

**SELF-CONCEPT, INNER RESIDUE OF
PAST RELATIONSHIPS, AND SOCIAL
FUNCTIONING IN ADOLESCENCE**

**A STUDY OF AGE AND GENDER DIFFERENCES IN
GROUPS OF NORMAL AND ANTISOCIAL
ADOLESCENTS**

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ABSTRACT

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This thesis presents several studies of normative development in adolescence, focusing specifically on internalized perceptions of parents' early behavior and how these perceptions affect the self-concept and social functioning during adolescence. Questions of possible age and gender differences in relation to perceptions of self-concept and early parental behavior are addressed. The patterns found in a normal adolescent group are compared with those in a group of adolescents with antisocial problems. Two hundred seventy-seven normal adolescents aged 12 to 18 and 30 adolescents with antisocial problems aged 13-19 were investigated. The following self-administered instruments were used: self-concept assessments, the Structural Analysis of Social Behavior (SASB) introject questionnaire, perception of early parental behavior assessment, the SASB mother/father questionnaires, and the EMBU (A Swedish acronym for "own memories of upbringing"). The Youth Self Report checklist (YSR) was used to assess internalizing and externalizing problems. The incidence of problem behavior in the group of adolescents with antisocial problems was assessed using DICA-R, Diagnostic Interview for Children and Adolescents.

Studies I and II showed that the normal adolescent self-concept and perception of early parental behavior were positive and that there were no age or gender differences. The antisocial group of adolescents, and particularly the antisocial girls, showed a more autonomous and negative self-concept and more negative perceptions of early parental behaviors.

Study III showed that a positive self-concept was related to a positive perception of parent's early behavior.

Study IV showed that an adolescent's positive self-concept was influenced by a mix of mother acting positively and father acting with control. Adolescent self-control was indirectly influenced by parental control behavior mediated through self-affiliation.

Study V showed that a positive self-concept was important for adjustment. A negative self-concept combined with female gender was a

risk factor for internalizing problems. Self-control had only a small effect on social adjustment in adolescence. The relationship between a negative self-concept and externalizing problem behavior was stronger for adolescents aged 15 to 16 than for younger or older adolescents. Internalizing problem behavior influenced externalizing problems. The results presented in this thesis support a modified “storm-and-stress” view of adolescence and highlight the importance of promoting a positive self-concept in every adolescent in various psychosocial contexts.

Key words: Self-concept, early parental behavior, adolescence, normal, antisocial, SASB, EMBU, YSR, DICA-R, path analysis

This dissertation is dedicated to my two loving adolescents, Lucilla and Johanna.

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No research is needed to inform me that each of you has had some positive effect on my self-concept. Without you, I could never have completed this thesis.

Umeå, January, 2004
Helene Östgård-Ybrandt

LIST OF PAPERS

This doctoral dissertation is based on the following studies, referred to in the text by their roman numerals.

I. Östgård-Ybrandt, H. & Armelius, B.-Å. (2003). Self-concept in adolescence: A study of age and gender differences in groups of normal and antisocial adolescents. Umeå Psychology Reports: No 3. Department of Psychology, Umeå University, Sweden.

II. Östgård-Ybrandt, H. & Armelius, B.-Å. (2003). Perception of early mother and father behavior in adolescence: A study of age and gender differences in groups of normal and antisocial adolescents. Umeå Psychology Reports: No 4. Department of Psychology, Umeå University, Sweden.

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INTRODUCTION

There are currently some 801 554 adolescents between 12 and 18 years of age living in Sweden (Statistical Yearbook of Sweden, 2003). They live with mobile phones, Eminem hip-hop, and chat with friends in their neighborhoods or across the world. They travel to places like Thailand and Miami, do “research” at school and present the results using PowerPoint. They go abroad to study. They often have two families and addresses, stepmothers and stepfathers, and stepbrothers and sisters. They can call the Help Line run by BRIS (Children’s Rights in Society) when they need someone to talk to outside the family. They have laws to protect them from abuse and their own money to spend. They have parents who are focused on them, who drive them to leisure activities, who ask them about their feelings, who worry about their mental health, who are concerned about anorexia and sexual abuse, who buy them TVs, videos, and cars – and are stressed. Adolescents today live in a context that did not exist even a decade ago.

Adolescent development in context

This thesis presents a study of adolescents in 2000. It looks at how adolescents’ view themselves and their earlier relationship with their parents. An attempt is made to understand how an adolescent’s view of him- or herself is related to his or her perceptions of the early behavior of parents and to current social behavior.

In this thesis, the self-concept and perceptions of parents are assumed to be influenced by and to influence the interpersonal context. In other words, in order to understand adolescents’ inner concepts of self and parents, one has to consider the social, cultural, and historical context of these interpersonal influences. Contextual factors in development during adolescence have received increased attention in recent years. Studies of teenagers’ “parents, problems and hormones” (Steinberg & Sheffield Morris, 2001) have been extended to include the relations between development in adolescence and interpersonal factors (family, siblings, and peer group); cultural factors (ethnicity); social factors (linking the home, peer group, school, neighborhood, and community); and the other historical contextual factors that together produce the adolescent (Burman, 1994; Elvin-Nowak, 2003; Morss, 1996). Contextual variations and their impact on development in adolescence, as well as the influence the adolescent has on the context (e.g., parents and family), have been added to the exploration of individual development and functioning.

The classification of a period of life as “adolescence” originates in the middle of the nineteenth century and is therefore a relatively recent development in Western societies. This period can be looked at from at least three different standpoints: as “a period of transition between childhood and adulthood,” as a unique period of biological and psychological turmoil (Grotevant, 1998), or as a period to which both these perspectives apply.

Understanding of normative development in adolescence has been colored by theoretical assumptions made decades ago. Descriptions of the relationship between adolescents and their parents are severely constrained by the traditional psychoanalytic model. Few attempts have been made to develop new comprehensive theories of normative adolescent development. Thus the large, coherent field of adolescent research can be referred to as a collection of “mini-theories” designed to describe limited dimensions of adolescence (Steinberg & Sheffield Morris, 2001).

It is often assumed that youth behavior is worsening and much research on adolescence has focused on problem behaviors (Grant, 2003). However, reports by youth, their parents, and teachers over the past decade point to a small increase in competencies and adaptive functioning, accompanied by a small decrease in problem behavior (Achenbach, Dumenci, & Rescorla, 2002). It is therefore important to focus on the “positive psychology of youth development” and there is a growing emphasis on issues such as the development of initiative (Larson, 2000), strength of character, responsibility and health (e.g., Rich, 2000).

Theoretical perspectives on adolescence

Hall (1931) is held to have been the first to present the “storm and stress” view as universal and biological. His approach was followed by others such as Anna Freud (1958) and Peter Blos (1967). They believed that recapitulation of the oedipal conflict during adolescence provoked emotional instability, a depressed mood, and conflict with parents, and they assumed a link between turbulence and sexuality in adolescence. The resurgence of instinctual drives was expected to be acted out in maladaptive behavior: To be normal “the upholding of a steady equilibrium” (Freud, 1958) during the adolescent period is by itself abnormal. Thus they regarded the absence of storm and stress as a sign of psychopathology.

Views of family relationships and autonomy during adolescence were dominated by the psychoanalytic emphasis upon a necessary separation between children and parents to avoid the children’s reawakened genital

urges being turned to the parents: “nothing helps here except a complete discarding of the people who were important to him as love objects in his past, namely, of his parents. This struggle against the parents is carried out in a variety of ways: by openly displayed indifference toward them, i.e., by denying their importance; by disparagement of them, since judging them as stupid, useless, ineffective people should make it easier to do without them; by open insolence and revolt against the beliefs and conventions which were previously shared with them” (Freud, 1971).

The storm-and-stress view suggests that adolescence is a period of life that is difficult - more difficult in some ways than other periods and difficult both for adolescents and for those around them. Recent empirical findings have resulted in a modified storm-and-stress view that takes into account individual differences and cultural variations in the three key aspects of the period, namely conflicts with parents, mood disruptions, and risk behavior (Arnett, 1999). Despite the popular theoretical assumption of turbulence in adolescence, empirical research supports the view that “the person who enters adolescence is basically the same as that who exits it” (Dusek & Flaherty, 1981).

A lifespan perspective offers a unique view of adolescence. Developmental issues that arise in adolescence can be traced back to childhood and followed into adulthood. Developmental continuities can be seen, as well as the more obvious changes that occur during the period of adolescence. According to classical psychoanalytic theories (e.g., Freud, 1938), much of adult personality is determined before adolescence, although some psychoanalytic theories grant importance to later developmental events. Both Erikson’s (1968) fifth life-cycle stage of identity versus role confusion and Blos’s (1979) view that adolescence is a second individuation stage in life highlight the importance of adolescence. Blos (1962) maintains that adolescence is a time when a person gets a second chance to resolve the psychological conflicts left over from childhood. According to Erikson, identity formation in adolescence is a “normative crisis” in which young people have to go through a disorienting process in order to achieve an identity involving commitment to adult roles (Erikson, 1968). He also believed that during this period there could be a psychological moratorium when the decision could be put on hold for a while. The notion of a psychological moratorium as posited by Erikson has been expanded upon by Marcia (1980), who postulated different identity statuses as a result of the presence or absence of crises and commitment in adolescence.

Nancy Chodorow, influenced by Freud, offers an alternative to early psychoanalytic theories. She saw different developmental paths for boys

and girls and ascribes this to identification with the same-sex parent and incorporation of that parent's personality and attitudes into the developing self-concept (at approximately 3-6 years). She also associated the self-concept with the social context and the first intimate relationship with the mother, and not with the fear of castration. Chodorow emphasizes that girls define themselves as females within the context of their first relationship still attached to the mother, while boys have to separate from the mother to develop as males (Chodorow, 1978).

The concept of the self has been central to the work of many psychodynamic theorists, e.g., Winnicott (1965), Sullivan (1953), Bowlby (1988), Kohut (1986), Mahler, Pine and Bergman (1975), and Stern (1985). These theorists describe the self-concept as the person's separateness from others and regard it as individual and distinctive. Great importance is placed on the first relationships with important others as the source for development of a self-concept. The first experiences with caregivers, most often the mother, and her "good-enough- mothering" (Winnicott, 1965) provide a positive context for the development of a stable self-concept. The model that the child makes of itself mirrors the parent's pictures of it, mediated through their interaction and verbal communication and the child's picture of its own interaction with the parents. The relationships to the caregivers serve as working models that are generalized to other relationships throughout life and provide the "secure base" (Bowlby, 1973, 1988) for the child's exploration of reality. The working models also determine the child's own feelings and the growing child's expectations of treatment by others. The goal in the development of the self-concept is psychological separation and individuation from important others (Mahler, et al., 1975). The internalization of the structure of the caregivers is carried out through different internalization processes such as "transmuting internalizations" (Kohut, 1986), and introjections and identification (Kernberg, 1976). The internalization is assumed to be achieved within the first years of the child's development.

Harry Stack Sullivan (1953) also believed that childhood and the mother played the most significant role in the development of the child's "self-system," which he referred to as the individual's collection of self-perceptions. Sullivan assumed that the self-system actively protects itself from information that would cause re-evaluation of the pre-existing self-perceptions of the bad-me (negative aspects), the good-me (everything we like about ourselves and the part we share with others), and the not-me (anxiety-provoking unconscious parts of the self). Sullivan also believed that the aim of protecting self-perceptions was to maintain congruence

between one's interpersonal world and one's self-perceptions (Sullivan, 1953). According to Sullivan, the seeking of confirmation of the self-concept from others and our understanding of relationships is connected to our view of ourselves. Much of Sullivan's theory revolves around the conflicts of adolescence, in which he identified three stages: pre-, early, and late adolescence.

Stern's theory of the four main senses of self and the domains of self-experience and social relatedness shares many features with both traditional psychoanalytic theory and attachment theory. Stern, however, emphasizes four different senses of self and their domains: the sense of an emergent self, the sense of a core self, the sense of a subjective self, and the sense of a verbal self. He assumed that all of these senses of self remained active during development (Stern, 1985).

The fundamental changes of adolescence

Adolescence is the period of growth that is the bridge between childhood and adulthood consequently adolescents are urged to "grow up" (the English word adolescence comes from the Latin *adolescere*, which means "to grow up"). Three developmental transitions are considered "primary" because they are general aspects of adolescence: changes in psychical development and sexual maturation, change in social status from child to adult, and potential for changes in reasoning ability (Grotevant, 1998).

Physically, adolescence begins with the onset of puberty at approximately 12 or 13 and culminates in adulthood at the age of approximately 19 or 20. There are individual differences in the timing of puberty and the start of physiological body changes, with girls generally starting earlier than boys (Siegel, Yancey, Aneshensel, & Schuler, 1999). Puberty brings new sexual feelings and a natural need to integrate these into a sense of self and to establish sexual relationships. The timing of pubertal changes is likely to be important for an adolescent's peer group status and influences the social and psychological responses that he or she receives from others.

Adolescence is the period in life we generally associate with self-exploration and identity seeking. According to Erikson (1968), it is not until adolescence that one has the mental or psychological capacity to tackle the task of identity formation. Erikson was of the opinion that the preadolescent around the age of 12 should already have resolved the crises of the earlier stage of industry versus inferiority and should have discovered pleasure in intellectual stimulation, in being productive, and in seeking success. The preadolescent should also have developed a sense of

competence and made the transition from the world of home to the world of peers. This task fulfillment can sometimes be delayed for various reasons. Its fulfillment is not made easier by the fact that it is at precisely this time when the adolescent has feelings of uncertainty about who he or she is that society begins to ask what roles the adolescent will choose to adopt as an adult. Thus, a key aspect of the adolescent dilemma is that it involves finding a role that not only fulfills the attributes of the self but is also consistent with what society expects. An adolescent's identity can therefore be seen as the result of a mutual recognition by the youth and society, with society identifying the alternative identities that are possible and influencing which of these are desirable and which are not (Steinberg, 1999). The social context of adolescence presents adolescent girls and boys with challenges and pressures that are both similar (e.g. occupation, gender roles and behaviors) and different (e.g. body image). In the contemporary Western social context, autonomy and independence for both genders are more important than in past decades (Arnett, 1999). In the search for an identity, the adolescent must discover what he or she believes in and what his or her attitudes and ideals are. Some adolescents have problems finding these roles and stay in a kind of prolonged moratorium or period of avoiding commitment. Others seem to avoid the problem altogether and settle easily on an available, socially approved identity. Still others resolve their confusion by adopting an available but socially disapproved role or ideology. This latter option leads to negative identity formation and is often associated with antisocial behavior. If the adolescent fails to find a role that fits by the time of entry into adulthood, he or she will feel a sense of role confusion or identity diffusion (Erikson, 1968). Psychological changes in terms of meshing one's individual abilities and interests with cultural opportunities and norms include changes in interpersonal relationships. The changes include the relationship to the parents and with the peer group. The intensification of new relationships outside the family contributes to lessening the emotional dependence on the parents and to major changes in the adolescent's relationship to the parents, specifically as regards increased autonomy (Mayselless, Wiseman, & Hai, 1998).

Intellectually, adolescence is the period when the individual becomes able to systematically formulate hypotheses or propositions, test them, and make rational evaluations. The formal thinking of adolescents tends to be self-consciously deductive, rational, and systematic. The "vulnerability of this period is exacerbated by the ability to think about one's thinking and to reflect on internal events, which brings about a dramatic increase in introspection" (Harter, 1986).

Aspects of the self-concept in adolescence

Research results clearly indicate that most (94.1%) young people in our culture enjoy life and are happy with themselves most of the time (Currie, Hurrelmann, Settertobulte, Smith, & Todd, 2000). Nevertheless, the dramatic bodily changes and changes in thoughts and feelings that characterize puberty present the adolescent with psychosocial challenges. The adolescent has to “grow into the new mind and body” and find the coherent sense of self that is necessary for functioning in society. During this developmental process, the adolescent asks the crucial question: Who am I?

The impact of pubertal timing differs between boys and girls. Early maturing boys are more popular and have a more positive self-concept than late maturing boys. (Steinberg & Sheffield Morris, 2001). At the same time, early maturing boys are at greater risk for delinquency and are more likely than their peers to engage in antisocial behavior, including drug and alcohol use, truancy, and precocious sexual activity (Williams & Dunlop, 1999). Research on the timing of puberty among girls and its impact on the self-concept indicate that early maturing girls have a more negative self-concept. Like early maturing boys, they are more popular and are more likely to become involved in delinquent activities (Flannery, Rowe, & Gulley, 1993). The increase in risky behavior is probably influenced by early mature friendships with older peers (Silbereisen, Petersen, Albrecht, & Kracke, 1989; Flannery, Rowe, & Gulley, 1993) and the adolescent’s own image of him- or herself as more mature than other adolescents of the same age (Magnusson & Stattin, 1999). Early maturing boys and girls have less time to form a solid sense of self and are exposed to body changes and a social context they are not yet ready for (Silbereisen et al., 1989)

Adolescents take their selves seriously. They wonder which is “the real me,” how they are different from their parents, and how they became who they find themselves to be, and worry about what they are becoming. They experience the contradictions of the socialization pressure to develop different selves in different roles or relationships, such as those with parents, close friends, partners, and classmates (Harter, Bresnick, Bouchev, & Whitesell, 1997). As the adolescent moves through adolescence, he or she is likely to be treated differently in different relational contexts. The multiple selves that may be manifest in different interpersonal contexts were historically described by William James (1890). He stated that “a man has as many social selves as there are

individuals who recognize him and carry an image of him in their mind” (p. 190). He noted that the different roles could be conflicting and could be felt as contradictory by adolescents and those around them. The different roles that the adolescent takes can result in feelings of being engaged in false behavior, that is, acting in ways that are not felt to reflect the true self. For example, such behavior may occur with friends in the struggle to determine the social role that best fits the self-concept. Some consistency in views is necessary to facilitate positive interactions with others and thus promote social behavioral adaptation (Harter, 1986). The adolescent must come to define the specific dimensions of the self-concept, academics, athletics, social relations, appearance, and moral conduct that he or she will assume. Gender differences in these specific areas of the self-concept have been found to be generally consistent with gender stereotypes and are relatively stable from preadolescence to early adulthood (Marsh, 1989). For example, boys score higher on physical ability and girls score higher on school self-concept than boys. Gender identity and awareness of one’s racial or ethnic group are other components of the self-concept to handle in adolescence. The difficult task of getting an answer to the question of “who am I” is not made easier by the fact that adolescents are often preoccupied with how they appear in the eyes of others and others’ opinions of them. Adolescents feel themselves to be the center of attention and assume that other people are as obsessed with their behavior and appearance as they themselves are.

Studies of continuity versus discontinuity in the development of the self-concept during the adolescence show that the self-concept grows linearly over time (Moneta, Schneider, & Csikszentmihalyi, 2001) and that the percentage of overlap in self-attributes generated for differential social context decreases during adolescence (Harter & Monsour, 1992).

The self-concept becomes more abstract, differentiated (Labouvie-Vief, Chiodo, Goguen, Diehl, & Orwoll, 1995), organized, and adaptive during adolescence. Their growing self-awareness and capacity for self-reflection allows adolescents to think of themselves in terms of psychological characteristics in a more nuanced way. For the adolescent in early adolescence, it is important to test the self-concept and social skills in the interpersonal context. The inability to fully integrate contradictory characteristics of the self-concept in this developmental period spares the young adolescent conflict over opposing attributes in the self-concept (Harter, 1986). The increased cognitive development in the middle of adolescence make it possible to detect but not resolve these contradictions between different self-attributes in different contexts. One can be both intelligent and dumb, both depressed and cheerful, but these

contradictions are not yet fully integrated in a total self-concept and instead the adolescent frequently vacillates from one extreme to the other. By late adolescence, construction of higher-order abstraction through advances in cognitive abilities has diminished the conflicts or distress over internal contradictory self-concepts and a more consonant view of oneself is formed. Labels like flexible can replace contradictions like both intelligent and dumb. The late adolescent self-concept is described in terms of an organized system of beliefs and values that include dimensions of personal choice and moral standards. Different relational contexts are found to require different attributes and it is finally settled that it would not be useful to have the same attributes across different contexts. Multiple self-representations now appear to be appropriate and desirable. Increased experience in making decisions also contributes to more adaptive self-concepts.

Where the self-concept is the mental image we have of ourselves, self-esteem is a measure of how positively or negatively we feel about these beliefs or image of our ability and value, in other words, “how much a person likes, accepts, and respects himself overall as a person” (Harter, 1990). Relationships with parents and peers and satisfaction with one’s body provide the foundations for self-esteem. When people are confused about their self-concept, or behave in ways that conflict with their view of themselves, this creates turmoil and leads to a decline in self-esteem (Campbell, Assanand, & Di Paula, 2003). Higgins, Shah, and Friedman (1997) found that if people’s current views of themselves do not match what they “ought” to be, they “felt bad” and their self-concept was inconsistent. Self-esteem varies with gender. In general, males have higher self-esteem than females during adolescence (Harper & Marshall, 1991).

Parental relationships at adolescence

Do adolescents have to disrupt their relationship with their parents or can they maintain positive and satisfying relationships with their parents while developing as individuals? Empirical research clearly shows that normal adolescents do not perceive any major problems between themselves and their parents. The vast majority of adolescents are likely to report admiration, love, and appreciation for their parents, and they often turn to them for advice (Steinberg, 1990). Nevertheless, adolescence is often a period of significant stress in the family because both the adolescents and their parents are often experiencing significant physiological and mental changes at the same time. Both generations may be inspecting their

primary attachment and questioning their values and goals (Erikson, 2000).

There are two distinct aspects to the relationship between parents and adolescents. The first involves parental relationships as independent variables that predict various developmental outcomes for adolescents such as adjustment, mental health, problem behavior, or self-concept development and how these aspects change during adolescence. The second involves parental relationships viewed as dependent variables that are predicted by the adolescent's development and factors such as his or her pubertal status or cognitive and psychological maturity. Studies of parenting and its effects on outcomes have identified three distinct dimensions of inquiry, namely harmony, autonomy, and conflict (Steinberg & Silk, 2002). Harmony describes dimensions such as acceptance, closeness, warmth, responsiveness, and communication, or the intimacy of the relationship between parents and adolescents. These dimensions have been found to be positively associated with adolescent well-being (Jackson, Bijstra, Oostra, & Bosma, 1998) and negatively associated with both internalizing (Field & Lang, 1995) and externalizing problem behaviors (Muris, Meesters, & van der Berg, 2003). Greenfield, Keller, Fuligni, & Maynard (2003) concluded that empirical research presents a contrasting view to the early theories and suggest that a complicated balance between autonomy and relatedness appears to be the most effective for adolescent adjustment. They also found cultural variations in the dimensions of the relationships between adolescent and parents across different societies, different ethnic groups within the same societies, and different socioeconomic conditions. This study and other recent studies (e.g. Koon, 1997) point to a transformation, a change in the relationship between adolescents and parents with continuing close relationships.

Study of adolescent socialization (Baumrind, 1991) showed that children whose parents were "authoritative," that is, warm and firm in their parenting demonstrated higher levels of competence and psychosocial maturity than children whose parents were permissive, authoritarian, or indifferent. Empirical studies have also shown strong relations between socialization agents and adolescent problems. For example, low levels of emotional warmth, high levels of rejection, parental overcontrol, and the absence of autonomy promotion were found to be predictive of high levels of psychopathological symptoms such as depression and anxiety disorder in youths (Muris, Meesters, & van den Berg, 2003; Silk, Morris, Kanaya, & Steinberg, 2003; Siqueland, Kendall, & Steinberg, 1996; Wenar & Kerig, 2000).

There is a need for a balance between connectedness, conformity, and independence in the relationship between parents and adolescents. One commonly used factor for describing the control aspect of the parent-adolescent relationship is autonomy. Autonomy describes dimensions that are directed at encouraging and providing boundaries for the youth and includes such things as psychological control, restrictiveness, monitoring, and supervision. The adolescent can experience emotional, behavioral, and cognitive autonomy in relation to parents. Emotional autonomy is a shifting away from dependency on the parents; behavioral autonomy is the ability to act completely on one's own; and cognitive autonomy is the ability to make decisions. All of these types of autonomy contribute to the adolescent's developing individuation from the parents. Over- or undercontrol in the relationship is associated with maladaptive behavior and psychological problems. Empirical evidence suggests that adolescents who are excessively constrained psychologically are more likely to develop internalizing problems whereas behaviorally overcontrolled youth are at greater risk for a drop in self-esteem (Robins, John, Caspi, Moffitt, & Stouthamer-Loeber, 1996). Raising an adolescent seems to demand finding a balance between permitting adolescents to explore and maintain their independence while still protecting them and setting limits.

Finally, conflict describes the common arguments between adolescents and their parents, typically rooted in "the different ways in which parents and their adolescents understand and define family rules, events, and regulations" (Steinberg, 1990, p. 270). Some conflicts seem unavoidable during adolescence (e.g. schoolwork, finances, chores, friends, dating, substance abuse, appearance, and curfews). The extent of adolescent-parent conflict may differ over the course of adolescence. It is relatively common for adolescents in early adolescence to define themselves as oppositional to their parents, questioning parental authority and social expectations. The parents are often focused on the demands posed by these behaviors and avoidance of escalation of conflicts. Mothers and daughters in particular may perceive this period as difficult. The relationship between adolescents and parents is often calmer later in adolescence. Evidence suggests that the impact of conflict on adolescent development is context-dependent. In other words, conflicts in a "harmonious" environment may be a functional or positive part of adolescent individuation, whereas excessive conflict in a controlling milieu will further contribute to negative developmental outcomes (Steinberg & Silk, 2002).

Studies of puberty and its impact on the adolescents' relationships with their parents indicate that the adolescents and their parents renegotiate the

relationship as a function of physical development. Conflicts between adolescents and parents, especially their mothers, increase, but the relationship become more egalitarian with pubertal maturation (Paikoff & Brooks-Gunn, 1991).

Problem behavior in adolescence

While most adolescents do not experience psychiatric disorders, adolescence represents a period of increased prevalence of a broad range of psychiatric and behavioral disturbances. The most significant change in psychiatric pattern during the adolescent years is the rise in the rate of depressive and depression-related disorders (Olsson & Knorrning, 1997), especially in girls (Petersen, Sarigiani, & Kennedy, 1991), with a peak in suicidal ideation (Vannatta, 1997). Substance use (BRÅ, 2003) and the prevalence of schizophrenic psychoses (Hellgren, 1994; Statens offentliga utredningar, 1998) also increase.

It is important to distinguish between sporadic experimentation and stable patterns of troublesome behavior. Adolescents often test the limits of appropriate conduct by crossing the boundaries set by caretakers or society. When a youth exhibits a particular problem behavior, it is important to consider not only whether the behavior has previously occurred, but also whether it has manifested in multiple situations and with what frequency, intensity, and provocation. Among adolescents, a certain degree of misbehavior or experimentation is common (e.g. doing something against the law and experimenting with alcohol – Statens Institutionsstyrelse, 2000; Currie et al.). New onset of oppositional behaviors in adolescence may be due to the normal process of individuation. On the other hand, adolescents who persistently and increasingly engage in problem behaviors with significant impairment in their development, social functioning, and academic achievement are of great concern to caretakers and to society. Also of concern is the broad category of "antisocial behaviors" that have a considerable harmful effect on others in terms of physical or mental harm or damage to property.

The fact that a problem behavior occurs during adolescence does not mean that it is limited to adolescence. It is equally likely that the problem developed earlier but came to expression during adolescence, or that it is a "life-course persistent" problem. Studies have shown that those problem behaviors that are associated with the adolescence, such as criminal behavior (Moffitt, 1993) and depression (Zahn-Waxler, Klimes-Dougan & Slattery, 2000), emerged before this period but appear as symptoms during these years. This finding reminds us that development during

adolescence cannot be understood without considering development prior to adolescence, and that it is correct to question some aspects of the “storm and stress” view of adolescence (Arnett, 1999).

Studies of the effects of gender and age show that girls generally have more problems than boys. Internalizing problems is more common among girls and externalizing problems concerning behavior is more common among boys. Adolescents aged 15 to 16 have more problems than younger and older adolescents. It seems that those years are the most troublesome during the adolescent period (Broberg et al., 2001).

Among the most frequently offered explanations for problem behaviors in adolescence are those that stress developmental aspects such as biological vulnerability, a negative self-concept, the prevalence and nature of stressful life events, and problems related to family and parent–adolescent relationships. There is no clear connection between psychological difficulties in adolescence and hormonal changes at puberty, but it is likely that the bodily changes of adolescence play a role in the development of depression (Kaltiala-Heino, Kosunen, & Rimpelä, 2003) and disordered eating among girls. Early maturing girls have more emotional problems and higher rates of depression, anxiety, and disordered eating (Ge, Conger & Elder, 1996), and more externalizing and internalizing problems than their average or late maturing peers (Stattin & Magnusson, 1990; 1996). It is well-established that the self-concept is related to positive adjustment and to the amount of internalizing and externalizing problem behavior. For example, a negative self-representation was found to be associated with aggression and assault (Moretti, Holland, & McKey, 2001), and to symptoms of depression and suicidal ideation (Orbach, Mikulincer, Stein, & Cohen, 1998). Adolescents’ daily lives as well as major life events were found to be related to positive well-being in a study by McCullough, Huebner, and Laughlin (2000). These authors suggest that adolescents should be taught coping skills aimed at dealing with the stresses of everyday experiences. In addition, stressful life events such as sexual abuse (Garnefski & Arends, 1998) and self-awareness associated with perceptions of events as being more stressful contribute to a higher degree of both internalizing and externalizing disorders (Steinhausen & Metzke, 2001). Several empirical studies emphasize that problem behaviors such as anxiety, depression, and delinquency are consequences of negative parenting including high control, rejection, intrusiveness, and overprotectiveness (e.g. Muris, Meesters, & van den Berg, 2003; Ruchkin, Kuposov, Eisemann, & Hägglöf, 2001; Zahn-Waxler et al., 2000).

Structural Analysis of Social Behavior (SASB) model

The studies reported in this thesis used the Structural Analysis of Social Behavior model to examine the adolescent self-concept and perceptions of the early behavior of parents, and the relationship between these two concepts. This model was selected because it permits study of both these concepts and includes the dimensions of affiliation and control that are highly in focus during the adolescent years. The model does have the disadvantage that it does not have a developmental perspective enabling study of such things as how adolescent cognitive and social development are related to the predictive principle of the model. There are also no findings regarding the use of this model in empirical study of normative adolescent development.

The Structural Analysis of Social Behavior (SASB) developed by Benjamin (1974, 1984, 1996a, 1996b) is a circumplex model that assesses interpersonal and intrapsychic behavior in three dimensions (see Figure 1). The first dimension is called the affiliation dimension and is represented by the horizontal axis in the model. The second dimension, represented by the vertical axis, is called the interdependence dimension. Affiliation is defined as affirmation, love, and protection. The endpoints on this axis are love and hate (attack). The endpoints on the vertical axis are control and emancipation. Interdependence is defined as perceived control. The third dimension is the attentional focus, which can be transitive (actions directed toward others), intransitive (reactions to others), or introjected (actions directed toward the self).

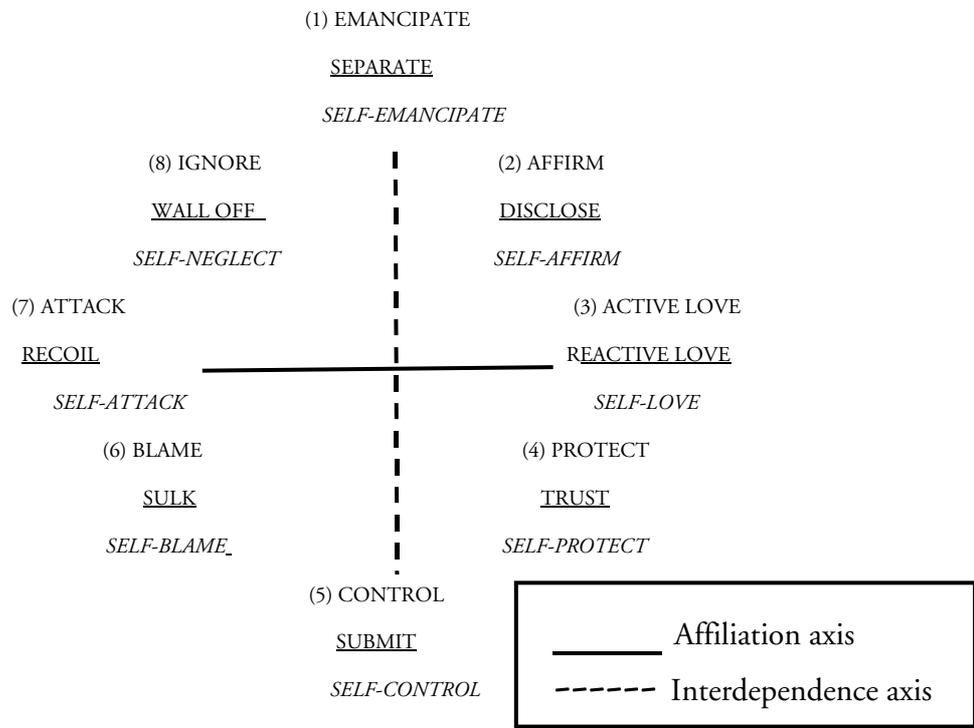


Figure 1. The Structural Analysis of Social Behavior: Eight cluster version. The focuses in each cluster are presented in the order TRANSITIVE (action toward other), INTRANSITIVE (reaction to other), and *INTROJECT* (self-concept).

The transitive and intransitive focuses in the SASB model define interpersonal variations and the introject focus involves the intrapsychic internalization of interpersonal experiences.

Associated with the SASB model are a number of important predictive principles such as opposition, antithesis, complementarity, and introjection (Benjamin, 1996b). These principles are supposed to govern the relation between the two interpersonal dimensions in the SASB model and the introjections of others' actions. In the model, opposite, or antithetical, styles of behavior are located directly across from one another on the same circumplex surface (e.g. the opposite of mother/father protect is mother/father ignore). The complement of the opposite is called its antithesis. Thus, for example if the response to an adolescent's blame is its antithesis (acceptance by the mother/father), rather than its complement, (criticism), it will promote a new behavior in the adolescent, namely self-

acceptance. Benjamin (1996a) concludes that adolescents usually occupy an antithetical position to parental control, and thus separate. Adolescents' reactions to parental actions are supposed to be governed by interpersonal complementarity (Kiesler, 1996), that is, parental actions are supposed to elicit adolescent reactions with the similar levels of affiliation and opposite levels of dominance. Introjection is similarly specified by correspondence between the parental actions and the introject; consequently, how the parents treat the child (e.g. with love) will be recapitulated in how the child treats or regards him- or herself and will result in self-love. The principle of complementarity has not been satisfactorily tested, especially in groups of adolescents. However, evidence of complementarity has been found in recent studies such as those by Sandler and Woody (2003) of partners' relationships and by Gurtman (2001) of mother-self relationships. Their findings are consistent with the theory (e.g., Benjamin, 1993b) and show a close convergence between transitive and intransitive and transitive and introject positions.

There are two approaches to assessment based on the SASB model, namely the SASB observational coding schema (Benjamin, Foster, Roberto, & Estroff, 1986) and self-report questionnaires. The coding schema allows for analysis of the content and process of communication (a spoken dialogue) whereas the questionnaires allow for ratings of any relationship. The latter feature was used in this thesis when assessing perceptions of early parental behaviors and how these perceptions are related to the self-concept.

Research using the SASB circumplex model in recent decades has linked interpersonal and intrapsychic processes in a variety of contexts, for example in the processes and effects of psychotherapy (Quintana & Meara, 1990), in psychopathology (Alpher, 1996; Armelius & Granberg, 2000; Benjamin, 1993b; Benjamin & Wonderlich, 1994; Wonderlich & Swift, 1990), and in sexual abuse (Alpher, 1996). The results have shown deviations in the self-concepts of groups of adult psychiatric patients, for example patient diagnosed with Kernberg's structural interview (Kernberg, 1981) as having a neurotic personality organization (NPO), a borderline personality organization (BPO) or a psychotic personality organization (PPO). The patients showed a more negative self-concept than a normal population. The differences were especially pronounced for NPO and BPO patients, who had more negative and fewer positive self-concepts (Armelius & Granberg, 2000). Lower levels of intrapsychic conflict were found in the dissociative patients.

The SASB has not been used extensively in research into the interpersonal context of adolescence. Such research as has been done has generally focused on different symptom groups in late adolescence, including externalizing behavior problems in different cultural contexts (Florsheim, Tolan, & Gorman-Smith, 1996), substance dependence (Humes & Humphrey, 1994; Ratti, Humphrey, & Lyons, 1996), and eating disorders like anorexia (Humphrey, 1989) and bulimia (Wonderlich, Klein, & Council, 1996). The results indicate that more complex communications were manifested in clinical than in normal families. In families with an anorexic daughter, the parents neglected her quest for autonomy; parents of bulimics showed more hostility and blame in their relationship to their daughters; and families with a drug-dependent daughter showed more hostility and conflict than were common in normal control families. Research that has focused on normal development in late adolescence (18-20) has found that the majority of the youth in this category have a positive and stable self-concept (Adamson & Lyxell, 1996). The findings indicate that self-love is developed before adolescence, but that self-control is still the subject of development and change during adolescence. The authors suggest that self-control may increase with age, which is also the finding in empirical studies of self-control in groups of adults (e.g. Armelius & Mårtensson, 1984).

Self-concept

The SASB self-concept, the introject, is conceptualized in behavioral terms and expressed as a cognitive perception of the individual's treatment of him- or herself: "a hypothesized personality structure ... which comprises a relatively stable conscious and unconscious repertoire of ways of treating the self" (Henry, Schacht, & Strupp, 1990). These authors conclude that the SASB self-concept "includes self-appraisals, verbal and motor behaviors directed at the self, and cultivation of various images of the self." The assumption is that these cognitive perceptions of behaviors constitute schemata of internalized perceptions of early mother and father behavior, as described in the two dyadic dimensions of the SASB model (Henry, 2001). Thus, positive behaviors from the mother and father (or important others) in childhood result in behavior toward the self that is primarily "within a balanced range of cluster two, three, and four". An abnormal self-concept constitutes behaviors toward the self that are located mainly in clusters six, seven, and eight.

Healthy self-loving behavior should be accompanied by healthy flexibility in interdependence. Self-emancipating behaviors are defined as “letting the self go” and self-control is defined as the opposite, “controlling the self” (Benjamin, 1987). Self-control implies doing things the right way with a desire to be “perfect”; letting go implies acting out one’s feelings without considering the consequences. The two behaviors are neither “good” nor “bad” but contextually dependent. They should vary in intensity depending on the context. What are considered unhealthy are extremes of these behaviors without flexibility in regard to the context. In our culture, development through adolescence encourages self-control. The social and cognitive development during these years makes adolescents more capable of solving problems and handling delayed gratification than they would have been at a younger age.

Early mother and father behavior

Attachment theory has been incorporated into the SASB model. According to Florsheim, Henry and Benjamin (1996), the two fundamental and normative developmental processes, attachment seeking (in SASB terms “positive enmeshment”) and exploration (in SASB terms “friendly differentiation”) (Bowlby, 1982), are described by a balance of behaviors in the clusters to the right of the SASB circle. These clusters, namely two, three and four, are together referred to as the attachment group (AG) of clusters. The clusters to the left, namely six, seven and eight, describe behavior that is characterized by criticizing, rejecting, and ignorance and represent negative attachment. These clusters are together labeled as the disruptive attachment group (DAG) of clusters (Benjamin, 1993a; Florsheim, Henry, & Benjamin, 1996). These authors see the SASB model as useful in describing the components of various attachment systems in terms of specific interpersonal and intrapsychic coordinates across interpersonal contexts. For example, the secure attachment type could be describe by the basic modes of experience of others in terms of protect (cluster 2), love (cluster 3), and affirm (cluster 4). The anxious/ambivalent attachment types experience of others’ behavior could be described in terms of protect (cluster 4) and ignore (cluster 8).

The positive early parental attachment behavior of the mother and father should be characterized by acceptance, love, and protection. Benjamin (1994) asserted that “a good parent is able to provide a blend of emotional warmth and availability, acceptance and individuation, and structure, protection and nurturance teaching.” Adolescents whose relationships with their attachment figures are characterized by these

parental behaviors should internalize positive working models of self and others and exhibit healthy development. Adolescents who perceive rejecting, blaming, and neglecting parental behaviors should exhibit interpersonal problems and a negative self-concept.

The relation between the self-concept and early mother and father behavior

Many theorists such as Klein, Fairbairn, Winnicott, Jacobson, Kernberg and Kohut have described the internalization process. All agree that the developing child's relationships with attachment objects are incorporated into a self and become the building blocks of the self-system. This blueprint of a self-structure is formed early in life on the basis of the relationships with significant others, and parts of significant others around us. Once formed, the blueprint can be modified, but our basic tendency will be to seek out others who reaffirm these early self-object relationships.

In the introduction to the special section on Structural Analysis of Social Behavior, Benjamin (1996b) sketches out similar beliefs regarding "the connection between social experiences," for example "experience with important attachment objects," and the self-concept as manifested through one or more of three internalization or copy processes. These copy processes are identification – being like him or her; recapitulation – acting as though he or she is still around and in charge; and introjection – treating yourself as others did. Benjamin suggests that these different forms of internalization are universal (Benjamin, 1996b).

Reliability and validity of the SASB model

Use of a circumplex model to describe intra- and interpersonal traits rests on two fundamental assumptions. The first is that traits vary along a circular continuum and that traits closer together on the continuum are more similar than those further apart. The second is that traits can be expressed in terms of two basic dimensions. Regardless of their conceptual focus, all circumplex models must meet three geometric demands: the differences among variables must be reducible to differences in two dimensions; all variables must have equal projections (constant radii); and discretely measured variables must be uniformly distributed along the circle's circumference (equal spacing) (Gurtman, 1994).

Pincus, Gurtman, and Ruiz (1998) evaluated the structural validity of the SASB and its two-dimensional factorial structure. They found that the SASB model did not meet the criteria for a circumplex structure.

Rather, the structure was elliptical. However, the criterion of reducibility was met as regards the two dimensions of affiliation and interdependence. Clusters 2, 3, and 4 and clusters 6, 7, and 8 fell close together and marked the horizontal axis, as suggested by Benjamin when making the connection between the SASB model and attachment theory. Gurtman (2001) found that cases were concentrated near the positive affiliation pole, which predicted positive base-rate effects.

Pincus, Gurtman, and Ruiz (1998) also evaluated the introject dimensions of interpersonality and found that these dimensions were not internalized equivalents of the dyadic dimensions. Instead they found that the introject represented a model of self-esteem and agency on the affiliation axis and ego-control on the autonomy axis. According to the authors, “self-love reflects low emotional distress, high dominance, and high extraversion; that is, those who accept themselves can more confidently engage and adapt in the social world and take charge of things when it is required. Introject autonomy reflects aspects of conscientiousness - that is, the ability to modulate self-control, contrasting constraints and delay with free expression of the self.” Despite the failure to connect the introject dimensions with the two other dyadic dimensions, the authors found the introject dimensions useful in describing the links between the self-concept and important early relationships.

A factor analysis of the Swedish translation of the SASB shows consistency with the model (Armeliu s & Öhman, 1990; Armeliu s, 2001). However, clusters 2 and 6 did not fit the model completely and should thus be interpreted with some reservation. Cluster 2 was too close to cluster 3 in the love-hate dimension but not in the control dimension and cluster 6 was too close to cluster 7 in both dimensions, which means that cluster 6 contains too much hate and too little control.

SUBJECTS AND METHODS

Adolescents

The same groups of participants were used in all the studies presented in this thesis. In studies I, II, and III, the adolescents with antisocial problems were drawn from a group being studied in a research project that started in 1998 in Umeå with the aim of surveying the psychic health and social context of adolescents with psychological and antisocial problems (Armeliu s & Hägglöf, 1998). A group of adolescents aged 13 and over who were being detained under the Swedish Care of Young Persons Act

(LVU) in four different special youth homes were followed in a longitudinal study over four years. These adolescents were assessed using questionnaires and interviews at the beginning and end of the research period, and with ongoing interviews each year. The data obtained from these adolescents was compared to that obtained from approximately 350 adolescents in Umeå who had no reported psychological or antisocial problems. This group constitutes the normal adolescent group in this thesis (studies I–V).

The table below summarizes the characteristics of the participants in the group of normal adolescents in all studies (I–V) and the group of antisocial adolescents in studies II and III. Three girls were added to the group of adolescents with antisocial problems between study I and studies II and III.

Table 1
Characteristics of the normal and antisocial adolescent groups

	Normal group N = 277	Antisocial group N = 30
Adolescents		
<i>Mean age in years (range)</i>	14.9 (12–18)	15.1 (13–19)
Boys	14.8 (12–18)	14.0 (13–15)
Girls	14.9 (12–18)	16.1 (13–19)
<i>Gender</i>		
No. of boys	131	8
No. of girls	146	22
<i>Living arrangement (%) (live/recently lived with)</i>		
Both parents	76	15
Single parent	21	30
Single/other custodian	3	55
Parents		
<i>Work status (%)</i>		
Employed	96	64
Unemployed	2	29
Students	2	7

The incidence of psychological problems in the normal adolescent group was measured with the Youth Self-Report checklist (YSR) and in the

group of adolescent with antisocial problems with the Diagnostic Interview for Children and Adolescents (DICA-R). The results in the normal adolescent group were found to be in the same range as and equivalent to results from other studies of normal Swedish adolescents (Broberg et al., 2001). The incidence of psychological problems in the antisocial adolescent group was considerably higher than in the normal Swedish population of adolescents. Common diagnoses for this group were conduct disorder (88%), major depression (58%), phobia (58%), and anxiety (25%), all defined as in the DSM III-R. The incidence of alcohol and drug addiction was 33% and 29%, respectively.

The group of adolescent from the four youth homes was labeled 'adolescents with antisocial problems' (DSM III-R). The majority of these adolescents displayed more than one type of antisocial behavior related to other psychiatric symptoms such as conduct problems, antisocial personality disorder, or problems with impulse control. While not all adolescents in the group of antisocial adolescents had these externalizing problems, the criterion of at least a single behavior classified as antisocial could be met for all of those in the antisocial group.

The time spent in custody in the special youth homes for the adolescents in the group of antisocial adolescents ranged from 1 to 172 months, with a mean of 38 months. Twenty-three percent of the antisocial adolescents were of non-Swedish origin.

Design

The subjects in the normal and the antisocial adolescent groups were assessed on one occasion at the start of the research project in 1998. School classes were selected in different socioeconomic areas on the basis of the willingness of the teachers to make time for research assistants to inform the students about the project and their willingness to participate in the administration of the questionnaires. The youth centers were selected on the basis of two criteria: whether they treated adolescents with psychiatric and social problems and whether they were willing to be part of the research project, which also involved the staff at the centers. Adolescents whom the staff judged in too severe psychological condition for participation were excluded from the research project. The excluded group included adolescents with psychoses and severe mental retardation. Signed permission from both a parent and the adolescent were required for the adolescents' participation.

The normal adolescents completed a battery of self-report questionnaires, usually at home. The antisocial adolescents completed the same

questionnaires at the youth centers. Filling them out required competence in Swedish as no translations were made into other languages. Some of the adolescents completed a computer-based variant of the questionnaires, with assistance from the project staff. A cinema ticket was given as a gratuity.

Instruments

Assessment of self-concept

The variables of the self-concept in studies I-V were measured with the Swedish Long Form Version (Armeliuss, Lindelöf, & Mårtensson, 1983) of the Structural Analysis of Social Behavior (SASB) Intrex Introject Questionnaire based on the SASB model (Benjamin, 1974). Participants were instructed to rate how well each statement described their perception of their own behavior toward themselves (e.g., I like myself very much and welcome and enjoy opportunities to be by myself; I accuse and blame myself, make myself feel bad, guilty, ashamed, unworthy). Appendix 1 shows the questions posed.

Introject questionnaire items are rated on a scale from “do not agree” (scale point 0) to “perfect agreement” (scale point 100). The variable self-positive, AG, constitutes the mean value for the clusters in the attachment group of clusters (2, 3 and 4). The variable self-negative, DAG, is the mean value for the clusters in the disruptive group of clusters (6, 7 and 8). Self-control and self-autonomy are the mean values on clusters 5 and 1, respectively. An empirical review led Pincus, Gurtman, and Ruiz (1998) to suggest that the clusters of the affiliation dimension could be regarded as subgroups of the AG and DAG groups of clusters, and that together with the control/autonomy dimension they constitute a good representation of the SASB circumplex model.

Pincus, Newes, Dickinson, and Ruiz (1998) also reviewed the empirical evidence for the SASB model and suggested a new way of aggregating the SASB data. They recommended that data should be analyzed by means of two vectors, AFF(iliation) and AUT(onomy), expressing the two dimensions of the model (affiliation and control). The vectors may be thought of as the highest level of aggregation and the equations for these vectors are:

$$AFF = 0 * cluster\ 1 + 4.5 * cluster\ 2 + 7.8 * cluster\ 3 + 4.5 * cluster\ 4 + 0 * cluster\ 5 - 4.5 * cluster\ 6 - 7.8 * cluster\ 7 - 4.5 * cluster\ 8$$

$$\text{AUT} = 7.8 * \text{cluster 1} + 4.5 * \text{cluster 2} + 0 * \text{cluster 3} - 4.5 * \text{cluster 4} - 7.8 * \text{cluster 5} - 4.5 * \text{cluster 6} + 0 * \text{cluster 7} + 4.5 * \text{cluster 8}$$

As can be seen in the formula, the eight clusters have positive or negative weights depending on their distance from the intersection of the axes. The weights are set at 4.5 and 7.8 or -4.5 and -7.8 for the two steps in each direction. According to Pincus, Gurtman, and Ruiz (1998), the advantage of the vectors is that they “represent dimensional ratings of relational quality” rather than “a categorical assignment of social relation quality” (which a coefficient would do). Vectors are thus useful for clinicians and researchers. Other advantages of vectors, according to these authors, are that they are more normally distributed than other SASB indexes, show orthogonality, are easy to compute, and that the results can be interpreted below cut-off values and can be presented graphically (Figure 2).

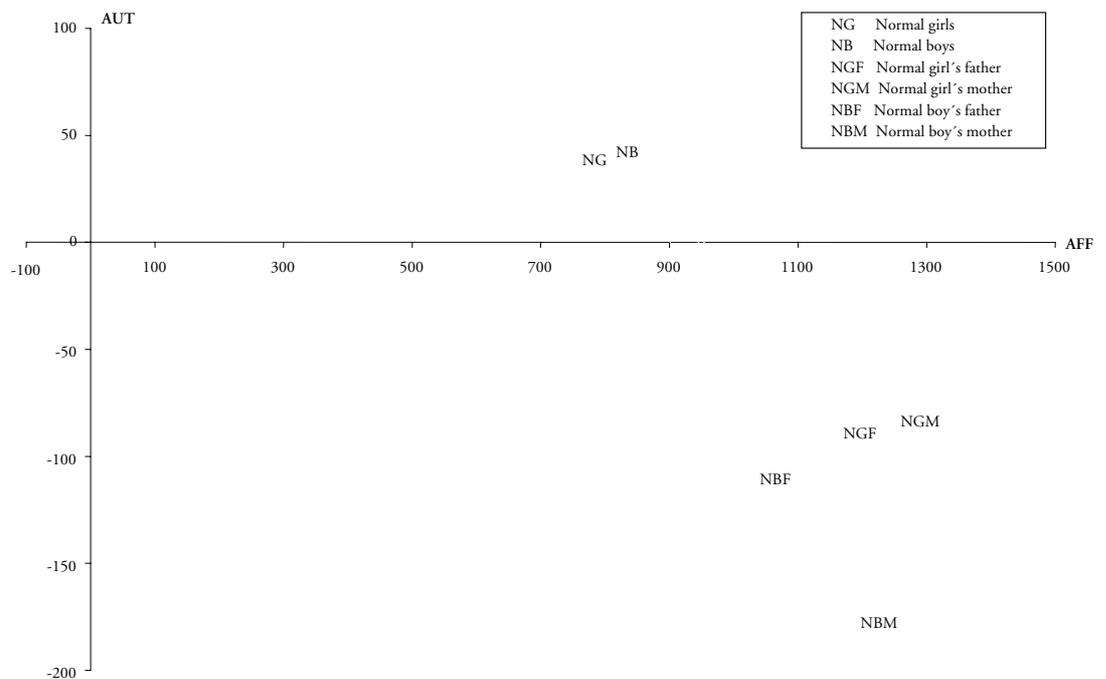


Figure 2. Example of the graphical representation of the mean vector scores for a normal adolescent group. Note the different scales for the axis.

Norms for the Swedish version of the SASB are based on representative samples of high school and college students, adults in various occupational settings, and groups of patient from the Swedish Treatment Homes

Project (Armeliu, 2002) in Umeå (mean age between 26.9 and 31.4 years of age). No differences were found between genders on the eight different clusters (Armeliu, 2001). No norms are available for groups of normal Swedish adolescents in the age group 12 to 18. Norms for the pattern coefficients for the American version are based on 128 college students, 80 female and 48 male. The average age was approximately 20 years (Benjamin, 1987).

The psychometric properties of the SASB model based on the rating scales appear to be good according to a series of reliability and validity studies completed by Benjamin (e.g. Benjamin, 1974, 1984, 1987). Test-retest reliability is $r = 0.87$ for both the American version (Benjamin, 1987) and the Swedish version (Armeliu, 2001) of the SASB for adults. The internal consistency of the Swedish (and the American long forms) version has been computed as $r > .90$. As regards construct validity, factor analysis shows that the Swedish translation is consistent with the model (Armeliu & Öhman, 1990; Armeliu, 2001). In the present study, satisfactory internal consistency was obtained for the self-positive and self-negative variables. The split-half (correction with Spearman-Brown) for the self-positive was $r = .75$ and for the self-negative it was $r = .83$.

Assessment of perception of early mother and father behavior

Two different instruments that have been fruitfully applied to assess perception of early parental behavior were used in the studies II, III, and IV in this thesis.

First, the Swedish translation of the SASB short-form questionnaires "My father when I was aged 5–10" and "My mother when I was aged 5–10" (16 statements) were used to rate adolescents' perceptions of how their mother and father related to them (Benjamin, 1987). Only the items referring to parental actions and not those relating to reactions were included in the studies. Answers were given on scales, ranging from 0 (do not agree) to 100 (perfect agreement). The adolescents were asked to rate how well each statement described their perception of their parent's behavior toward them when they were young (e.g., he/she taught, protected, and took care of me with much kindness; he/she put me down, blamed me, punished me). Appendix 2 shows the questions posed. The mother and father variables were derived/grouped in the same way as the self-concept factors. The reliability of the Swedish short version of the SASB was found to be high, with the split-half for the positive and negative clusters being .89 and .85 respectively. The calculations were

done in different research projects involving 624 staff members. The split-half (correction with Spearman-Brown) in the studies reported in this thesis were $r = .80$ and $r = .82$ respectively for mother acted positively and father acted positively, and $r = .74$ for mother and father acted negatively.

The second instrument used for rating memories of parental rearing behavior was the short version (23 statements) of the EMBU self-report questionnaire. The EMBU, developed in Sweden (Perris C, Jacobsson, Lindström, von Knorring, & Perris H, 1980), enables assessment of perception of parenting for father and mother separately. The subscales cover such rearing practices as overinvolvement, warmth, overprotectiveness, guilt engendering, and rejection. A transcultural study found the three factors of rejection, emotional warmth, and overprotection were general across nations (Arrindell, Perris, Eisemann et al., 1994).

Assessment of problem behavior

The Swedish translation of the, Diagnostic Interview for Children and Adolescents (DICA-R), was used to determine the incidence of problem behavior in the antisocial adolescent group. DICA-R is a structured interview according to DSM-III-R, the Diagnostic and Statistical Manual of Mental Disorders (American Psychiatric Association, 1987). It has been widely used in studies of the general population and special subgroups and showed good reliability and validity in diagnosing DSM-III-R disorders (Reich, 2000).

The Youth Self-Report (YSR) provides self-ratings for 20 competence and 112 problem items for the ages 6-18 (Achenbach, 1991). Youths rate themselves for how true each item is now or was within the past six months, using a three-point Likert scale. The subtests are Competence Scales, Somatic Complaints, Anxious/Depressed, Social Problems, Thought Problems, Attention Problems, Delinquent Rule-Breaking Behaviors, Aggressive Behaviors, Internalizing, Externalizing, and Total Problems. The test has been evaluated on 1.057 American children aged 11 to 18 and the validity has been found acceptable. Test-retest reliability is 0.47 to 0.79 and internal consistency is 0.71 to 0.95. In a recent Swedish study, the internal consistency for the narrow-band syndromes was between .51 and .70 (Broberg et al., 2001).

Analysis

Structural modeling

Structural equation modeling (SEM) makes use of statistical techniques such as path analysis. Path analysis is an extension of the regression model and is used to test how a particular set of independent variables influence a particular dependent variable. The model is usually depicted as a path diagram in which single arrows indicate influence. A regression is done for each variable in the model to determine its dependence on other variables that the model indicates are causes. The regression weights predicted by the model are compared with the observed correlation matrix for the variables and goodness-of-fit statistics are calculated. Goodness-of-fit tests (e.g. chi-square, GFI, AGFI and RMSEA) determine whether the model being tested should be accepted or rejected (Kline, 1998). The path models in studies IV and V were specified and analyzed with the SPSS package AMOS (Analysis of Moment Structures) (Arbuckle & Wothke, 1999).

AIMS IN THIS INVESTIGATION

This thesis deals with the period of adolescence and specifically with internalized perceptions of parents' early behavior and how these perceptions affect the self-concept and social functioning during this period. The research area is dominated by the view that adolescence is a period in the lifecycle in which problematic behavior, dysfunction and maladaptation are more prominent than the growth of competencies (Steinberg & Sheffield Morris, 2001). The studies presented in this thesis are an attempt to contribute to general theories and to research on the normative development of boys and girls in the different ages of adolescence.

The following questions were addressed in separate studies:

- Are there age or gender differences in the development of the self-concept during normal adolescence? (Study I, III)

- Are there age or gender differences in the perception of early parental behavior during normal adolescence? (Study II, III)
- Is it possible to generate general and stable models of the self-concept, perceptions of early parental behavior, and the relation between self-concept and mother and father concepts across genders and ages during normal adolescence? (Study IV)
- How do the self-concept and the perception of early parental behavior of a group of adolescent with antisocial problems compare to those of normal adolescents? (Study I, II, III)
- Does the self-concept influence the perception of early parental behavior in adolescence, or does parental behavior influence the self-concept, or are the influences bidirectional, with both self-concept and perceptions of parents' early behavior influencing each other simultaneously? (Study IV)
- Is it possible to generate a model for the relation between the self-concept and internalizing and externalizing problems during normal adolescence, and how does this model fit for boys and girls of different ages? (Study V)

SUMMARIES OF THE STUDIES

Participants and method

The sample in all the studies presented here consisted of the two groups of adolescents described in the Subjects and Methods section of this thesis. Three adolescent girls were added to the group of adolescents with antisocial problems in study II. The subjects were assessed on one occasion and the design was therefore the same for all the studies. Consequently the following summaries are limited to a presentation of each study's purpose, results, and conclusions.

Study I

Östgård-Ybrandt, H. & Armelius, B.-Å. (2003). Self-concept in adolescence: A study of age and gender differences in groups of normal and antisocial adolescents. Umeå Psychology Reports, No 3. Department of Psychology, Umeå University, Umeå, Sweden.

Purpose

Study I examined age and gender differences in the self-concept in a group of normal adolescent boys and girls between 12 and 18 years of age. A group of antisocial adolescents of similar age was included in the study to explore possible deviations from the pattern found in the normal adolescent group.

Results

The normal adolescent group expressed a positive self-concept (78%) with a balance between control and autonomy. The normal adolescents showed self-acceptance, love, and care with a low degree of hostility and blame in their perception of themselves. They perceived that they had sufficient self-discipline and freedom to develop their own nature. Only 1% showed a clearly negative self-concept. By contrast, only 41% of the antisocial adolescents showed a positive self-concept and a larger proportion, 11%, showed a negative self-concept. The self-concept in the group of antisocial adolescents was also more autonomous than in the normal adolescent group. The results show no age or gender differences in the normal adolescent group. An interaction effect was shown between group and gender, with the girls in the antisocial group showing more self-hate than antisocial boys and normal adolescent boys and girls. The self-concept of the antisocial boys was as self-positive as that of normal boys and girls.

Conclusions

The findings show that the self-concept is positive and seems to be stable over time during adolescence, with no one period characterized by more turmoil or recapitulation. The absence of gender differences and interaction effects between age and gender is in line with the common theoretical assumption in interpersonal theories that the self-concept is internalized in the early years before adolescence, regardless of gender. The lack of causative direction in the study means that the different self-concept patterns in the group of adolescents with antisocial problems can be explained in two different ways. The negative self-concepts in this group may reflect patterns of early treatment by important others or may be an expression of negative reinforcement or psychological distress in the adolescents' actual context. The results from the comparison of normal and antisocial adolescent groups do not allow for general conclusions, but

should be considered as interesting results that call for further empirical study.

Study II

Östgård-Ybrandt, H. & Armelius, B.-Å. (2003). Perception of early mother and father behavior in adolescence: A study of age and gender differences in groups of normal and antisocial adolescents. Umeå Psychology Reports: No 4. Department of Psychology, Umeå University, Umeå Sweden.

Purpose

The objective of Study II was to investigate age and gender differences and possible connection between age and gender in normal adolescents' perception of early parental behavior. A relatively homogenous, positive perception of early mother and father behavior was expected. The perceptions of early parental behavior of boys and girls between 12 and 18 years of age were compared with the perceptions of early parental behavior in a group of antisocial adolescents of a similar age to detect deviations from the pattern found in the normal adolescent group.

Results

The two instruments used, the SASB and EMBU, yielded similar results and were found to be measuring the same underlying dimensions of early parental behavior, except for control behavior. The perceptions of early parental behavior were found to be very positive for normal adolescents. The early mother behavior was found to be more positive than the early father behavior in all ages and in both genders. The EMBU results show that adolescents with less positive perceptions of their parents' early behavior found the parents more intrusive and demanding of obedience. The adolescents with antisocial problems had memories of less positive and more negative early parental behavior than adolescents in the normal group. Antisocial girls in particular had negative inner parental percepts, mainly in regard to early mother behavior. The results for the group of antisocial adolescents should be seen as tentative and require confirmation with a larger sample. No age or gender differences were found in the perceptions of mothers' and fathers' early upbringing behavior.

Conclusions

Normal adolescence seems to be a developmental period in which the perception of parents is not subject to tumultuous changes in specific age periods. Adolescents preserve a positive internalized working model of their parents. A general pattern of more negative inner percepts of parents' early behavior is probably a deviation from normal development in adolescence. The results are in line with attachment theory and a social pattern in which mothers are more concerned with childrearing issues than fathers. The findings indicate that antisocial adolescents may have a history of maltreatment or that their negative perception of their parents' childrearing could be influenced by their actual psychological distress and a negative self-concept. A number of studies have found that adolescents with antisocial behavior perceive early parental behavior more negatively than normal adolescents (Ruchkin, Eisemann, & Hägglöf, 1998). Interestingly, the present study shows that perceptions of the early behavior of the parents are generally characterized by positive attachment in both adolescent groups. No general pattern of disruptive attachment emerged.

Study III

Östgård-Ybrandt, H. & Armelius, B.-Å. (2003). Self-concept and perception of early mother and father behavior in normal and antisocial adolescents. *Scandinavian Journal of Psychology*. In press.

Purpose

Study III was based on Studies I and II and extends them with an exploration of the relation between the self-concept and perceived early parental behavior without addressing causative directions. The first aim of this study was to see whether there was a relationship between self-love and perceptions of positive early parental behavior. The second aim was to see how closely the results for the self and perceptions of parental upbringing were linked in the different groups of adolescents. Two types of questions were addressed in the study of the distance between self-concept and perception of mothers' and fathers' early behavior, the first concerning the distance within a group of adolescents, and the second concerning differences between the adolescent groups.

Results

The results for the self-concept are the same as those in study I and those for the perceptions of parents are the same as in study II. The results in this study show that the self-concept was related to perceptions of early mother and father behavior. Adolescents with a positive self-concept had more positive perceptions of parental upbringing.

Conclusions

The relation found between a positive self-concept and positive perceptions of early mother and father behavior is consistent with the theoretical assumptions of the SASB model, in which internalized behaviors are seen as prototypes for an adolescent's behavior toward him- or herself. This study could not answer the question of causal direction between the self-concept and the perception of early parental behavior. The results can therefore be interpreted in two ways. One possibility is that early behavior causes the self-concept, but it is also possible that the self-concept functions as a filter and influences perceptions of the early parental behavior. The causality may also be bidirectional, with the self-concept and the perceptions of parents continuously influencing each other.

Study IV

Östgård-Ybrandt, H. & Armelius, B.-Å. (2003). The relation between self-concept and concepts of early parental behavior for adolescents. Manuscript submitted for publication.

Purpose

Study IV examined the causal relation between the self-concept and perceptions of early parental behavior in a group of normal adolescents. Six different models were generated and tested to explore the causal relations of the self-concept, mother and father concepts, and combined mother and father concepts. Two models of the relation between the self-concept and perceptions of parents were compared: in one the self-concept was influenced by early parental behavior ($MF \rightarrow S$), in the other parental behavior was influenced by the self-concept ($S \rightarrow MF$). The

robustness of the model with the best fit was tested for different adolescent groups categorized by gender and age.

Results

The results show that the self-concept both influences and is influenced by parental percepts during adolescence. The internal dependencies among various aspects of the self-concept were strongly dependent on self-love as the most important influence for the whole self-concept. The adolescent's conception of both parents influences self-love, with the mother affiliation and father control behaviors being the strongest factors. Father behavior shows stronger influences on the self-negative than mother behavior. Thus, understanding, loving, and caring mother behavior together with father control behavior are internalized as trust, openness, and self-love. Parental criticism, aggression, and neglect, and especially such father behavior, are internalized as dislike and repudiation in the self-concept. The early control behavior of the father is also important for the development of self-autonomy and indirectly for adolescent self-control, while the early behavior of the mother is limited to influencing mainly the affiliation dimension of the self-concept. The central aspect of parental influence relates to affiliation. Parental control behavior has an indirect effect on adolescent self-concept and self-control behavior. The model of the relationship between the self-concept and perceived early parental behavior was not affected by age and gender and seems therefore to be stable and general. These findings regarding adolescents' inner residue of their parents' early behavior are in line with Bowlby's assumptions of an internalized working model of early relationships that functions throughout life.

Conclusions

The relation between the self-concept and the inner concepts of early parental behavior is bidirectional. The model for how the inner parental concepts influence the self-concept can be regarded as stable and general throughout adolescence. Attempts to promote a positive self-concept in socialization should be based more on affiliation than on parental control.

Study V

Östgård-Ybrandt, H. (2003). The relation between self-concept and social functioning in adolescence. Manuscript submitted for publication.

Purpose

Study V investigated internalizing (I) and externalizing (E) problem behavior in relation to a model of the self-concept (S) with the self-concept influencing problem behavior (S→IE). The purpose was to test the (S→IE) model in different age and gender groups in normal adolescence.

Results

The S → IE model showed that a positive self-concept strongly influences internalizing problem behavior and weakly influences externalizing problem behavior; that the control aspect were as important as the affiliation aspects for externalizing problems but not for internalizing problems; and that the strength of these relations was dependent on age and gender. Girls had a stronger relationship between being self-positive and internalizing problems than boys. Externalizing problems was more strongly predicted by self-autonomy and self-control for boys than for girls. The influence of a negative self-concept on externalizing problems was strongest in mid-adolescence. The internalizing problems strongly influence the externalizing problems.

Conclusions

A positive self-concept was the most important factor for adjustment and for protection against common problem behaviors. Self-control was less important in regard to the development of youth maladaptive behavior. A negative self-concept together with gender (female) were risk factors for internalized problems. The promoting of a positive self-concept in the adolescents' various psychosocial contexts is thus shown to be important for adolescents' psychological health.

GENERAL DISCUSSION

The studies presented in this thesis explored the association between intrapsychic percepts of self and others, interpersonal features of these percepts, and their association with interpersonal factors such as problem behavior that are crucial for social functioning in adolescence. The understanding of the context of the adolescent's inner world included theoretical, interpersonal, and sociocultural factors.

The theoretical context of the adolescent's self-concept and perceptions of early parental behavior

The psychoanalytic assumption that adolescence is characterized by turbulence that is manifested in instability in the view of the self and discarding of the parents was not supported by the studies in this thesis. On the contrary, the percepts of self and others seem to be stable and are gradually updated, without specific critical periods of more negativity at certain ages in adolescence, and the inner percepts of parents are characterized by positive support of the process of development. Thus, the absence of storm and stress during these years should not be seen as representing pathological development.

The ongoing developmental process with behavior changes during the important years between child and adulthood does not seem to focus on the inner concept of the self and important others. Consequently the turbulence associated with these behavior changes does not seem to be an expression of adolescent conflicts regarding these concepts. It seems more likely that the storm and stress that is expressed in everyday conflicts with parents, mood disruptions, and risk-taking behavior during adolescence has other explanations, relating to such things as interpersonal problems defined by the social and cultural context.

The self-concept of the normal adolescent was positive, and adolescents in general seem to like and take care of themselves. A negative self-concept should be seen as a deviation from normal development and not accepted as standard during this developmental period. It is interesting to note that both girls and boys have a similarly positive self-concept. Other studies have, however, found that girls have a more negative self-concept than boys. It seems likely that this finding is related to issues that are more contextually dependent (e.g. self-esteem and identity roles), which can fluctuate during the years of the adolescence.

Adolescent's perceptions of their parents were found to be positive in both genders throughout adolescence. It seems that adolescents can stay close to their parents and appreciate warmth and protection from them while continuing to separate positively. Negative perceptions of early parental behavior should be regarded as deviant in normal development. The relation between the self and the mother and father percepts is best described as one of mutual influence. The assumptions in object relation theory regarding parental influence and the determination of the child's self do not seem to represent the full picture.

The results obtained in the studies reported here are more in line with the assumptions made in attachment theory (Bowlby, 1988) and interpersonal theory (e.g. Sullivan, 1953).

According to interpersonal theory, are inner percepts of the self and others (studies II, III, IV), and of the self and social functioning associated (Study V), and perceptions of self and others are mutually influencing each other (study IV).

According to attachment theory, percepts of positive important others constitute positive working models (studies II, III, IV) that are developed before adolescence (studies I, II and III). The mother is the most important attachment object (studies II and III), regardless of gender (studies II and III). Positive attachment is more important than control for a positive internal working model study IV. Negative attachment is associated with a negative self-concept (study III).

Interestingly, the results found in the group of antisocial adolescents did correspond to the psychoanalytic assumptions. This group showed evidence of discarding their parents in their percepts regarding autonomy and neglect by their parents (studies II and III). They also manifested instability of the self, with more autonomy and self-hate and less self-control and self-love (study I). However, even this group of adolescents did not manifest extreme negative percepts of the self and of parents, suggesting that the psychoanalytic version of separation from parents is undesirable or unbearable for a normal adolescent.

The interpersonal context of the adolescent's self-concept and perceptions of early parental behavior

The results show that an understanding of the adolescent's self-concept must include the adolescent's interpersonal context. The self-concept of adolescents was influenced by their parents' early behavior and their perceptions of their parents, and in turn influenced interpersonal actions directed toward others. A negative self-concept was sometimes expressed

in such problem behaviors as teasing, disobedience, and aggression. It can be assumed that the responses from others such as peers and parents to these problem behaviors confirmed and reinforced the self-concept in a negative way. One can also assume that these problem behaviors emerged out of the adolescent's understanding of interpersonal relating based on an internal model of interpersonal relationships (Sullivan, 1953).

Some interesting findings were made as regards gender differences in relation to the interpersonal context. First, the affiliation aspect of the self-concept was important for both boys and girls, but it influenced internalizing problems in different ways. The self-positive aspect was more important for girls, while the self-negative was more important for boys. Second, perceptions of the father seem more important for the self-negative aspects of the self-concept, while perceptions of the mother had a stronger influence on self-positive aspects of the self-concept. One conclusion that can be drawn from these two findings is that the concept of the mother, and primarily of her attachment behavior, is of central importance for girls as regards the development of internalizing problems. Chodorow (1978) speaks of "femininity defined through attachment" and says that girls are "fusing the experience of attachment with the process of identity formation." Thus, an inner percept of negative attachment to the mother is likely to make the process of developing an identity and social functioning in adolescence more difficult for girls. This conclusion is supported by study II, where more negative attachment behavior was found in the perceptions of the mother in the group of girls with antisocial problems. A second conclusion that can be drawn is that boys are more vulnerable to the father's negative attachment behavior manifested in criticism, aggression, and neglect. For boys, these behaviors from the identification object, the father, seem to be harmful for the self-concept and seem to elicit internalizing problem behavior and indirectly also externalizing problems. It is important to note that the boys show as close a relationship to the mother attachment as do the girls. This finding undermines Chodorow's (1978) assumption that boys define themselves as masculine and separate their mother from themselves, thus curtailing "their primary love."

For boys but not for girls, impulsivity and lack of self-control affected the prevalence of externalizing problems such as aggression and criminality. It seems that father control behavior, that is, a father who will "take charge of things and tell the adolescent boy what to do and to do it in the right way" is especially important in protecting against these problem behaviors. A connection was found between patterns of father-given autonomy and problem behaviors in the group of boys with

antisocial problems. These boys perceived that the father had let them do “whatever they liked” without expressing concern about their behavior. The behaviors of the antisocial boys’ parents also represented extremes on the interdependent dimension. The mother was seen as strongly controlling and the father as strongly supportive of autonomy. Such a pattern of inflexible extremes is unhealthy according to Benjamin (1987).

Gender was also shown to have an additional importance in the group of adolescents with antisocial problems. The girls in this group showed more negative perceptions of both the self and others than normal adolescents and boys in the same group. These more negative internal working models of interpersonal relationships may well be one of the explanations for these girls more negative expectations in interpersonal relationships and for why interpersonal relationships often lead to more self-negativity and more problem behaviors for these girls.

The sociocultural context of the adolescent’s self-concept and perceptions of early parental behavior

The interpersonal relations between parents and adolescents are socially, culturally and historical dependent. The shape of this relationship varies through Western history (Robertson, 1974) and between and within cultures (Greenfield et al., 2003). There have been different focuses in socialization and different conceptions of a child’s competencies. In the studies presented in this thesis, childrearing practices are seen as distinct from the internalized concepts of early parenting. No information was obtained about actual parental practice, and thus comments on these practices must be speculative.

The findings presented in this thesis suggest that over the past decade socialization in Sweden seems to have been characterized by affiliation with the mother. Normal Swedish adolescents have positive self-concepts, consider themselves valuable, are able to take care of themselves, and have positive inner percepts of their parents. Obviously, parents must be doing well.

However there are some youths who are exposed to various kind of interpersonal stress, including family problems such as aggression, alcohol and substance use, and sexual and physical abuse. Adolescents in this group manifest a more negative self-concept and internalized interpersonal relations. The unstable pattern of their lives probably does not provide sufficient positive guidance for these adolescent in social life. Their attempts to rebuild their self-concepts in difficult daily circumstances maintain the negative pattern. How can this negative spiral in the

adolescent's life be broken? One suggestion that derives from the findings of this thesis (study IV) is that the focus in both the socialization and care of adolescents in youth homes must be more on affiliation than on control. Affiliation with parents or important others promotes a positive self-concept, which is important for self-control and for reducing problem behavior in adolescence.

Limitations

Some specific limitations of the present studies must be mentioned. First and foremost, the analyses relied exclusively on the adolescents' retrospective reports regarding the self-concept and parenting behaviors. Self-report data is always liable to distortion, either as a result of the effects of medication or brain damage, the intelligence of the one reporting, or for motives such as self-protection and self-enhancement (Gramzow, Elliot, Asher, & McGregor, 2003). Research has, for example, shown that the self-reported self-concept is quite positive for avoidant attached adolescents. As young children, they describe themselves as "perfect", in contrast to secure adolescents who generally describe themselves in positive terms but admit to being less than perfect (Harter, 1986). "Avoidants appear to idealize the self as well as the parents. These findings have been interpreted as revealing defensively high self-esteem, in an attempt to consciously or unconsciously mask feelings of unworthiness."

Additional information about early parenting and the adolescents' self-concept could have been obtained using reports by parents and observational measures. However, these measures are also biased (Benjamin, 1987; Boyce, Frank, Jensen, Kessler, Nelson, & Steinberg, 1998) and there is always unique information about the adolescent that is not available to outside observers. However, the ways in which adolescents themselves reconstruct their own pasts and present their view of themselves are important for understanding the adolescent intrapsychic state.

A further shortcoming of the current investigation is that all data in the normal adolescent group were collected from students attending schools, thus eliminating adolescents who had dropped out of school or who were unable to attend school. Data on late adolescence was collected at a community college, and thus also omitted the small proportion of adolescents who do not complete school. These omissions may have affected the findings, and therefore the results from this investigation need to be interpreted with this shortcoming in mind.

Another weakness of the studies reported here is the small size of the group of antisocial adolescents, especially boys, and the skewed age and gender distribution in this group. The antisocial adolescents studied had an extremely high prevalence of psychiatric and social problems and may not be representative of the group of antisocial adolescents in general or of those with only a single type of antisocial behavior (as defined in DSM III–R). Some of the adolescents in the antisocial adolescent group were probably on medication for psychological problems, but the type of medicine is not known and thus the effect of medication on self-reports has not been considered. The results for the antisocial adolescent group are thus tentative and need further exploration with a larger sample and in other groups of adolescents with antisocial behavior.

The path models specified in studies IV and V are not the only possible models for describing the data. Other unexamined models may fit the data as well or better. An accepted model is only a non-disconfirmed model, and good fit does not mean each particular part of the model fits well (Kline, 1998; Spirtes, Richardson, Meek, Scheines, & Glymour, 1998). Moreover, models modified through the testing of alternative models may not be stable as they have been created on the basis of a unique initial dataset. An attempt was made to overcome this problem in studies IV and V by using a cross-validation strategy. Such a strategy requires that the model be developed using a calibration data sample and then confirmed using an independent validation sample. Although the models presented here fit the data well, we cannot rule out the possibility that other models might have been acceptable. However, our models can serve as starting points in future studies.

Concluding remarks

This thesis attempts to contribute to general theories and to research on the normative development of boys and girls in the different ages of the adolescence. It attempts to shed light on the internalized perceptions of parent's early behavior and how these perceptions affect the self-concept and social functioning during adolescence. Some aspects of the results suggest the need for a re-evaluation of the way these constructs are conceptualized, operationalized, and assessed in adolescence. In particular, there is a need to moderate views on adolescents' self-concept, their perception of early parental behavior, and the gender differences central to social functioning in adolescence. Other aspects of the results highlight the importance of promoting a positive self-concept during socialization and in the care of adolescents in youth homes in order to reduce problem

behavior. The results also raise many new questions about such things as how social functioning affects the self-concept and what additional factors should be taken into account to explain the variance in the self-concept and the perceptions of the parents. These questions can only be answered by future research on normal development in adolescence.

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APPENDIX 1

Table 1

The Structural Analysis of Social Behavior measures. The declarative sentences for the eight clusters of the self-concept (introject) translated from the Swedish version

1. Autonomous self

- Item 4 I just let important choices, thoughts, issues, options slip by me without paying much attention.
- Item 26 I am happy-go-lucky, content with “here today, gone tomorrow.”
- Item 28 I drift with the moment, have no particular internal direction or standards.
- Item 30 In a free and easy way, I let myself do what comes naturally, and everything goes well enough to suit me.
- Item 32 I feel free to let my real nature develop as it likes.

2. Accepting self

- Item 5 Knowing both my faults and my strong points, I comfortably let myself be as I am.
- Item 6 I let myself feel glad about and pleased with myself just as I am.
- Item 21 I understand and accept myself and let my inner self govern.
- Item 31 I feel good about myself. I’m relaxed, solid, completely okay “as is.”

3. Loving self

- Item 9 I love myself, take care of myself and feel good about myself – I even feel sexy.
- Item 10 I naturally and easily nurture and take care of myself as needed.
- Item 13 I like myself very much and welcome opportunities to be by myself.
- Item 18 I gently and warmly “pat myself on the back” just because I feel very good about the way I am.
- Item 34 I am always open to and “up for” situations which will be very pleasant and good for me.

4. Teaching self

- Item 2 I examine or analyze myself sensibly, carefully, realistically.
- Item 8 I practice and work to develop valuable skills and manners.
- Item 27 I reliably protect myself, look after my own interests.

Item 29 I put a lot of energy into anticipating and finding everything I need for myself.

5. Controlling self

Item 14 I am very careful to restrain myself, to hold back.

Item 15 I control and guide myself according to the objectives I have set for myself.

Item 19 I keep an eye on myself to be sure I'm doing what I should be doing.

Item 20 I try very hard to make myself as ideal as I can.

Item 23 I put a lot of energy into making sure I conform to standards, am proper.

6. Criticizing self

Item 7 I accuse myself – make myself feel bad, guilty, shameful, and unworthy

Item 24 I vengefully punish myself – I take it out on myself.

Item 25 I make myself do and be things which I know are not right for me. I fool myself.

Item 35 I am very unsure of myself because I tell myself I do things all wrong. I feel others can do better.

7. Rejecting self

Item 11 I harshly reject or dismiss myself.

Item 16 I torture, kill, annihilate myself just because I'm basically so bad.

Item 17 I drain, overburden, and deplete myself greatly.

Item 22 I let my own sickness and injury go unattended even when it means harming myself greatly.

Item 36 I look upon myself negatively and destructively – I really am my own worst enemy.

8. Neglecting self

Item 1 I don't care for myself and I am not striving to develop my own possibilities.

Item 3 I'm daydreaming and living in my fantasy instead of doing what would be good for me.

Item 12 I let unwarranted ideas I have about myself go unchallenged – I don't bother to know myself.

Item 33 I am reckless and carelessly end up in self-destructive situations.

APPENDIX 2

Table 2

The Structural Analysis of Social Behavior measures. The declarative sentences for the cluster of perceptions of early parental behavior, translated from the Swedish version. The same set of questions was rated by respondents for both mother and father behavior

1. **Mother/father gave autonomy**
Item 14 Without much worry, she/he left me free to do and be whatever I wanted.
2. **Mother/father accepted me**
Item 1 She/he liked me and tried to understand me even if we disagreed.
3. **Mother/father loved me**
Item 6 She/he gently and lovingly approached me and invited me to be as close as I liked.
4. **Mother/father protected me**
Item 13 With much kindness, she/he taught, protected, and took care of me.
5. **Mother/father controlled me**
Item 9 To keep things in good order, she/he took charge of everything and told me exactly what I should do and how I should do it.
6. **Mother/father criticized me**
Item 3 She/he told me that I did things totally wrong and deserved to be punished.
7. **Mother/father rejected me**
Item 12 Without a thought about what might happen, she/he aggressively attacked me in the worst possible way.
8. **Mother/father ignored me**
Item 4 Without giving it a thought, she/he neglected and abandoned me.