self-esteem. This anticipation leads to
hope of a better future, especially when one lives in a community where one is surrounded by poverty and depravity (Glasgow & Gouse-Sheese, 1995).

**Depression**

The hypothesis that the migrant group would report higher depression was not confirmed in the study. Instead, it was found that the migrant group reported lower depression than the non-migrant group. This hypothesis was based on studies done of young children who reported depressive symptoms resulting from the migration of their parents (e.g. Pottinger, 2005); and the assumption that after years had passed they would feel frustrated and abandoned. However, it appears that apart from family support which is enjoyed by both the migrant and non-migrant groups, the higher standard of living enjoyed by the migrant group may be a contributing factor to low depression scores (Glennie & Chappell, 2010; Larmer & Moses, 1996). The likely explanation is that the basic needs of the migrant group are better satisfied, due to financial and other assistance received from family members living abroad. At the same time adolescents who are living with their single mothers in Jamaica are likely to be experiencing financial deprivations, given that in many cases of single-mother households the single-mother has several children to care for, and is either unemployed or employed in a low-paying job (McLoyd, 1997). A typical scenario is one of a single-mother who is too stressed to provide the emotional support that her children and adolescents need (Mitran et al., 2004). It therefore should not be surprising that adolescent depression is reported at lower levels in the migrant group than it is in the non-migrant group.
**Gender and Emotional Adjustment**

The findings of the study revealed that in the overall sample, females reported higher depression than males. This is consistent with patterns found in previous studies in which females tend to report higher depression than males (Bohman et al., 2010; Murakumi, 2002; Rudolph et al., 2001). In addition, this is consistent with the trend where adolescent females tend to report higher depression compared to their childhood counterparts (Mueller, 2009). Higher female depression in adolescence may be caused from various factors including hormonal changes associated with puberty (Rudolph et al.; 2001; Susman & Dorn, 2009).

**Predictors of Social and Emotional Adjustment**

For this part of the study, analyses were conducted on the migrant group only. The study hypothesized that a number of factors may predict the social and emotional adjustment in adolescents in the migrant group. The findings revealed that peer social support, self-esteem, and depression were predicted by family support and single-mother absence.

**Predictors of Social Adjustment**

Peer social support was predicted by family support and single-mother absence, but family support was the stronger predictor. The findings suggest that as family support increases, the perception of peer social support increases as well (Miner, 2003). Also, as adolescents’ positive attitude toward their mothers’ absence increases, so does their perception of peer social support. Interestingly single-mother communication did not
predict adolescents’ perception of peer social support. This may be because communication and family support explain the same variance since communication is also a part of family support.

*Predictors of Emotional Adjustment*

Self-esteem was predicted by family support only. As discussed previously family support is an important factor in the lives of the adolescents. The findings suggest that although the migrant mothers were not physically present, they found ways of ensuring that their adolescents were properly cared for and supported (Chamberlain, 2006). For example they accomplished this through the extended family, as well as staying in touch by telephone (Horst, 2006). Of the participants whose mothers live abroad, 85% live with either a grandparent or an aunt, and communicate by phone with their single-mothers daily, weekly, or every two weeks. In addition, the vast majority report that they see their mothers fairly regularly, which suggest that they either visit their single-mothers abroad, or the mothers return home on regular visits. Also, the advantage of having family members living abroad increases the likelihood that these adolescents will report high self-esteem.

Depression was predicted by family support and single-mother absence, and family support was the stronger predictor. The findings suggest that as family support increases depression declines and that as single-mother absence increases depression increases as well.
Implications and Future Research

Much of the research that has examined migration has focused on urban centers and on particular segments of the population. Comparative research needs to be conducted to investigate how migration affects different segments of the population under varying conditions. For example studies could be done to compare migration effects in different rural parishes/locations; others could examine migration effects on urban populations versus rural populations; and still others could compare the effects of migration on different family forms such as single-mother, single-father, or two-parent homes. Other studies could also compare how the different socioeconomic groups adapt to migration separation. From the current study findings, it appears that migration effects vary by location as well as other factors such as family forms and dynamics.

Future research should include mixed method approaches so as to get a more descriptive account of the experiences of adolescents who are separated from their single mothers through migration. This would be a good way of highlighting some of the interesting and telling experiences adolescents undoubtedly have as they relate to living without the physical presence of their single mothers.

In conclusion, more research of this kind needs to be done to shed light on how adolescents adjust to single-mother migration. Most of the previous studies done on Jamaican children separated from their parents by migration found that the children experienced more negative than positive outcomes. While even more research needs to be done with young children, more attention must be paid to adolescents, to get a clearer
picture of how they are affected by migration separation. It is very likely that studies of this nature would help Jamaicans to view migration in general, and single-mother migration in particular from a different perspective. This perspective could expand and reinforce what this study has uncovered – that the separation of parents and children caused by migration is not necessarily the source of as much feelings of anxiety and loss as was reported in previous studies.

Limitations

The sample used in this study limited the generalization of the study’s findings in at least two ways. First, the study included only adolescents from single-mother homes and so is limited in its applicability to adolescents who are from different types of homes such as two-parent homes. It was also limited in that the participants were all from the same locality. It is possible that if the study was replicated in another locality the results would be different.

Another limitation is that the sample is not a random sample. Instead, a sample of convenience was used. As a result it was not possible to ensure that the adolescents from the non-migrant group shared the same characteristics and similar living conditions as those from the migrant group. For example, because convenience sampling was used it was not possible to achieve balance in the distribution of adolescents according to the different age groups; as a result some age groupings had much fewer participants than the others. Likewise the sample included participants whose single mothers had been away for varying lengths of time ranging from one year to over 10 years.
Finally, because this is a correlational study causal attributions cannot be made when interpreting the results. The implication is that though single-mother migration may influence the adjustment of adolescents, this study does not conclude that adjustment difficulties are caused by the migration of single mothers. Similarly, though the extended family and the relationship between single mothers and adolescents have been found to predict adolescent adjustment, this study does not claim that these variables are the only ones which affect adolescent adjustment. In fact, given that family support and mother-adolescent relationship explain only 25% of the variance in adolescent adjustment, it is clear that there are other important variables that influence adolescent adjustment that need to be considered before forming conclusions about adolescent adjustment and single-mother migration.
References


APPENDICES

APPENDIX A

DEMOGRAPHIC QUESTIONNAIRE

Instructions: Please follow the directions as carefully as possible.
If your mother is living in JAMAICA, answer only questions 1 to 5.
If your mother is living in ANOTHER COUNTRY, answer all 10 questions.
If there is a question for which you do not know the exact answer, make a
guess that you think is closest to the correct answer.

1. How old are you? _________

2. What gender are you? _________ (Male or Female)

3. With whom do you live?_________________________ (Example: mother,
grandmother)

4. Which other adults live in your
   home?___________________________ (Example, grandfather,
   uncle, cousin).

5. How many other children live in your home?_________

   Please answer questions 6 – 10 only if your mother is living in ANOTHER
   COUNTRY.

6. How old were you when your mother migrated? _________

7. In which country is your mother living?
   ________________________________

8. How many times have you seen your mother since she migrated?
   ___________ times.
9. How often do you communicate with your mother?

_______________________ (Example, every day, every week, twice per week).

10. How do you communicate with your mother most of the time?

_______________________ (Example, phone, Skype, email).
APPENDIX B

THE SELF-PERCEPTION PROFILE FOR CHILDREN

Instructions. Please use this list of sentences to describe yourself as accurately as possible. Describe yourself as you see yourself at the present time, not as you wish to be in the future. Describe yourself as you are most of the time as other persons you know of the same gender and roughly the same age. There is no right or wrong answer. Please choose the number that best describes you.

<table>
<thead>
<tr>
<th>Item</th>
<th>Statement</th>
<th>Strongly Disagree 1</th>
<th>Disagree 2</th>
<th>Agree 3</th>
<th>Strongly Agree 4</th>
</tr>
</thead>
<tbody>
<tr>
<td>1.</td>
<td>I would like to have a lot more friends.</td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>2.</td>
<td>I am popular with others my age.</td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>3.</td>
<td>I am always doing things with a lot of friends.</td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>4.</td>
<td>I wish that more people my age would want to be my friend.</td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>5.</td>
<td>I have lots of friends.</td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>6.</td>
<td>I find it hard to make friends.</td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
</tbody>
</table>
## APPENDIX C

### THE VAUX SOCIAL SUPPORT RECORD

*Instructions.* Please use this list of sentences to describe how you get along with your family and friends as accurately as possible. Place a tick in the box which best describe how you get along with your family members and friends most of the times. There is no right or wrong answer.

<table>
<thead>
<tr>
<th>Item</th>
<th>Statement</th>
<th>Strongly Disagree</th>
<th>Disagree</th>
<th>Agree</th>
<th>Strongly Agree</th>
</tr>
</thead>
<tbody>
<tr>
<td>1.</td>
<td>There are people in my family I can talk to, who care about my feelings and what happens to me.</td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>2.</td>
<td>There are people in my family I can talk to, who give good suggestions and advice about my problems</td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>3.</td>
<td>There are people in my family who help me with practical problems like helping me get somewhere or help me with a project.</td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>4.</td>
<td>I have friends I can talk to, who care about my feelings and what happens to me.</td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>5.</td>
<td>I have friends I can talk to, who give good suggestions and advice about my problems.</td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>6.</td>
<td>I have friends who help me with practical problems, like how to get somewhere, or help me with an assignment.</td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
</tbody>
</table>
# APPENDIX D

## THE ROSENBERG SELF-ESTEEM SCALE

*Instructions.* Please indicate to what extent you agree or disagree with each statement below by placing a tick in the appropriate box. Please choose the number that best describes how you feel about yourself. There is no right or wrong answer.

<table>
<thead>
<tr>
<th>Item</th>
<th>Statement</th>
<th>Strongly Disagree 1</th>
<th>Disagree 2</th>
<th>Agree 3</th>
<th>Strongly Agree 4</th>
</tr>
</thead>
<tbody>
<tr>
<td>1.</td>
<td>I feel that I’m a person of worth, at least on an equal level with others.</td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>2.</td>
<td>I feel that I have a number of good qualities.</td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>3.</td>
<td>All in all, I am inclined to feel that I’m a failure.</td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>4.</td>
<td>I am able to do things as well as most other people.</td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>5.</td>
<td>I feel I do not have much to be proud of.</td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>6.</td>
<td>I have a positive attitude toward myself.</td>
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<td></td>
<td></td>
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<tr>
<td>7.</td>
<td>On the whole, I am satisfied with myself.</td>
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<td></td>
<td></td>
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</tr>
<tr>
<td>8.</td>
<td>I wish I could have more respect for myself.</td>
<td></td>
<td></td>
<td></td>
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</tr>
<tr>
<td>9.</td>
<td>I certainly feel useless at times.</td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>10.</td>
<td>At times I think that I am no good at all.</td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
</tbody>
</table>
APPENDIX E

THE BECK YOUTH INVENTORY – DEPRESSION

Instructions: Below is a list of things that happen to people and that people think or feel. Read each sentence carefully, and place a tick in the box (Never, Sometimes, Often or Always) that tells about you best, especially in the last two weeks. THERE ARE NO RIGHT OR WRONG ANSWERS.

<table>
<thead>
<tr>
<th>Item</th>
<th>Statement</th>
<th>Never</th>
<th>Sometimes</th>
<th>Often</th>
<th>Always</th>
</tr>
</thead>
<tbody>
<tr>
<td>1.</td>
<td>I think that my life is bad.</td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>2.</td>
<td>I have trouble doing things.</td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>3.</td>
<td>I feel that I am a bad person.</td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>4.</td>
<td>I wish I were dead.</td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>5.</td>
<td>I have trouble sleeping.</td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>6.</td>
<td>I feel that no one loves me.</td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>7.</td>
<td>I think bad things happen because of me.</td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>8.</td>
<td>I feel lonely.</td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>10.</td>
<td>I feel like bad things happen to me.</td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>11.</td>
<td>I feel like I am stupid.</td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>12.</td>
<td>I feel sorry for myself.</td>
<td></td>
<td></td>
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<td></td>
</tr>
<tr>
<td>13.</td>
<td>I think I do things badly.</td>
<td></td>
<td></td>
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</tr>
<tr>
<td>15.</td>
<td>I hate myself.</td>
<td></td>
<td></td>
<td></td>
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</tr>
<tr>
<td>16.</td>
<td>I want to be alone.</td>
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<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>17.</td>
<td>I feel like crying.</td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>18.</td>
<td>I feel sad.</td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>19.</td>
<td>I feel empty inside.</td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>20.</td>
<td>I think my life will be bad.</td>
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<td></td>
</tr>
</tbody>
</table>
APPENDIX F
THE MOTHER-ADOLESCENT RELATIONSHIP SCALE

*Instructions.* Please use this list of sentences to describe your communication with your mother and how you feel about her being away from home. Place a tick in the appropriate box how much you agree or disagree with each statement. There is no right or wrong answer. Please choose the number that best describes how you think and feel.

<table>
<thead>
<tr>
<th>Item</th>
<th>Statement</th>
<th>Strongly Disagree</th>
<th>Disagree</th>
<th>Agree</th>
<th>Strongly Agree</th>
</tr>
</thead>
<tbody>
<tr>
<td>1.</td>
<td>I look forward to hearing from my mother</td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>2.</td>
<td>Our conversations are usually pleasant</td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>3.</td>
<td>When I speak with my mother, she is interested to hear what I have to talk about</td>
<td></td>
<td></td>
<td></td>
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</tr>
<tr>
<td>4.</td>
<td>I can contact my mother at any time</td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>5.</td>
<td>My mother does not care to talk with me</td>
<td></td>
<td></td>
<td></td>
<td></td>
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<td>6.</td>
<td>I understand why my mother is away</td>
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<tr>
<td>7.</td>
<td>I miss my mother</td>
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<tr>
<td>8.</td>
<td>I long to go and live with my mother</td>
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<tr>
<td>9.</td>
<td>I am satisfied that my mother is doing the best she can</td>
<td></td>
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<td>10.</td>
<td>When I think of my mother being away I am angry.</td>
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</tbody>
</table>
APPENDIX G

Institutional Review Board

DATE: April 11, 2012
TO: Calvin Isaacs, M.A.
FROM: Ball State University IRB
RE: IRB protocol # 305419-2
TITLE: The influence of single-mother migration on social and emotional adjustment in Jamaican adolescents
SUBMISSION TYPE: Amendment/Modification

ACTION: APPROVED
DECISION DATE: April 11, 2012
EXPIRATION DATE: April 10, 2013
REVIEW TYPE: Expedited Review

The Institutional Review Board has approved your Amendment/Modification for the above protocol, effective April 11, 2012 through April 10, 2013. All research under this protocol must be conducted in accordance with the approved submission.

Editorial Notes:

1. Approved.

As a reminder, it is the responsibility of the PI and/or faculty sponsor to inform the IRB in a timely manner:

• when the project is completed,
• if the project is to be continued beyond the approved end date,
• if the project is to be modified,
• if the project encounters problems, or
• if the project is discontinued.

Any of the above notifications should be addressed in writing and submitted electronically to the IRB (http://www.bsu.edu/irb). Please reference the IRB protocol number given above in any communication to the IRB regarding this project. Be sure to allow sufficient time for review and approval of requests for modification or continuation. If you have questions, please contact Robert Wertman at (765) 285-5034 or rhwertman@bsu.edu.
APPENDIX H

December 6, 2011

Mr. Calvin Isaacs
3556 North Tillotson Avenue
Aptartment 206
Muncie, Indiana 47304
United States of America

Dear Mr. Isaacs,

Reference is made to your email dated November 20, 2011 requesting permission to conduct a study entitled “Relations between Migrant Single Mothers and Social and Emotional Adjustments in Jamaican Adolescents” in the following secondary level schools in the parish of St. Ann: Brown’s Town High, Marcus Garvey Technical High, Ocho Rios High, St. Hilda’s High and York Castle High.

Kindly be advised that the Ministry has granted permission for you to proceed with this survey with the understanding that confidentiality and anonymity be maintained. In addition, we would appreciate you forwarding a copy of the findings of the survey.

Yours sincerely,

Chief Education Officer (Acting)

Copy: Mr. Anthony Gray, Regional Director (Acting), Brown’s Town Regional Office

Honourable Andrew Holness, M.P. - Minister of Education*  Mrs. Audrey V. Sewell - Permanent Secretary*
APPENDIX I

PARENTAL CONSENT FORM

Study Title
The Influence of single-mother migration on social and emotional adjustment of Jamaican adolescents.

Study Purpose and Rationale
The purpose of this study will be to examine the social and emotional adjustment problems faced by adolescents ages 13 - 17 in Jamaica whose single mothers have migrated compared with adolescents from single-mother homes whose single mothers have not migrated. Findings from this research may help parents, caregivers, and professionals who work with children to understand and support the social and emotional adjustment of adolescents whose single mothers have migrated.

Inclusion/Exclusion Criteria
To be eligible to participate in this study, participants must be between the ages of 13 and 17, and must be from single-mother homes. Persons who had previously lived with a single mother but are now living with guardians due to their mothers’ migration are also eligible. Persons who are living with both parents or with a single father are not eligible to participate in this study.

Participation Procedures and Duration
For this project, participants will be asked to complete a series of questionnaires about social and emotional issues that they experience in everyday interactions with other persons. It will take approximately 45 minutes to complete the questionnaires.

Data Confidentiality or Anonymity
All data will be maintained as confidential. No identifying information from your child such as names will be shared with anyone not connected with the study. An identification number will be assigned to your child for the sake of separating the data into groups, that is, adolescents whose single mothers have migrated, and adolescents whose single mothers have not migrated. The electronic version of the data collected will be deleted five years after the IRB protocol is officially closed. Hard copies of documents with participants’ responses will be shredded five years after the IRB protocol is officially closed.

Storage of Data
Paper data will be stored in a locked filing cabinet in the researcher’s office for five years and then be shredded. The data will also be entered into a software program and stored on the researcher’s password-protected computer for five years and then deleted. Only members of the research team will have access to the data.

Risks or Discomforts
The probable risks associated with this study are minimal. The only anticipated risk from participating in this study is that your child may not feel comfortable answering some of the questions. Your child will be informed during the assent process that he or she may choose not to answer any question that makes him/her uncomfortable and he/she may quit the study at any time.

Who to Contact Should Your Child Experience Any Negative Effects from Participating in this Study
Your questions are welcomed at any time. Please feel free to contact me if you do have questions. My telephone number is 765-214-3045 and my e-mail address is ceisaacs@bsu.edu, and my mailing address is listed below. If you still feel uncomfortable and wish further assurance you may contact my faculty advisor Dr. Wilfridah Mucherah. Her telephone number is 765-285-8514 and her e-mail address is wmucherah@bsu.edu. Her mailing address is also listed below. Should your child experience any feelings of distress, there are counseling services available to him/her through the school’s guidance counselor.

Benefits
There are no perceived benefits for participating in this study. However the findings of this study will help parents, teachers, and other professionals who interact with adolescents to understand the issues adolescents face as a result of their single mothers migrating.

Voluntary Participation
Your child’s participation in this study is completely voluntary and you are free to withdraw your permission at anytime for any reason without penalty or prejudice from the investigator. Please feel free to ask any questions of the investigator before signing this Parental Consent form and at any time during the study.

IRB Contact Information
For questions about your rights as a research subject, please contact Director, Office of Research Integrity, Ball State University, Muncie, IN 47306, (765) 285-5070, irb@bsu.edu.

**********

Parental Consent
I, ________________________________ give permission for my child to participate in this research project entitled, “The Influence of single-mother migration on social and emotional adjustment of Jamaican adolescents.” I have had the study explained to me and my questions have been answered to my satisfaction. I have read the description of this project and give my permission for my child to participate. I understand that I will receive a copy of this informed consent form to keep for future reference.
Parent’s or Guardian’s Signature ___________________ Date ___________________

Researcher Contact Information

Principal Investigator: Calvin E. Isaacs, Dr. Wilfridah M. Mucherah
Graduate Student
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Muncie, IN 47306
Telephone: (765) 214-3045
Email: ceisaacs@bsu.edu

Faculty Supervisor: Associate Professor
Educational Psychology
Ball State University
Muncie, IN 47306
Telephone: (765) 285-8514
E-mail: wmucherah@bsu.edu
APPENDIX J

CHILD ASSENT FORM

My name is Calvin Isaacs from Ball State University. I am trying to learn about how Jamaican children feel when their mother is living in a foreign country. I want to learn about how children feel so that we know what to do to make them happy even if their mother is living abroad. If you would like, you can be in my study.

If you want to be in the study, you can sign your name on the sign-up sheet that will be posted in your classroom. After you do that I will give you a letter and a permission form to take to your parent or guardian. If your parent or guardian agrees for you to be a part of the study she will sign the consent form and give it to you to take back to your teacher. I will then give you some forms with some simple questions for you to answer. The questions will be asking you about how you feel about yourself, and how you feel about people and things around you. There will not be any right or wrong answers. You will just choose the answer that you think is best. I will not ask you to write your name on the paper because I will not need to know how you answered the questions. I will give you an envelope so that when you are finished you will place all your forms in it. Everything will be finished in about 45 minutes.

There are no big risks or dangers for taking part in this study. You are not going to be harmed or be in any form of danger. However, if you feel sick or not good while taking part in the study, I will arrange for you to see the guidance counselor. I am not going to give you any gift or anything for being in this study. But if you still take part in the study you will help us to learn about other children like yourself and we will know what to do help those children.

I will not tell anyone that you are in the study. I am the only one who will see your answers. Your answers will be kept private and I will not show them to your friends or teachers. When I tell other people about my study, I will not use your name and no one will know it is you.

Your parents or guardian have to say “YES” for you to be in the study. If they say yes, you can choose if you want to do the study. You do not have to do it, if you don’t want to and no one will get mad at you or tell on you. If you want to do the study and later don’t want to do it anymore, just tell me and you can stop at any time.

My telephone number is 765-214-3045. You can call me if you have questions about the study or if you don’t want to be in the study any more.

Do you have any questions?

I will give you a copy of this form in case you have any questions later and have your parents keep this in a safe place.
Agreement:

I _______________________________________________ have decided to be in the study. I know I can stop being in the study at any time. Mr. Calvin Isaacs has answered all my questions.

_________________________________________________
Signature of Study Participant                      Date

_________________________________________________
Signature of Researcher                            Date