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Coparenting Profiles in the Context of Mexican-Origin Teen Pregnancy: Links to Mother-Daughter Relationship Quality and Adjustment

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Abstract

The current study explored the multifaceted nature of the mother-adolescent coparental relationship with data from 167 Mexican-origin adolescent mothers and their own mothers at ten months post-childbirth. Profiles of mother-adolescent coparenting were created with latent profile analysis using adolescents' reports of three dimensions of coparenting (communication, involvement and conflict). Four profiles were identified: (a) Harmonious Coparents (equal involvement, high communication, low conflict); (b) Harmonious-Adolescent Primary (adolescent is more involved than mother, high communication, low conflict); (c) Conflictual Coparents (equal involvement, high communication, high conflict); and (d) Conflictual-Adolescent Primary (adolescent is more involved than mother, moderate communication, high conflict). Families characterized by high mother-daughter conflict and psychological control prior to childbirth were more likely to belong in the Conflictual Coparents profile. In addition, adolescents' and mothers' depressive symptoms and parenting efficacy after childbirth were linked to profile membership, such that the Harmonious-Adolescent Primary profile reported the most positive adjustment patterns, whereas profiles with high coparental conflict (i.e., Conflictual Coparenting and Conflictual-Adolescent Primary profiles) showed the least positive adjustment patterns. Discussion considers the applied implications of identifying precursors to healthy and problematic mother-daughter coparenting for families of adolescent mothers in the early years of parenting.

Keywords

coparenting; Mexican-origin; mother-adolescent relationship; teen pregnancy

Within the context of adolescent parenthood, young mothers and their children are at elevated risk for developmental and adjustment problems, as adolescent mothers are more

likely to live in poverty and less likely to display optimal adjustment (Pittman & Coley, 2011). Adolescent mothers' adjustment to their new family role depends, in part, on their social support systems (Contreras, Narang, Ikhlas, & Teachman, 2002). Given the high rate of coresidence between adolescent mothers and their parents (80%; Manlove, Mariner, & Papillo, 2000), it is important to understand how the transition into adolescent motherhood is negotiated within the family system (East & Chien, 2010). In particular, the relationship between adolescent mothers (referred to as the adolescent) and their own mothers (referred to as the mother) is an under-researched, yet important, relationship to explore, especially because mothers often serve as coparents (Pittman & Coley, 2011) and primary sources of support for adolescents (Kretchmar & Jacobvitz, 2002). Further, the impacts of adolescent parenthood within Mexican-origin families is important to understand given that the average rate of teen pregnancy for Mexican-origin adolescent females is more than double (9%) the national average (4%; Centers for Disease Control and Prevention, 2011). In addition, Mexican cultural values that emphasize family cohesion, obligation, and respect (Knight et al., 2010), in combination with the high rate of adolescent pregnancy, underscore the need to understand mother-daughter coparenting in this cultural context. For this reason, this study extends research by examining adolescents' perceptions of the mother-adolescent *coparental relationship* within Mexican-origin families.

Goal 1: Profiles of the Mother-Adolescent Coparenting Relationship

A family systems perspective (Cox & Paley, 1997) suggests that family members do not operate in isolation but instead are embedded within relationship dyads (e.g., parent-child) and triads (e.g., parent-daughter-granddaughter). Within this study we focus on the mother-adolescent coparental relationship, which largely defines the infants' family context. Theoretical and empirical work on coparenting (McHale & Irace, 2011) suggests that the level of communication, involvement, and negative interactions (i.e., conflict) between coparents serves to create a context of support for the primary parent (e.g., adolescent mother) and a context within which children can flourish or flounder (Pittman & Coley, 2011).

Research on mother-adolescent coparenting has further noted the unique importance of coparental communication, involvement, and conflict on the coparenting relationship. Mother's support and mentorship towards the adolescent, and conversely, adolescent's disclosure and guidance seeking, has been the primary focus of research on *communication* between mother-adolescent coparents (Apfel & Seitz, 1991; Oberlander, Black, & Starr, 2007). High communication ensures that mothers and adolescents are kept involved and informed of infants' routines and needs, helping to create a stable and supportive family environment. Next, coparental *involvement* between mothers and adolescents denotes the amount of caregiving provided by mothers and adolescents, and has usually been measured as a comparison of the amount of caregiving provided by mothers relative to adolescents (Culp, Culp, Noland, & Anderson, 2006; Oberlander et al., 2007). This is important as the amount of involvement is an indicator of mothers' and adolescents' direct and indirect care for the infant. Further, equal or higher levels of adolescents' involvement, in comparison to mothers, has been associated with adolescents' higher parental commitment and efficacy (Culp et al., 2006). *Conflict* amongst mothers and adolescents has also been given empirical

attention (Buckingham-Howes et al., 2011), as more conflict between coparents can lead to lower esteem and respect, as well as rivalry amongst coparents. With increased conflict, the supportive and positive function of a coparenting relationship may be diminished and even become a stressor for the family system (Caldwell, Antonoucci, & Jackson, 1998; East & Felice, 1996). Together, this research suggests optimal levels of coparenting consist of high coparental communication, equal or higher levels of adolescent caregiving relative to mothers', and low coparental conflict.

Prior research has taken a variable-oriented approach to the study of coparenting, where different dimensions have been studied in isolation, ignoring the interrelated nature of multiple aspects of coparenting in the lives of mothers and daughters. In contrast to variable-oriented approaches, person-oriented analytic strategies (Magnusson, 1988) are designed to examine *patterns* of associations across multiple variables, and classify individuals into groups based in their similarities in these patterns. A qualitative study by Apfel and Seitz (1991) of 119 African American mother-adolescent dyads used a person-oriented approach by thematically coding for combinations of involvement and mentorship (a construct associated with communication) in family members' narrative of their coparenting relationship. Specifically, Apfel and Seitz (1991) created four coparenting profiles based on mothers' and adolescents' involvement and mentorship: (a) in the parental replacement profile, youth received no mentorship and mothers were primary caregivers of the infants; (b) in the parental supplement profile, adolescents and mothers shared in their care giving responsibilities, but little mentorship was provided to adolescents; (c) in the supported primary parent profile, adolescents were the primary caregiver and mothers provided care and mentorship as needed and not on a consistent basis; and (d) in the parental apprentice profile, adolescents were the primary parents with mothers consistently mentoring their adolescents' in the transition into parenthood. Apfel and Seitz's (1991) study was an important first step in understanding the multidimensionality of the mother-adolescent coparental relationship.

The current study builds on previous research (Apfel & Seitz, 1991) by exploring profiles of the coparental relationship with quantitative, person-oriented methodology in which latent profile analysis (Nylund, Asparouhov, & Muthén, 2007) will be used to identify typologies of the coparenting relationship. We expect that profiles will emerge where adolescents are the primary caregivers and receive maternal support through their level of communication; where adolescents and mothers are equally involved and report minimal communication; and where mothers are the primary caregiver. However, given that no research has included coparental conflict in creating profiles of coparenting in adolescent parenthood, and no research has explored coparenting profiles in Mexican-origin families, we did not advance specific hypotheses about the number nor the structure of coparenting profiles.

Goal 2: Parent-Child Relationship Correlates of Mother-Adolescent Coparenting

Another facet of family systems perspectives (Cox & Paley, 1997) is the notion that family relationship dynamics are embedded within the larger historical context of the relationship. Thus, mother-daughter coparenting dynamics do not emerge in isolation but are a reflection

of pre-established family dynamics in a new situation. Research on coparenting in adult couples (McHale, Kuersten-Hogan, & Rao 2004) supports such a notion, as coparenting dynamics (i.e., the shared responsibility of caregiving and rearing a child) are noted to be distinct from couple dynamics (i.e., intimacy/warmth, conflict), but coparenting is strongly influenced by the pre-birth couple relationship. In particular, more positive relationship dynamics among couples, including more warmth and less conflict (Cabrera, Shannon, & La Taillade, 2009) prior to the baby's arrival, have been associated with a more positive coparenting relationship and more parental involvement (Katz & Gottman, 2006). In the case of mother-adolescent coparents, the coparental relationship may be embedded within normative parent-adolescent relationship dynamics, such as warmth, conflict, and psychological and behavioral autonomy (Steinberg, 2001). Although research has not linked parent-adolescent warmth or conflict to mother-adolescent coparenting, a qualitative study of pregnant Latina adolescents and their mothers has linked mothers' reports of greater autonomy granting to more adolescent communication regarding childcare issues (Nadeem & Romo, 2008). A family systems perspective (Cox & Paley, 1997), in combination with coparenting (McHale et al., 2004) and parent-adolescent (Steinberg, 2001) research, directed us to the second goal of our study: To examine the links between mother-adolescent relationship dynamics pre-birth and profiles of coparenting post-birth. In particular, we expected more warmth and behavioral autonomy, and less conflict and psychological control, would be associated with coparental profiles marked with more communication, higher levels of mother and adolescent involvement, and less coparental conflict.

Goal 3: Profiles of Mother-Adolescent Coparenting and Adjustment

Parenting models have long noted the importance of coparenting in assuaging the risks for non-optimal adjustment for adolescent parents (Contreras et al., 2002). In particular, a supportive coparental relationship has been associated with adolescents' better mental health (i.e., lower stress and depression) and greater parenting efficacy (Contreras et al., 2002). However, less is known about the adjustment of adolescents' own mothers who are making an early transition into grandmotherhood and whose mental health may determine how much support they can provide to their daughters and grandchildren (Pittman & Coley, 2011).

Research on adolescent mothers provides insight into the associations between coparenting and adjustment. First, adolescents who report frequently communicating with their mother, and thus receiving more support from their mothers, report lower depressive symptoms (Caldwell et al, 1998) and more parental efficacy (Oberlander et al., 2007) than adolescents who report infrequent communication with their mothers. Next, adolescents' higher involvement in caregiving, as compared to their own mothers' involvement in caregiving, has been associated with adolescents' higher parenting efficacy six months after childbirth (Oberlander et al., 2007). In addition, when focusing on the role of coparental conflict, adolescents' reports of more coparental conflict have been associated with adolescents' higher levels of depressive symptoms (Kalil, Spencer, Spieker & Gilchrist, 1998). One study that focused on adolescents *and* their mothers noted a similar association for adolescents' and mothers' depressive symptoms (Caldwell et al., 1998), indicating that coparental conflict was a stressor for adolescents and mothers alike. Although there is evidence of links

between individual dimensions of the coparenting relationship and adjustment, no research has linked *profiles* of the coparenting relationship to adolescents' and their mothers' adjustment, which can enhance our knowledge of how these complex relationship dynamics work together. As such, our third goal was to examine the associations between profiles of coparenting and mothers' and adolescents' adjustment post-birth. We expected that profiles marked by more communication, adolescents' relatively greater involvement in childrearing, and lower conflict, would report better adjustment in terms of lower depression and higher adolescent parental efficacy. In contrast, profiles marked by less communication, less adolescent involvement, and higher conflict, would evidence higher depression and lower adolescent parental efficacy.

Current Study

The current study draws from a family systems perspective (Cox & Paley, 1997) to address three goals. First, guided by a person-oriented approach (Magnusson, 1988), we identified profiles of mother-adolescent coparenting with a focus on adolescents' reports of coparental communication, involvement, and conflict in the first year after the adolescents' transition to parenthood. Second, we examined the links between the mother-adolescent relationship (i.e., warmth, conflict, psychological control and behavioral autonomy) pre-birth and coparental relationship post-birth. Third, profiles of the coparental relationship were linked to mothers' and adolescents' reports of depressive symptoms and to adolescents' parental efficacy.

Method

Participants

Data for the current study came from an ongoing longitudinal study of 205 Mexican-origin pregnant adolescents and their mother figures (e.g., biological mother, aunt, grandmother; Umaña-Taylor, Updegraff, Guimond, & Jahromi, 2013) which included 173 biological mother-daughter dyads. The current study used data from 167 of the 173 biological mother-daughter dyads (97%) who participated in the first and second wave of data collection and had data on the three key study variables (i.e., coparenting conflict, communication, and involvement) and control variables (i.e., family income and adolescent living arrangements).

At Wave 1 (W1), mothers averaged 40.51 years of age ($SD = 4.94$) and their adolescent daughters averaged 16.22 years of age ($SD = .97$). Mothers were most likely to be born in Mexico (68%) and adolescents were most likely to be born in the U.S. (66%). Of those born outside the U.S., mothers lived in the U.S. an average of 23.24 years ($SD = 14.05$) and adolescents lived in the U.S. an average of 13.23 years ($SD = 4.75$). Mothers reported an average education level of 9th grade ($SD = 3.73$ years) and 62% of adolescents were enrolled in high school. Median household income was \$27,566 ($SD = \$20,335$; range = \$94 to \$114,000). Adolescents and mothers primarily co-resided within the same household ($n = 124$; 74.2%), with a portion of these adolescents residing with the infants' fathers and their mothers ($n = 26$; 15.6%). Some adolescents lived with the infants' fathers without their mothers ($n = 29$; 17.4%) or other family members (e.g., father, sister; $n = 14$; 8.4%).

Procedure

In-home, individual, semi-structured interviews were administered at all waves by a female interviewer. The interview consisted mainly of survey measures, with a few open-ended items (e.g., job description), and was read aloud by interviewers to all participants to avoid potential literacy challenges. Parental consent and youth assent were obtained for participants who were younger than 18 years old, and informed consent was obtained for participants who were 18 years and older. Wave 2 data were collected from adolescents and mothers when the adolescent's child was approximately 10 months old ($SD = .26$; range of 9.63 – 11.63 months). Interviews lasted approximately 2.5 hours for each participant and were conducted in the participant's language of preference (i.e., English or Spanish), with 62% of adolescents and 31% of mothers completing the interviews in English at W1, and 64% of adolescents and 28% of mothers completing interviews in English at W2. Measures were forward-translated to Spanish and back-translated to English, and inconsistencies were resolved by a bilingual team of translators (Knight, Roosa, & Umaña-Taylor, 2009). For participation, adolescents and mothers each received \$25 at W1, and \$30 at W2.

Measures

Goal 1: Adolescent Reports of Coparenting—Features of the coparenting relationship were assessed via three measures administered at W2. Adolescents reported on the amount of coparenting *communication* (Coparental Communication scale; Ahrons, 1981) occurring between them and their mothers using a 7-item measure with a 5-point response scale ranging from 1 = *Never* to 5 = *Always*. A sample item is: “How often do you talk to your mother about medical issues or problems related to the baby?” Items were averaged so higher scores indicated more coparenting communication and Cronbach's alphas indicated good reliability ($\alpha = .91$). Adolescents also reported on the amount of *conflict* (Coparental Interaction scale; Ahrons, 1981) occurring between them and their mothers using a 4-item measure of coparenting conflict with a similar 5-point response scale. A sample item is: “When you and your mother discuss parenting issues how often does it result in an argument?” Once again, items were averaged so higher scores indicated more coparenting conflict and Cronbach's alphas indicated good reliability ($\alpha = .87$). Next, a 6-item measure was developed for the current study to assess adolescents' reports of their level of parental *involvement* (6 items) relative to their mothers' involvement in caregiving for the infant. Adolescents were asked, “Who spends more time doing each of the following?” Adolescents reported on activities such as feeding, playing, and general care (e.g., changing diapers). Response options ranged from 1 = *My mother does this much more than I do* to 5 = *I do this much more than my mother*; a score of 3 reflected the response option “*We both do this almost the same amount of time*.” The items were averaged, with higher scores indicating greater involvement by the adolescents, and lower scores reflecting greater involvement by mothers. Cronbach's alphas showed good reliability ($\alpha = .76$).

Goal 2: Mother and Adolescent Reports of Parent-Child Relationship Qualities

—To address Goal 2, both mothers and adolescents reported on the mother-daughter relationship at W1. For mother-adolescent *warmth* (8 items; Child Report of Parental Behavior Inventory; Schwarz, Barton-Henry, & Pruzinsky, 1985), participants responded on a 5-point scale ranging from 1 = *Almost never* to 5 = *Almost always*, with a sample item of

“My mother sees my good points more than my faults” (adolescent version). Items were averaged and a higher score indicated more warmth. The measure showed good reliability for mothers ($\alpha = .79$) and adolescents ($\alpha = .88$). For mother-adolescent *conflict* (16 items; Smetana, 1988), participants reported the frequency of conflict with each other regarding several issues (i.e., chores, schoolwork, friends) on a 6-point scale ranging from 1 = *Not at all* to 6 = *Several times a day*. Items were averaged and a higher score indicated more conflict, with good reliability for mothers’ ($\alpha = .83$) and adolescents’ ($\alpha = .83$) reports. For mother-adolescent *behavioral autonomy* (10 items; Peterson, Bush, & Supple, 1999), participants responded on a 4-point scale ranging from 1 = *Strongly disagree* to 4 = *Strongly agree*, with a sample item of “My mother allows me to decide what clothes I should wear without interfering too much” (adolescent version). Items were averaged and a higher score indicated more behavioral autonomy. The measure showed acceptable reliability for mothers ($\alpha = .69$) and adolescents ($\alpha = .83$). For mother-adolescent *psychological control* (8 items; Barber, 1996), participants responded on a 5-point scale ranging from 1 = *Almost never* to 5 = *Almost always*, with a sample item of “My mother is always trying to change how I feel or think about things” (adolescent version). Items were averaged and a higher score indicated more psychological control with acceptable reliability for mothers ($\alpha = .65$) and adolescents ($\alpha = .74$).

Goal 3: Mother and Adolescent Reports of Depressive Symptoms and Parental Efficacy

—To address Goal 3, mothers and adolescents reported on their depressive symptoms (W2) and perceptions of adolescents’ parenting efficacy (W2). For *depressive symptoms*, mothers and adolescents completed the Center for Epidemiological Studies Depression Scale (CES-D; Radloff, 1977) where they reported on the frequency that each of 20 symptoms occurred on a 4-point scale in the past week from 0 = *Rarely or none of the time*, 3 = *Most of the time*. Items were averaged and high scores indicated more depressive symptoms. Scores above .80 indicated clinical levels of depressive symptoms. Cronbach’s alphas for adolescents’ and mothers’ reports of depressive symptoms were .89 and .87, respectively. Mothers’ and adolescents’ perceptions of adolescents’ *parenting efficacy* were assessed with the 25-item Parental Expectations Survey (Reece, 1992; Reece & Harkless, 1998) in which items (e.g., “I can meet all the demands placed on me now that my baby is here”) were rated on a 5-point scale from 1 = *Not at all sure* to 5 = *Very sure*. Cronbach’s alphas were acceptable for adolescents ($\alpha = .91$) and mothers ($\alpha = .95$). Correlations among study variables are reported in Table 1.

Control variables—*Adolescents’ living arrangements* and *household income* were included in the analysis to control for family context variability within the sample. *Adolescents’ living arrangements* at Wave 2 were captured by asking adolescents to identify the persons (e.g., 1=mother, 2= father) living in their home. A categorical variable was created to identify whether the adolescent lived with her mother = 1 ($n = 124$) or not ($n = 43$). *Household income* was computed as a log transformation of the sum of mothers’ and adolescents’ reported annual wages, public assistance, food stamps, and any additional income.

Results

Analytic Plan

To address the first goal, latent profile analysis (LPA) was used to identify profiles among Mexican-origin mother-adolescent daughter dyads' coparenting styles. Latent profile analysis (LPA) uses model-based procedures to identify the best number of profiles, the structure of such profiles, and the probability of belonging to a profile for each participant (Nylund, et al., 2007). LPA was conducted using Mplus 6.1 (Muthén & Muthén, 2011) with adolescents' reports of mother-adolescent coparental communication, involvement, and conflict post childbirth to identify coparenting profiles. In addition, adolescents' age, household income, and living arrangements were included as correlates in the LPA analysis to control for within-sample heterogeneity. Several factors were considered in selecting the best profile solution: (a) model fit statistics (i.e., lowest BIC, AIC, and ABIC estimates; likelihood ratio nested model test); (b) the stability of the profile solution (i.e., multiple start values lead to similar solution); (c) the ability to correctly differentiate between individuals belonging to specific profiles (i.e., average latent class probabilities above .80); and (d) the intuitive nature of the profile solution (Nylund et al., 2007).

If the average latent class probabilities are high, with an average of these estimates (i.e., the entropy score) at or above .80, then Clark and Muthén (2010) have noted it is appropriate to use a classify-analyze approach. A classify-analyze approach involves using the LPA probabilities to classify individuals into their most likely profile for future analysis. Within this study, a classify-analyze approach was used and a series of 4 (Profile) x 2 (Family Member: adolescent versus mother) mixed model ANOVAs with mothers' and adolescents' reports of the mother-adolescent relationship (Goal 2) and adjustment (Goal 3) were estimated. Proc Mixed in SAS 9.2 was used to analyze the data, as Proc Mixed allowed us to use Profile memberships as the between-family effect and family member as a within-family effect. Further, Proc Mixed is an appropriate method for analyzing dyadic data (mothers and adolescents) as it takes into account nestedness among the family-level data (Kenny, 2008).

Identifying profiles of Mother-Adolescent Coparenting

Overall, fit statistics indicated the four-profile solution was the best fitting model (Figure 1) as this model had BIC and ABIC estimates closest to zero and the log-likelihood nested model test indicated that the four-profile solution improved fit from the three-profile solution, and that the five-profile solution did not improve model fit from the four-profile solution (Table 2). In addition, the average latent class probabilities for the four-profile solution indicated that profile membership was well differentiated (Table 2). We labeled our first profile, *Harmonious Coparents* ($n = 53$, 32% of the sample), as coparental communication was high ($M = 4.16$; $SE = .14$), mothers and adolescents were almost equally involved in childrearing the infant ($M = 3.65$; $SE = .11$), and coparental conflict was low ($M = 1.89$; $SE = .10$). The second profile, *Harmonious-Adolescent Primary* ($n = 93$, 56%), was comprised of high coparent communication ($M = 3.77$; $SE = .09$), adolescents who reported that they were more involved with the infants than their mothers ($M = 4.56$; $SE = .06$), and low coparental conflict ($M = 1.68$; $SE = .08$). The third profile, *Conflictual Coparents* ($n = 12$, 7%), was comprised of high coparent communication ($M = 4.17$; $SE = .$

25), equal involvement of the mother and adolescent in childrearing of the infant ($M = 3.10$; $SE = .14$), and moderate coparental conflict ($M = 3.48$; $SE = .22$). The final profile, *Conflictual-Adolescent Primary* ($n = 9$, 5%), included mothers and adolescents with moderate communication ($M = 3.62$; $SE = .27$), adolescents who reported more involvement than their mothers ($M = 4.75$; $SE = .18$), and moderate coparental conflict ($M = 3.62$; $SE = .27$). Follow up analyses indicated mean differences in coparental conflict, $F(3, 163) = 61.48$, $p < .001$, communication, $F(3, 166) = 7.52$, $p < .001$, and involvement, $F(3, 166) = 127.73$, $p < .001$, across profiles (Figure 1).

Mother-Adolescent Relationship Correlates and Profile Membership

A classify-analyze approach was used to accomplish our second goal, linking Wave 2 profiles of coparenting to mother-adolescent relationship correlates at Wave 1. A series of 4 (Profile) $\times$ 2 (Family Member: adolescent versus mother) mixed model ANOVAs were conducted with mothers' and adolescents' reports of mother-adolescent warmth, conflict, behavioral autonomy, and psychological control as the dependent variables (see Table 3). When exploring differences in mother-adolescent warmth, no significant profile main effects or interactions emerged. However, a significant profile main effect emerged for mother-adolescent conflict, $F(3, 163) = 8.76$, $p < .001$, such that dyads in the Conflictual Coparents profile reported more mother-adolescent conflict prior to the infants' birth as compared to the Harmonious Coparents dyads and the Harmonious-Adolescent Primary dyads. Next, a profile effect emerged for behavioral autonomy $F(3, 163) = 3.68$, $p < .01$, such that dyads in the Conflictual Coparents profile reported that mothers granted less behavioral autonomy to adolescents prior to the infants' birth as compared to the Harmonious Coparents dyads and to the Harmonious-Adolescent Primary dyads. In addition, a profile by family member interaction emerged for mother-adolescent psychological control, $F(3, 163) = 3.24$, $p < .05$. To follow up on the profile by family member interaction, two one-way ANOVAs were estimated, one for adolescents and one for mothers, using profile membership as the between-family effect. Results indicated that the profile mean differences were significant for adolescents, $F(3, 163) = 11.55$, $p < .001$, and not mothers, $F(3, 168) = 1.38$, ns . Adolescents belonging to the Conflictual Coparents profile reported feeling significantly more psychological control from mothers than adolescents from all other profiles. In addition, adolescents from the Harmonious Adolescent Primary profile reported significantly less perceived psychological control from mothers than those in the Harmonious Coparents and those in the Conflictual-Adolescent Primary profiles.

Profile Membership and Mother and Adolescent Adjustment

Turning to our third goal, to link profiles of coparenting to mothers' and adolescents' adjustment at Wave 2 (i.e., depressive symptoms, adolescents' parenting efficacy), 4 (Profile) $\times$ 2 (Family Member: adolescent versus mother) mixed model ANOVAs were estimated (also in Table 3). For depressive symptoms, a main effect for profile was significant, $F(3, 163) = 3.56$, $p < .05$. Follow up analyses indicated that family members in the Conflictual Coparents profile reported more depressive symptoms as compared to those in the Harmonious Coparents and Harmonious-Adolescent Primary profiles. In addition, family members in the Conflictual-Adolescent Primary profile reported significantly more depressive symptoms as compared to those in the Harmonious-Adolescent Primary profile.

Finally, a profile main effect emerged for reports of adolescents' parental efficacy, $F(3, 163) = 3.76, p < .01$, such that mothers and daughters in the Harmonious-Adolescent Primary profile reported that adolescents were significantly more efficacious in their parenting than those in the Conflictual-Adolescent Primary and the Harmonious Coparents profile. The difference between Harmonious-Adolescent Primary and Conflictual Coparents profiles approached significance ($p < .08$).

Although this was not a focus of our study, profile membership was associated with adolescents' living situation at W2, $\chi^2(167) = 35.296, p < .00$. The Harmonious Coparent adolescents lived with their mothers (79%), or with their mothers *and* the infant's father (21%). Harmonious-Adolescent Primary adolescents lived with their mothers (51%), the infant's father (25%), mothers and the infant's father (15%), or other family members (10%). Conflictual Coparent adolescents lived with their mothers (50%), other family members (25%), the infant's father (17%), or with their mothers and the infant's father (8.3%). The Conflictual Adolescent Primary adolescents lived with the infant's father alone (44%), mothers alone (33%), or other family members (22%).

Discussion

This study examined profiles of mother-adolescent coparenting among Mexican-origin families, a group with high rates of adolescent motherhood (Centers for Disease Control and Prevention, 2011) and for whom social support is important in reducing the risk for maladjustment among adolescent mothers and their offspring (Contreras et al., 2002). Because mothers are key providers of social support for their daughters who are transitioning to motherhood (Contreras et al., 2002), research on the nature and correlates of coparenting among Mexican-origin adolescent mothers is an important topic. This study extends prior research by examining patterns of adolescents' reports of multiple dimensions of coparenting to provide a more contextual understanding of the mother-adolescent coparental relationship.

Profiles of the Mother-Adolescent Coparenting Relationship

A family systems perspective (Cox & Paley, 1997), in combination with literature on coparenting (McHale & Irace, 2011), informed our primary goal to explore patterns in adolescents' perceptions of three dimensions of the mother-adolescent coparental relationship. Through the use of a person-oriented approach (Magnusson, 1988; Nylund et al., 2007), four distinct profiles were identified in this sample. Notably, the majority of the sample was characterized by profiles who reported frequent communication and relatively low conflict. This may be reflective of the cultural context and values of Mexican-origin families who highly regard cohesion, obligation, and respect within the family (Knight et al., 2010). The most common profile was the Harmonious-Adolescent Primary profile, where adolescents were the primary caregiver of their infant but communicated frequently with their mothers and engaged in minimal conflict over parenting. This profile shared some features with Apfel and Seitz's (1991) supported primary parent profile that characterized adolescents as the primary parent with mothers serving as mentors. In our study, the Harmonious-Adolescent Primary adolescent group may have received a significant amount

of mentorship from their mothers through regular communication about parenting, but were still acting as the primary caregiver of their infant. Thus, in this profile there is a clear distinction in adolescents' versus mothers' roles in infants' lives. Having clear role distinctions may have helped in preventing or reducing conflict between adolescents and mothers.

The second most prevalent profile, the Harmonious Coparents profile, was characterized by higher levels of communication than the Harmonious-Adolescent Primary profile and more equal levels of mother-adolescent involvement. Thus, the Harmonious Coparents profile was most similar to Apfel and Seitz's (1991) parental supplement model where mothers and adolescents were equally involved in the infant's care. However, unlike Apfel and Seitz's expectations that the parental supplement model would lead to high levels of coparental conflict, our Harmonious Coparents group was characterized by low levels of coparental conflict. Specifically, coparental conflict was as low as conflict in the Harmonious-Adolescent Primary profile, lower than in the other two profiles, and fell within the low range of the scale. The two most prevalent profiles in this study may have shown low levels of conflict due to values of family cohesion and respect (Knight et al., 2010) which are highly endorsed in this cultural context. These values may have reduce the social acceptance of expressing anger and disrespect towards family members when rearing the infant. Potentially, these cultural values are among the factors that have led a large proportion of our adolescent mothers to benefit from a harmonious coparental dynamic that can support them as they transition into motherhood so early in life.

A small proportion of the adolescents reported significantly high levels of coparental conflict and belonged to our last two profiles. The Conflictual-Adolescent Primary profile made up less than 10% of the sample, and was characterized by adolescents who reported the lowest levels of communication and the highest levels of conflict. Not surprisingly, this profile groups was more likely to live with the infant's father or other family members, than to live with their mothers (alone or with other family members). This profile most resembled Apfel and Seitz's (1991) supported primary parent model; adolescents reported being the primary caregiver and there was limited parental communication. With respect to the level of coparental conflict, research on marital coparenting suggests increased conflict has a significant effect on parental withdrawal (Cox, Paley, & Harter, 2001). Possibly, higher levels of coparental conflict are associated with mothers' withdrawal, leaving the adolescent as the primary parent for the infant. Alternatively, adolescents' gate-keeping (McHale, et al., 2004), to prevent mothers' involvement in the infants' life, may lead to coparental conflict. More research is needed to understand how dimensions of coparenting interact as mothers and adolescents negotiate the coparental relationship.

The Conflictual Coparents profile was the least prevalent profile in the study (6%) and was comprised of adolescents who reported communicating with mothers at similar levels as the Harmonious Coparents profiles; however, these adolescents reported mothers were nearly equally involved in parenting the infant, and reported the highest coparental conflict. Similar to the Harmonious Coparents profile, the Conflictual Coparents most resembled Apfel and Seitz's (1991) parental supplement model. In contrast to the Harmonious Coparents profile, however, the Conflictual Coparents group *was* characterized by high conflict as suggested

by Apfel and Seitz. Possibly, the distinct levels of involvement may differentiate the Harmonious Coparents and Conflictual Coparents profiles, leading to differences in conflict. It is also possible that the suboptimal relationship dynamics prior to childbirth in the Conflictual Coparents profile group (discussed below) may have led to increased conflict post-childbirth.

It is noteworthy that we did not identify any families belonging to the parent replacement model because no adolescents reported that their mothers were the primary caretaker for the infant. This may be indicative of cultural values that emphasize females' traditional caregiving roles, family cohesion, and family obligation (Knight et al., 2010), which together can foster a family environment where family members, and especially females, are expected to come together in childrearing activities. It also is possible, though, that reporter bias played a role, as adolescents may be reluctant to admit they are not the primary parent to their child. Future research may want to test for the presence of these profiles using mothers' reports of coparenting and also explore how cultural values, such as traditional gender roles, are linked to coparenting. Despite the sole reliance on adolescent reports of coparenting, the current profiles of coparenting in Mexican-origin mother-adolescent dyads were remarkably similar to Apfel and Seitz (1991) profiles using African American mothers' and adolescents' reports; this minimizes concerns regarding reporter bias in the current findings. Further, the striking similarities across studies help to illustrate potential cross-cultural similarities among Mexican-origin and African American mother-adolescent coparental relationship dynamics.

Parent-Child Relationship Correlates of Mother-Adolescent Coparenting

As our second goal, we explored the notion that family relationship dynamics are embedded within the larger historical context of each relationship (Cox & Paley, 1997). Our results identified mother-adolescent conflict, maternal psychological control, and behavioral autonomy, but not mother-adolescent warmth, as significant precursors to some of the less positive coparental profiles. Similar to research on adult coparenting couples, less conflict before the birth of the infant was associated with the more positive coparenting profiles, as the Harmonious-Adolescent Primary and Harmonious Coparents profiles were marked by equally low prior levels of mother-adolescent conflict. In contrast, mothers' and adolescents' average conflict pre-birth was highest for the Conflictual Coparenting profile. Research on parent-adolescent dynamics suggests that it is normative to engage in high levels of conflict during adolescence, especially when adolescents are attempting to reduce parents' psychological and behavioral control over their lives (Steinberg, 2001); however, coparenting research suggests that high levels of conflict increase adolescent mothers' stress in an already stressful situation (Caldwell et al., 1998; East & Felice, 1996). In this case, the difference between what is normative in mother-adolescent dynamics and what is necessary for coparenting may lead to less optimal adjustment, as discussed below.

With respect to maternal behavioral autonomy granting and psychological control, research on pregnant Latina adolescents and their mothers suggested that mothers' reports of more autonomy granting and potentially less control before the birth would be associated with more coparental communication among mothers and daughters (Nadeem & Romo, 2008).

However, in the current study we found no clear relation between maternal behavioral autonomy granting and psychological control pre-birth and profiles characterized by high or low communication. In our study, adolescents who reported the highest communication (i.e., Conflictual Coparents and Harmonious Coparents) came from families with significantly different mean levels of behavioral autonomy and different mean levels of maternal control. Further, family members in the Harmonious Adolescent Primary profile reported the highest behavioral autonomy and lowest maternal control, but reported lower coparental communication than the Conflictual Coparents and Harmonious Coparents profiles. However, because our profiles were characterized by a combination of three dimensions of coparenting (i.e., communication, conflict, and involvement), comparisons to conclusions drawn in prior variable-oriented research are difficult. Importantly, our results highlight the importance of exploring coparental dimensions in combination and underscore the utility of comparing variable- and person-oriented approaches to identify gaps in the literature. As an example, a next step may be to explore the moderating effects of coparental conflict and involvement on the links between behavioral autonomy and coparental communication.

Profiles of Mother-Adolescent Coparenting and Adolescents' and Mothers' Adjustment

Our final goal was based on parenting models, which suggest a positive coparenting relationship can be a protective factor for adolescents' and their infants' adjustment (Contreras et al., 2002), particularly through increased mental health and parental efficacy. Indeed, profile differences emerged in family members' depressive symptoms 10 months after the infant's birth. Mothers and adolescents in the Harmonious-Adolescent Primary and Harmonious Coparents profiles reported the lowest levels of depressive symptoms. Notably, both profiles are characterized by low levels of coparental conflict. In contrast, the Conflictual Coparents and Conflictual-Adolescent Primary profiles were characterized by depressive symptom levels that were above the clinical cut off for community-based samples. This finding is consistent with previous variable oriented research linking coparental conflict to higher levels of adolescents' (Kalil et al., 1998) and mothers' depressive symptoms (Caldwell et al., 1998), but extends prior work by showing that profiles with high coparental conflict are associated with higher levels of depressive symptoms, regardless of coparental involvement and communication. Such results suggest that the effects associated with coparental conflict are not easily ameliorated by other coparenting dimensions, but this moderating association should be tested in future studies.

Finally, adolescents' parental self-efficacy 10 months after childbirth also differed across coparental profiles. Prior research suggested that high levels of coparental communication and adolescents' higher involvement in caregiving (Oberlander et al., 2007) were each associated with more parental efficacy. Consistent with such work, our Harmonious-Adolescent Primary profile emerged as the profile with the highest family level reports of adolescent parental self-efficacy. On the other hand, those in the Conflictual-Adolescent Primary profile reported the lowest levels of adolescent self-efficacy. The combination of having lower levels of coparental communication and higher levels of coparental conflict may place adolescents in the Conflictual-Adolescent Primary profile at risk for non-optimal adjustment. In particular, these adolescents may suffer from the increased stress of a conflictual mother-adolescent relationship without the benefit of mothers' mentorship during

their transition to parenthood (Buckingham-Howes et al., 2011). This combination may lead adolescents to feel less comfortable with their parenting skills. A second interpretation may be that conflict among coparents may arise as adolescents attempt to take on the primary parenting role despite mothers' belief that the adolescent is not efficacious. Once again, future research should explore the moderating effects of coparental involvement and communication on the association between coparental conflict and adjustment to disentangle associations among coparenting dimensions.

Limitations and Future Directions

The current study had many strengths, including the conceptualization of the mother-adolescent coparenting relationship as multidimensional, the reliance on multiple reporters, and the use of multiple time-points of measurement. It is important to note the study's limitations as well. First, the current study explored the mother-adolescent coparental relationship at a single time-point; however, as mothers and adolescents negotiate their alliance, coparental dynamics may change in relation to their developmental needs. Further, by not measuring dimensions of coparenting at multiple time-points it was not possible to understand how profile membership may shift over time. Future research should examine the stability as well as fluidity of belonging to certain coparenting profiles as mothers and adolescents adapt to their new family roles. Second, the small sample size for the Conflictual Coparents and Conflictual Adolescent-Primary profiles should be acknowledged as a limitation, as the small sample size may have reduced our power to detect profile differences in mother-adolescent relationship qualities and adjustment. Third, characteristics of the infant were not included; thus, it was not possible to understand how infants' health or temperament, for example, impacted the nature of the mother-adolescent coparental relationship. Future work would benefit from an analysis of the mother-adolescent-infant triad to better capture the context within which adolescent parenthood is negotiated among mothers and adolescents.

Conclusion

The transition into adolescent parenthood can be a stressful experience for young mothers and their families; however, such stress can be moderated by the level of support offered to adolescents, particularly via supportive coparental relationships (Contreras et al., 2002; McHale & Irace, 2011). The current study added to the literature on adolescent parenthood by exploring adolescents' perceptions of the mother-adolescent coparenting relationship. Importantly, we highlighted variation in the manner in which mothers and adolescents interacted with one another with regard to parenting, and we identified patterns that may be protective or disruptive to adjustment during adolescent parenthood. Further, our findings underscore the importance of focusing on mother-adolescent dynamics that can put dyads at risk (i.e., conflict and psychological control) versus those that may protect (i.e., warmth and autonomy granting) them from non-optimal coparental relationship dynamics. By helping mother-daughter dyads foster more positive relationship dynamics prior to entering into a coparental role, service providers can help prevent dyads from engaging in problematic coparenting dynamics linked to higher depression, lower self-efficacy, and ultimately a higher risk context for a developing infant.

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References

- Ahrons CR. The continuing coparental relationship between divorced spouses. *American Journal of Orthopsychiatry*. 1981; 5:415–428. doi: 10.1111/j.1939-0025.1981.tb01390.x. [PubMed: 7258307]
- Apfel NH, Seitz V. Four models of adolescent mother-grandmother relationships in Black inner-city families. *Family Relations*. 1991:421–429. doi: 10.2307/584899.
- Barber BK. Parental Psychological Control: Revisiting a Neglected Construct. *Child Development*. 1996; 67:3296–3319. doi: 10.1111/j.1467-8624.1996.tb01915.x. [PubMed: 9071782]
- Cabrera NJ, Shannon JD, La Taillade JJ. Predictors of coparenting in Mexican American families and links to parenting and child social emotional development. *Infant Mental Health Journal*. 2009; 30(5):523–548. doi: 10.1002/imhj.20227. [PubMed: 20174599]
- Caldwell CH, Antonucci TC, Jackson JS. Supportive/conflictual family relations and depressive symptomatology: Teenage mother and grandmother perspectives. *Family Relations*. 1998; 47(4): 395–402. doi: 10.2307/585270.
- Centers for Disease Control and Prevention. Adolescent pregnancy and childbirth – United States, 1991–2008. *Morbidity and Mortality Weekly Report*. 2011; 60(1):105–108.
- Clark, SL.; Muthén, B. Relating latent class analysis results to variables not included in the analysis. 2010. Available at: <http://statmodel2.com/download/relatinglca.pdf>
- Contreras, JM.; Narang, D.; Ikhlas, M.; Teichman, J. A conceptual model of the determinants of parenting among Latina adolescent mothers.. In: Contreras, JM.; Kerns, KA.; Neal-Barnett, AM., editors. *Latino children and families in the U.S.* Praeger; Westport, CT: 2002. p. 155–177.
- Cox MJ, Paley B. Families as systems. *Annual review of psychology*. 1997; 48(1):243–267. doi: 10.1146/annurev.psych.48.1.243.
- Cox MJ, Paley B, Harter K. Interparental conflict and parent-child relationships. *Interparental conflict and child development: Theory, research, and application*. 2001:249–272. doi: 10.1017/CBO9780511527838.011.
- Culp AM, Culp RE, Noland D, Anderson JW. Stress, marital satisfaction, and child care provision by mothers of adolescent mothers: Considerations to make when providing services. *Children and Youth Services Review*. 2006; 28(6):673–681. doi: 10.1016/j.childyouth.2005.06.009.
- East PL, Chien NC. Family dynamics across pregnant Latina adolescents' transition to parenthood. *Journal of Family Psychology*. 2010; 24:709–720. doi:10.1037/a0021688. [PubMed: 21171769]
- East, PL.; Felice, ME. *Adolescent pregnancy and parenting: Findings from a racially diverse sample*. Lawrence Erlbaum; Hillsdale, NJ: 1996.
- Kalil A, Spencer M, Spieker S, Gilchrist L. Effects of Family Living Arrangements and Quality of Relationships on the Mental Health of Low-Income Adolescent Mothers. *Family Relations*. 1998; 47(4):433–41.
- Katz LF, Gottman JM. Spillover effects of marital conflict: In search of parenting and coparenting mechanisms. *New Directions for Child and Adolescent Development*. 2006; 1996(74):57–76. doi: 10.1002/cd.23219967406.
- Knight GP, Gonzales NA, Saenz DS, German M, Deardorff J, Roosa MW, Updegraff KA. The Mexican American cultural values scale for adolescents and adults. *Journal of Early Adolescence*. 2010; 30:444–481. doi: 10.1177/0272431609338178. [PubMed: 20644653]

- Kretchmar MD, Jacobvitz D. Observing mother-child observations across three generations: Attachment, boundary patterns, and the intergenerational transmission of caregiving. *Family Process*. 2002; 41(3):351–374. doi: 10.1111/j.1545-5300.2002.41306.x. [PubMed: 12395564]
- Magnusson, D. Individual development from an interactional perspective. Erlbaum; Hillsdale, NJ: 1988.
- Manlove J, Mariner C, Papillo AR. Subsequent Fertility Among Teen Mothers: Longitudinal Analyses of Recent National Data. *Journal of Marriage and Family*. 2000; 62(2):430–448. doi: 10.1111/j.1741-3737.2000.00430.x.
- McHale JP, Kuersten-Hogan R, Rao N. Growing points for coparenting theory and research. *Journal of Adult Development*. 2004; 11(3):221–234. doi: 10.1023/B:JADE.0000035629.29960.ed. [PubMed: 21127732]
- McHale, JP.; Irace, K. Coparenting in diverse family systems.. In: McHale, JP.; Lindahl, KM., editors. *Coparenting: A conceptual and clinical examination of family systems*. American Psychological Association; Washington, DC: 2011. p. 15-37.
- Muthén, LK.; Muthén, BO. *Mplus User's Guide*. Sixth Edition.. Muthén & Muthén; Los Angeles, CA: 2011.
- Nadeem E, Romo LF. Low-Income Latina Mothers' Expectations for Their Pregnant Daughters' Autonomy and Interdependence. *Journal of Research on Adolescence*. 2008; 18(2):215–238. doi: 10.1111/j.1532-7795.2008.00558.x.
- Nylund KL, Asparouhov T, Muthén B. Deciding on the number of classes in latent class analysis and growth mixture modeling: A Monte Carlo simulation study. *Structural Equation Modeling: A Multidisciplinary Journal*. 2007; 14:535–569. doi:10.1080/10705510701575396.
- Oberlander SE, Black MM, Starr RH Jr. Mothers and grandmothers: An intergenerational approach to adolescent parenthood. *American Journal of Community Psychology*. 2007; 39:37–46. doi: 10.1007/s10464-007-9087-2. [PubMed: 17437188]
- Peterson GW, Bush KR, Supple A. Predicting adolescent autonomy from parents: Relationship connectedness and restrictiveness. *Social Inquiry*. 1999; 69:431–457. doi: 10.1111/j.1475-682X.1999.tb00880.x.
- Pittman, LD.; Coley, R. Coparenting in families with adolescent mothers.. In: McHale, JP.; Lindahl, KM., editors. *Coparenting: A conceptual and clinical examination of family systems*. American Psychological Association; Washington, DC: 2011. p. 105-126. doi: 10.1037/12328-005.
- Radloff L. The CES-D Scale A self-report depression scale for research in the general population. *Applied Psychological Measurement*. 1977; 7:385–401.
- Reece SM. The parent expectations survey. *Clinical Nursing Research*. 1992; 1:336–346. [PubMed: 1483137]
- Reece SM, Harkless G. Self-efficacy, stress, and parental adaptation: Applications to the care of childbearing families. *Journal of Family Nursing*. 1998; 4(2):198–215. doi: 10.1177/107484079800400206.
- Schwarz JC, Barton-Henry LM, Pruzinsky T. Assessing child-rearing behaviors: A comparison of ratings made by mother, father, child, and sibling on the CRPBI. *Child Development*. 1985; 56:462–479. doi: 10.2307/1129734. [PubMed: 3987419]
- Smetana, JG. Concepts of self and social convention: Adolescents' and parents' reasoning about hypothetical and actual family conflicts.. In: Gunnar, MR.; Collins, WA., editors. *Minnesota Symposia on Child Psychology, Vol. 21: Development during the transition to adolescence*. Lawrence Erlbaum Associates; Hillsdale, NJ: 1988. p. 79-122.
- Steinberg L. We know these things: Parent adolescent relationships in retrospect and prospect. *Journal of Research on Adolescence*. 2001; 11:1–19. doi: 10.1111/1532-7795.00001.
- Umaña-Taylor AJ, Guimond AB, Updegraff KA, Jahromi L. A longitudinal examination of support, self-esteem, and Mexican-origin adolescent mothers' parenting efficacy. *Journal of Marriage and Family*. 2013; 75:746–759. doi: 10.1111/jomf.12019.

Figure 1.

Latent Profile of Coparenting among Mexican-Origin Mothers and their Adolescent Daughters.

Note. Columns of the same color that do not share the same subscript were significantly different from one another at $p < .01$.

Table 1

Correlations among Study Variables (N = 167)

	1.	2.	3.	4.	5.	6.	7.	8.	9.	10.	11.	12.	13.	14.	15.
1. CP Communication W2	–														
2. CP Conflict W2	-.09	–													
3. CP Involvement W2	-.26**	-.22**	–												
4. A Warmth W1	.29**	-.17*	.12	–											
5. M Warmth W1	.16*	-.09	.08	.32**	–										
6. A Conflict W1	-.05	.37**	-.18*	.21**	-.04	–									
7. M Conflict W1	-.05	.19*	-.04	-.05	.25**	.32**	–								
8. A Control W1	.02	.35**	-.30**	.20**	-.00	.39**	.08	–							
9. M Control W1	-.19*	.13	-.10	.02	.08	.21**	.17*	.05	–						
10. A Autonomy W1	.16*	-.23**	.11	.38**	.14	-.42**	-.19*	.29**	.16*	–					
11. M Autonomy W1	.11	-.17*	.10	.10	.21**	-.32**	-.34**	.20*	.26**	.23**	–				
12. A Depression W2	-.13	.45**	-.03	-.19*	-.06	.26**	.21**	.30**	.18*	-.16	-.09	–			
13. M Depression W2	-.13	-.01	-.06	-.11	-.08	.09	.06	-.00	.16*	.18*	-.06	.13	–		
14. A Self-Efficacy W2	.27**	-.20*	.19*	.31**	.27**	-.15*	.04	.01	-.21**	.28**	.00	-.14	-.03	–	
15. M Self-Efficacy W2	.10	-.18*	.14	.13	.30**	-.16*	-.13	.03	-.13	.18*	.18*	-.05	-.29**	.29**	–
Mean	3.87	2.00	4.17	4.04	4.02	2.01	2.10	2.20	2.49	3.12	2.96	0.84	0.83	4.52	4.16
(SD)	(0.90)	(0.87)	(0.67)	(0.78)	(0.64)	(0.69)	(0.69)	(0.68)	(0.61)	(0.47)	(0.40)	(0.55)	(0.61)	(0.43)	(0.65)

Note. CP = Coparenting, A = Adolescent, M = Mother. Measures were collected during the Third Trimester (W1) in adolescents' pregnancy or 10 Months (W2) after childbirth.

^aFor the measure of coparental involvement, lower scores indicated that mothers were relatively more involved with the newborn than adolescents, whereas higher scores indicated that adolescents were more involved in caregiving than mothers; a score of 3 reflected that adolescents and mothers were equally involved in caregiving.

*
 $p < .05$

**
 $p < .01$

 $p < .001$.

Table 2

Model Fit Statistics for Identifying the Best Profile Solution and Average Latent Class Probabilities for the Four-Profile Solution Indicating Probability of Belonging to a Profile (Row) By Profile Membership (Column)

	<u>Model Fit Statistics</u>				
	One-Profile Solution	Two-Profile Solution	Three-Profile Solution	Four-Profile Solution	Five-Profile Solution
AIC	1242.47	1213.81	1199.45	1186.99	1187.60
BIC	1261.36	1245.28	1243.52	1243.64	1256.84
ABIC	1242.36	1213.62	1199.18	1186.65	1187.18
Log-Likelihood	−615.24	−615.24	−596.90	−585.73	−575.49
Nested-Model Test		36.67	22.36	20.46	7.39
<i>df</i>		4.00	4.00	4.00	4.00
<i>p</i> -value		0.00	0.00	0.00	0.26

<u>Average Latent Class Probabilities</u>				
	Profile 1	Profile 2	Profile 3	Profile 4
Profile 1	0.83	0.14	0.03	0.00
Profile 2	0.09	0.90	0.00	0.01
Profile 3	0.03	0.00	0.94	0.03
Profile 4	0.00	0.09	0.00	0.91

Note. Within the “Average Latent Class Probabilities” section, estimates in the diagonal indicate the likelihood of being correctly classified within each profile and the off diagonal estimates indicate the probability of being misclassified into each profile (rows) by profile membership (columns).

Table 3

Means and Standard Deviations for Mother-Daughter Relationship Qualities at Wave 1 and Adjustment at Wave 2 for Each Coparenting Profile

	Harmonious Coparents (<i>n</i> = 53)		Harmonious-Adolescent Primary (<i>n</i> = 93)		Conflictual Coparents (<i>n</i> = 12)		Conflictual-Adolescent Primary (<i>n</i> = 9)	
	<i>M</i>	(<i>SD</i>)	<i>M</i>	(<i>SD</i>)	<i>M</i>	(<i>SD</i>)	<i>M</i>	(<i>SD</i>)
Mother-Daughter Relationship Qualities								
<u>Warmth W1</u>								
Adolescent	04.03	(0.11)	04.11	(0.08)	03.71	(0.22)	03.81	(0.26)
Mother	03.93	(0.09)	04.10	(0.07)	03.89	(0.18)	04.01	(0.21)
Average	03.98	(0.08)	04.10	(0.06)	03.80	(0.16)	03.91	(0.19)
<u>Conflict W1</u>								
Adolescent	02.04	(0.09)	01.86	(0.07)	02.78	(0.19)	02.38	(0.21)
Mother	02.06	(0.09)	02.03	(0.07)	02.64	(0.19)	02.34	(0.22)
Average	2.05 _{ab}	(0.07)	01.94 _a	(0.05)	02.71 _c	(0.15)	02.36 _{bc}	(0.17)
<u>Behavioral Autonomy W1</u>								
Adolescent	03.11	(0.06)	03.17	(0.05)	02.88	(0.13)	03.02	(0.15)
Mother	02.92	(0.05)	03.03	(0.04)	02.72	(0.11)	02.78	(0.13)
Average	3.02 _a	(0.05)	03.10 _a	(0.03)	02.80 _b	(0.10)	02.90 _{ab}	(0.11)
<u>Psychological Control W1</u>								
Adolescent	02.28 _a	(0.08)	02.01 _b	(0.06)	03.05 _c	(0.18)	02.49 _a	(0.20)
Mother	02.54	(0.08)	02.41	(0.06)	02.64	(0.17)	02.74	(0.20)
Average	02.41	(0.06)	02.21	(0.04)	02.84	(0.12)	02.61	(0.14)
Mother and Adolescent Adjustment								
<u>Depressive Symptoms W2</u>								
Adolescent	0.79	(0.07)	0.78	(0.05)	1.34	(0.15)	1.19	(0.17)
Mother	0.88	(0.08)	0.78	(0.06)	0.92	(0.18)	0.97	(0.20)
Average	0.83 _{ab}	(0.06)	.78 _a	(0.04)	1.13 _c	(0.12)	1.08 _b	(0.14)
<u>Adolescents' Parenting Efficacy W2</u>								
Adolescent	04.42	(0.06)	04.59	(0.04)	04.51	(0.13)	04.44	(0.14)
Mother	04.06	(0.09)	04.28	(0.07)	03.89	(0.19)	03.80	(0.21)
Average	04.24 _a	(0.06)	04.43 _b	(0.04)	04.20 _{abc}	(0.13)	04.12 _c	(0.14)

Note. W1 = Wave 1 and W2 = Wave 2 (i.e., 10 months after childbirth). Means in the same row that do not share a subscript differed at the $p < .01$ level.