Clarifying the Relationship Between Parenthood and Depression*

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Journal of Health and Social Behavior 2005, Vol 46 (December): 341–358

Unlike other major adult social roles in the United States, parenthood does not appear to confer a mental health advantage for individuals. However, while research has examined parental status differences in emotional well-being, relatively little is known about variations in emotional distress among parents. In this article, we clarify the relationship between parenthood and current symptoms of depression using data from the National Survey of Families and Households. The analyses provide support for our first hypothesis: Parenthood is not associated with enhanced mental health since there is no type of parent who reports less depression than nonparents. We also find support for our second hypothesis: Certain types of parenthood are associated with more depression than others. Additionally, although we find marital status differences in symptoms among parents, there are no gender differences in the association between parenthood and depression. We discuss the implications of our findings for ongoing theoretical debates about the advantages of social role involvement for mental health as well as the meaning of contemporary parenthood in the United States.

Unlike other major adult social roles in the United States, parenthood does not appear to confer a mental health advantage for individuals. Although there is inconsistency in findings across studies, most research either finds that parents do not significantly differ in emotional well-being from nonparents or that parents report significantly more emotional distress than persons who have never had children. These findings have led mental health and family scholars to conclude that persons do not derive the same emotional benefits from parenthood as they do from marriage and employment. However, because research has mainly compared childless persons to either all persons who have ever had children or parents at particular stages of the life course (i.e., "active" and "empty-nest" parents), little is known about the mental health of different types of parents relative to nonparents.[1] More importantly, previous research provides limited insight into variation in emotional distress *among* parents. This is an important and timely topic since increases in

* We thank Sarah Beth Estes, Jennifer Glass, Allan Horwitz, Kristen Marcussen, David Mechanic, Brian Powell, Peggy Thoits, Michael Hughes, and the anonymous *JHSB* reviewers for their excellent suggestions. We are also grateful to Larry Bumpass and James Sweet of the Center for Demography and Ecology at the University of Wisconsin–Madison for making the National Survey of Families and Households (NSFH) available. The NSFH was funded by grant HD21009 from the Center for Population Research of the National Institute of Child Health and Human Development. An earlier version of this article was presented at the 2004 meetings of the Society for the Study of Social Problems in San Francisco, and a part of this article was presented at the 2004 meetings of the Southern Sociological Society in Atlanta. Address correspondence to Ranae Evenson, Department of Sociology, Vanderbilt University, Box 1811-B, Nashville, TN 37235 (email: ranae.j.evenson@vanderbilt.edu).

nonmarital childbearing and cohabitation as well as divorce and remarriage over the second half of the twentieth century have resulted in an increase in certain types of parents—such as single parents, noncustodial parents, stepparents, and cohabiting parents—who are likely to be at higher risk than others for developing depression. In this article, we overcome some of the limitations of prior research and attempt to clarify the relationship between parenthood and current symptoms of depression using data from a nationally representative sample of adults. For reasons that we elaborate upon later, we hypothesize that most types of parents report more depression than nonparents. We also hypothesize that certain types of parenthood are associated with more depression than others.

BACKGROUND

Parental Status Differences in Mental Health

Social status differences in mental health have been the topic of a large body of research. Prompted in large part by women's increased labor force participation during the second half of the twentieth century, much of this research has focused on marital and employment status differences in psychological well-being. It is now well documented that marriage and employment are associated with enhanced mental health for men and women since married and employed persons consistently report significantly fewer symptoms of emotional distress than their nonmarried and nonemployed counterparts (e.g., Mirowsky and Ross 2003; Simon 2002; Thoits 1983).

Compared to research on marital and employment status differences in emotional well-being, there has been far less research on the relationship between parenthood and mental health, and the research that does exist has been far less conclusive. While some studies report a positive relationship between parenthood and emotional well-being (Aneshensel, Frerichs, and Clark 1981; Burton 1998; Kandel, Davies, and Raveis 1985), others find a negative relationship (Campbell, Converse, and Rogers 1976; Glenn and McLanahan 1981; Gove and Geerken 1977; Hughes 1989; McLanahan and Adams 1985; Radloff 1975). Still others indicate that there is no relationship between parenthood and mental health (Andrews and Withey 1976; Cleary and Mechanic 1983; McLanahan and Adams 1985; Ross, Mirowsky, and Goldsteen 1990; Umberson and Gove 1989).

These inconsistencies in findings across studies are attributable, at least in part, to inconsistencies in the parent groups to which nonparents are compared (McLanahan and Adams 1987, 1989). For example, when nonparents are compared to all persons who have ever had children, parenthood is not associated with psychological well-being (Aneshensel et al. 1981). However, when childless persons are compared to parents residing with minor children, parenthood is negatively associated with mental health (McLanahan and Adams 1987; Umberson and Gove 1989). Moreover, when childless adults are compared to emptynest parents, parenthood is positively associated with emotional well-being (Ross and Mirowsky 1988; Umberson and Gove 1989). On the basis of these latter two findings, some scholars have speculated that the mental health benefits of parenthood are limited to the stage in the life course when children are grown and independent (Kandel et al. 1985; Umberson and Gove 1989). Overall, despite some inconsistencies in findings across studies, these observations have led mental health and family scholars to conclude that individuals do not derive as much emotional benefit from parenthood as they do from marriage and employment (Gore and Mangione 1983; McLanahan and Adams 1987; Mirowsky and Ross 2003). That is, unlike other major adult social roles in the United States, parenthood does not appear to confer a mental health advantage for individuals.

Interestingly, both micro- and macro-sociological explanations have been offered to account for why parenthood is not associated with enhanced mental health. Drawing on theories about the psychological consequences of social role involvement, social-psychologically oriented mental health researchers have argued that the emotional benefits associated with parenthood are cancelled out, or exceeded, by the emotional costs associated with the role. According to this argument, parenthood (like other social roles) provides individuals with personal gratification as well as a sense of purpose and meaning in life, both of which promote emotional well-being (Menaghan 1989; Sieber 1974; Thoits 1983). However, the emotional rewards derived from parenthood are often overshadowed by the numerous demands and stressors associated with the role, particularly when chil-

dren are young, demands which ultimately undermine mental health (Umberson and Gove 1989).

Focusing instead on the broader social and policy context in which contemporary parenthood takes place, macro-oriented family scholars and family demographers have argued that there has been a decline over the second half of the twentieth century in the cultural significance of parenthood in the United States, a change that has lessened the social value and esteem formerly attached to the role for both women and men (Blake 1979; Huber 1980; Preston 1984, 1986). According to this line of reasoning, a consequence of our cultural indifference to parenthood is that we currently lack institutional supports that would help ease the social and economic burdens and subsequent stressfulness and emotional disadvantages associated with the parental role, especially when children are dependent (also see Hewlett and West 1998; Hewlett, Rankin, and West 2002).

However, while these complimentary theoretical arguments are persuasive, research on parental status differences in mental health has focused on *all* persons who have ever had children and parents at *particular stages in the life course*; we therefore know little about the mental health of certain types of parents—such as noncustodial parents—relative to nonparents. Moreover, because parents residing with minor children may include persons living with biological and/or adopted children as well as those living with stepchildren, we know little about the relative mental health of these two different types of parents. Similarly, because emptynest parents may include persons who have their own nonresidential adult children as well as those who have nonresidential adult stepchildren, we also know little about the mental health of these different types of emptynest parents compared to childless persons. Nevertheless, on the basis of the research findings and theoretical arguments discussed above, it is likely that most types of parents—especially parents of minor children—report more emotional distress than childless persons.

Variations in Mental Health among Parents

Because most research on the relationship between parenthood and mental health has examined parental status differences in emotional well-being, we also have little information about variations in emotional distress *among* parents. Almost all of the research on this topic has focused on marital status differences in mental health among parents residing with minor children. Not surprisingly, studies show that unmarried persons living with dependent children (i.e., "single" parents) report more mental health problems than their married peers (Andrews and Withey 1976; Kandel et al. 1985; McLanahan 1983). Single parents' greater distress appears to be due in large part to the fewer social and economic resources available to them (Brown and Harris 1978; McLanahan and Adams 1987; Pearlin and Johnson 1977). However, while this research is informative, it provides limited insight into distress differences between married relative to single and cohabiting persons residing with young children. This research also offers limited insight into marital status differences in distress among other types of parents, particularly those not residing with children. Although it is likely that most types of unmarried parents report more distress than their married counterparts, most studies have not investigated the mental health of married compared to *both* single and cohabiting parents.

There has also been some research on gender differences in mental health among parents residing with young children. While most of these studies find that mothers with dependent children at home report more distress than similar fathers (Aneshensel et al. 1981; Bird and Rogers 1998; Campbell et al. 1976; Glenn and McLanahan 1981), some show that under certain conditions (i.e., unemployment) married fathers living with minor children report more distress than similar mothers (Menaghan 1989; Thoits 1983). Interestingly, Hughes (1989) finds that single parenthood has particularly negative consequences for the mental health of formerly married men relative to formerly married women. In a more recent study, Simon (1998) shows that both married and unmarried mothers of minor children report more depression than their male counterparts, irrespective of their children's custodial status. However, similar to the studies of marital status differences in distress discussed above, these studies have not investigated gender differences in mental health among parents not residing with minor children, including noncustodial and emptynest parents, as well as gender differences among stepparents.

The lack of research on gender differences in

mental health among different types of parents is surprising since an assumption underlying theory and research is that the association between parenthood and distress is greater for mothers than for fathers due to women's greater responsibility for the care of dependent children (see Simon 1992, 1998). Indeed, scholars have noted that the experience of motherhood is qualitatively different from the experience of fatherhood across various family structures and throughout the life course due to prevailing ideological beliefs about the relative importance of parenthood for women and men and structured gender inequality in the family and workplace (Chodorow 1978; Ross and Huber 1985; Simon 1995; Thompson and Walker 1989). In fact, some qualitative research suggests that the emotional benefits associated with emptynest parenthood may be greater for women than for men, since they are relieved of onerous parental role obligations (Rubin 1979). Nevertheless, given the female excess of depression in the United States (Kessler et al. 1993), it is likely that most types of mothers report more depression than most types of fathers. In light of contemporary custody arrangements in the United States—in which mothers are more likely than fathers to have custody of their minor children in the event of nonmarital childbearing, cohabitation, divorce and remarriage—it is also likely that certain types of parenthood (such as single and cohabiting parenthood) are more common among women, whereas other types of parenthood (such as noncustodial parenthood and stepparenthood with minor stepchildren in the household) are more common among men.

In addition to the paucity of research on gender and marital status differences in mental health among parents, there is virtually no research that has systematically assessed differences in distress between different types of parents irrespective of gender and marital status. There is some evidence that parents residing with minor children are more distressed than emptynest parents (Aneshensel et al. 1981; Umberson and Gove 1989). However, although another assumption underlying work in this area is that parents with dependent children in the household are the most distressed type of parent, it is possible that noncustodial parents are more distressed than parents residing with their own minor children. It is also possible that persons residing with minor stepchildren (and possibly those who have nonresidential adult stepchildren) report more distress than persons living with their own minor children.

Elaborating on sociological theories about the emotional consequences of role involvement discussed earlier, it is reasonable to expect that certain types of parenthood are associated with more depression than others. In fact, we believe that variation in mental health among parents reflects a myriad of factors affecting individuals' experiences as parents, including the demands and normative expectations associated with the role, the quality of their relationships with children, their perceptions of their ability to satisfy role expectations, their self-evaluations as parents, the social and economic resources available to them, the stressfulness of the role, and the emotional gratification and sense of purpose and meaning they derive from parenthood.

For example, the lack of daily contact with one's minor children contradicts the normative expectations of parenthood with dependent offspring, and may negatively affect individuals' relationships with their children as well as their perceptions of their ability to fulfill parental role expectations. Therefore, it is likely that noncustodial parenthood is perceived as stressful and that noncustodial parents report more depression than parents residing with their own dependent children. Similarly, given the absence of cultural norms for stepparents and resentment stepparents and stepchildren of all ages may feel toward one another (Cherlin 1978; Cherlin and Furstenberg 1994), it is likely that stepparenthood is perceived as stressful and that stepparents report more depression than parents living with their own minor children. On the other hand, since most of the demands associated with parenting dependent children dissipate as children mature and develop independent lives, it is likely that parenthood involving one's own nonresidential adult children is perceived as less stressful and that these parents report less depression than persons residing with young biological and/or adopted children. In other words, we argue that variation in emotional distress among parents reflects variation in their experiences: Some types of parenthood are associated with more emotional distress than others.

Our argument regarding differences in emotional distress between different types of parents is consistent with recent emphases on the importance of social context for understanding the relationship between role involvement and

mental health more generally. As we have conceptualized parenthood here, variation in the experiences of different types of parents reflects variation in the family context in which parenthood takes place. Parenting in some family contexts is likely to be associated with more emotional distress than in others.

Although our theoretical framework assumes that social causation underlies the relationship between parenthood and mental health, we believe that social selection operates, particularly for certain types of parents. It is possible, if not likely, that individuals select themselves into and out of certain types of parenthood on the basis of their mental health status. For example, although stepparenthood may be stressful and depressing, persons who become stepparents may enjoy better mental health and have more coping resources and social support to begin with. Similarly, while noncustodial parenthood is likely to be stressful and distressing, depressed persons may be more likely to become noncustodial parents for the sake of themselves and their children.

Clarifying the Relationship between Parenthood and Depression

In our article, we address some of the limitations of earlier research and attempt to clarify the relationship between parenthood and current symptoms of depression using data from a nationally representative sample of adults. The following three hypotheses guide our research. First, we hypothesize that unlike other major adult social roles (i.e., marriage and employment), *parenthood is not associated with enhanced emotional well-being.* With the exception of emptynest parents, we expect that most types of parents report more depression than nonparents. However, we also hypothesize that there is considerable *variation in depression among parents* and expect that certain types of parents (e.g., noncustodial and stepparents) report more depression than others (e.g., parents living with their own minor children). We further hypothesize that there are both *gender and marital status differences in the association between parenthood and depression.* Given the female excess of depression in the United States, we expect (1) that most types of mothers report more depression than most types of fathers; and (2) that the association between most types of parenthood—especially those involving minor children—and depression is greater for women than for men. Moreover, because research finds that marriage is associated with enhanced mental health for men and women, we further expect that most types of *unmarried* (including single and cohabiting) parents report more depression than their married peers.

In their study of trends in the effects of children on adults' psychological well-being between 1957 and 1976, McLanahan and Adams (1989) showed that different types of parenthood are associated with different levels of distress. Although we focus on different "types" of parents than they did, our study builds on their work and contributes to research on this topic by examining variations in depression among parents with more recent national data. Overall, in addition to clarifying the relationship between parenthood and depression in the United States today, our article attempts to take stock of the meaning of contemporary parenthood and contributes to ongoing theoretical debates about the advantages of social role involvement for individuals' mental health.

METHODS

Data

We conducted our analyses on data from the first wave of the National Survey of Families and Households (NSFH), which was based on a national probability sample of 13,017 adults in the United States. Interviews were administered in 1987–1988 with 9,643 individuals age 19 and older, and an additional 3,374 persons from an oversampling of blacks and Hispanics, cohabiting and recently married persons, and both single and stepparents. The survey's response rate was 74 percent (see Sweet, Bumpass, and Call 1988 for details). Due to oversampling, the sample includes high proportions of single parents, cohabiting parents, and stepparents. The NSFH is ideal for this study because it contains detailed information about the ages and types of children residing in the respondent's household as well as the ages and types of children living elsewhere.

Measures

Depression. Depression is assessed with 12

items from the Center for Epidemiological Studies Depression CES-D Scale—a measure of depressed mood that has high construct validity and internal consistency (Radloff 1977). Respondents were asked how many days in the past week: "you were bothered by things that usually don't bother you," "you felt lonely," "you felt you could not shake off the blues, even with the help of your family or friends," "your sleep was restless," "you felt depressed," "you felt that everything you did was an effort," "you felt fearful," "you had trouble keeping your mind on what you were doing," "you talked less than usual," "you did not feel like eating, your appetite was poor," "you felt sad," and "you could not get going?" Item responses (0 to 7 days) were summed; scores on these measures range from 0 to 81 (chronbach's alpha = .93).

In this article, we investigate differences in current levels of depression between childless persons and all parents as well as different types of parents. We also examine variation in symptoms among parents. We therefore created two sets of dummy variables for parental status.

Parental status. Because previous research has examined depression differences between nonparents and all parents, we computed: "*childless adults*" (coded 1), which indicates respondents who have neither given birth to, fathered, adopted, nor had stepchildren; and "*all parents*" (coded 1), which indicates respondents who have either given birth to, fathered, adopted, or had stepchildren. Moreover, because research has investigated depression differences between childless adults and parents at different stages of the life course, we created additional variables: *"fullnest parents"* (coded 1), which indicates persons who *only* have coresidential biological and/or adopted children under the age of 18; and "*emptynest parents"* (coded 1), which indicates persons who *only* have nonresidential biological and/or adopted children 18 years old and over. These four parental status variables are mutually exclusive; respondents who are assigned to these parent status categories are only these types of persons.

Additionally, to assess differences in depression between nonparents and different types of parents (i.e., persons who have different ages and types of children residing in the household and elsewhere) as well as variations in depression among parents, we created six other dummy measures: "*parents with minor children at home*" (coded 1), which indicates persons who have a biological and/or adopted child under 18 in the household; "*parents with minor stepchildren at home*" (coded 1), which indicates people who have a stepchild less than 18 in the household; "*noncustodial parents*" (coded 1), which refers to individuals who have a biological and/or adopted child under 18 with whom they are not living; "*parents with adult children at home*" (coded 1), which indicates persons who have a biological and/or adopted child 18 years or older in the household; "*parents with nonresidential adult children*" (coded 1), which refers to persons who have a nonresidential biological and/or adopted child 18 or older; and "*parents with nonresidential adult stepchildren*" (coded 1), which refers to persons who have a nonresidential stepchild 18 years or older. These six parental status variables are not mutually exclusive; respondents who are assigned to each of these parent categories may be more than one type of parent. Throughout the article, we use the term "children" to refer to biological and/or adopted children.

Note that all of our measures that include parents with minor children and minor stepchildren at home are somewhat different from those used in some other studies. Our measures are more inclusive and contain parents who have children under 18 years in the household, whereas some other studies focus on parents residing with children under the age of 6. Differences between our results for parents with minor children at home and those reported in other studies may, therefore, reflect differences in measures.

Sociodemographic and status characteristics. In order to hold constant factors that may influence the relationship between parenthood and depression, we include the following sociodemographic and status variables in all of our analyses: respondents' gender (female = 1), race (black = 1; persons from racial backgrounds other than black or white = 1), age (in years), education (in years completed), household income (in dollars), marital status (single = 1; cohabiting = 1), and employment status (employed full-time = 1). We also include a term for age-squared to control for nonlinearity in the associations between age and depression (see Mirowsky and Ross 1989). Additionally, we assigned a predicted value for household income to respondents who had missing data on this variable, an imputation that was based on their values for gender, race, age, education, marital status, and employment status. A series of interaction terms was created in order to investi-

gate gender differences in the associations between different types of parenthood and symptoms. We also conducted interactional analyses for all of the sociodemographic variables with all of the parental status variables in order to explore whether the associations between different types of parenthood and depression differ by age, race, education, and household income. Although they do not appear in our tables, we report significant interactions in the discussion of our results.

Analysis Sample

The analysis sample comprises of respondents whose parental status is unambiguous and who have complete data on all variables in our models. In the section that follows, we present the results of two main sets of analyses. The first set examines differences in current levels of depression between nonparents and all parents as well as different types of parents (N = 11,473). The second set of analyses investigates variation in symptoms among parents (N = 8,520). For the sake of clarity, we discuss the specific plan for each analysis before the presentation of the tables.

Because the purpose of this article is to clarify the relationship between parenthood and depression at a single point in time, we conduct cross-sectional analyses. Our analyses, therefore, do not allow us to assess whether certain types of parenthood (e.g., noncustodial parenthood) have a greater effect on depression than others or whether depressed parents are more likely than their non-depressed counterparts to become certain types of parents (e.g., noncustodial parents). However, while we cannot determine the causal ordering of this relationship, our analyses document the *associations* between depression and different types of parenthood. Although social causation and selection processes probably underlie this relationship, tests of causation and selection hypotheses await longitudinal research.[2]

Sociodemographic Characteristics of Childless Adults, All Parents, and Different Types of Parents

Table 1 presents the sociodemographic and status characteristics of nonparents, all parents, and different types of parents. Mean levels of depression for each parental status subgroup are shown as well. Several patterns are evident in this table. First, while this national sample includes a large proportion of parents (74 percent), one-fourth of the respondents are childless. There are several differences between parents and nonparents; parents are older and have less education, but they have higher household incomes than childless persons. Parents are also more likely than nonparents to be female and married and are less likely to be employed full-time. Interestingly, there is no significant difference in the mean level of depression between all parents and nonparents.[3]

Second, while the sample includes several types of parents, the majority (67 percent) are at either the stage in the life course when they are residing with their own minor children or the emptynest stage of parenthood, both of which have been the focus of much prior research on parenthood and mental health. Forty-three percent of the parents are fullnest parents, and another 24 percent are emptynest parents. Not surprisingly, there are sociodemographic and status differences between persons at these different stages of the life course; fullnest parents are younger, have more education and household income, and are more likely to be employed full-time than emptynest parents. Once again, there is no significant difference in the mean level of depression between childless adults and either fullnest or emptynest parents.

There are, however, gender differences across different types of parents. Reflecting contemporary living arrangements in the United States—in which women are more likely to have custody of dependent children upon divorce and remarriage and are more likely to reside with out-of-wedlock offspring—68 percent of parents with minor children at home are female, whereas 77 percent of parents with minor stepchildren at home and 71 percent of noncustodial parents are male. Interestingly, a greater percentage of parents with adult children at home, nonresidential adult children, and nonresidential adult stepchildren are female as well.[4] Mirroring the female excess of depression in the United States, additional analyses (available upon request) indicate that women report significantly higher symptom levels than men among nonparents and all types of parents.

TABLE 1. Selected Sociodemographic Characteristics by Parental Status (N = 11,473)

	Childless Adults[a] (N = 2,953)	All Parents[a] (N = 8,520)	Fullnest Parents[a] (N = 3,703)	Emptynest Parents[a] N = 2,060)	Parents with Minor Children at Home[b] (N = 4,859)	Parents with Minor Stepchildren at Home[b] (N = 389)	Noncustodial Parents[b] (N = 812)	Parents with Adult Children at Home[b] (N = 838)	Parents with Nonresidential Adult Children[b] (N = 3,467)	Parents with Nonresidential Adult Stepchildren[b] (N = 669)
Gender (%)										
Male	50.5	37.7	30.2	36.7	32.5	76.6	71.2	33.4	37.6	38.3
Female	49.5	62.3	69.8	63.3	67.5	23.4	28.8	66.6	62.4	61.7
Age	36.3	44.3	32.4	63.6	34.5	35.3	37.3	52.3	59.1	52.9
Race (%)										
Black	14.6	18.3	17.7	15.3	18.9	14.4	25.3	22.0	17.8	17.8
White	77.2	72.8	71.0	79.6	70.2	77.6	64.8	67.7	76.0	78.0
Other	8.1	8.9	11.3	5.1	10.9	8.0	10.0	10.4	6.2	4.2
Education	13.1	12.1	12.8	11.1	12.6	12.6	12.2	11.5	11.2	11.7
Household income (in dollars)	25,084	31,517	32,543	26,368	33,199	34,406	28,399	39,465	29,074	34,945
Marital status (%)										
Married	33.0	63.9	69.1	55.7	68.6	77.1	41.4	69.0	59.7	79.1
Cohabiting	8.6	3.9	3.3	1.7	3.7	22.1	12.0	1.1	2.0	1.6
Single	58.5	32.2	27.6	42.6	27.7	0.1	46.7	30.0	38.3	19.3
Full-time employment (%)	77.4	63.0	71.8	37.6	72.1	83.6	81.2	63.6	47.4	59.5
Depression	15.0	15.3	15.6	13.7	15.8	14.4	18.1	15.1	14.6	15.8

Note: Age and education are given in mean years, household income is given in mean dollars, and depression is given in mean CES-D score.

[a] These parental status variables are mutually exclusive.

[b] These parental status variables are not mutually exclusive.

RESULTS

Parental Status Differences in Depression

Table 2 contains the results of dummy variable analyses in which respondents' current level of depression is regressed on their gender, sociodemographic and status characteristics, and parental status. This first set of analyses examines differences in depressive symptoms between childless adults and all parents (see model 1); childless adults and parents at different stages of the life course, that is, between nonparents and both fullnest and emptynest parents (see model 2); and childless adults and different types of parents (see model 3). Note that childless persons are the reference category in all of these analyses. There are several interesting findings in Table 2.

Consistent with epidemiological research (Mirowsky and Ross 2003), model 1 indicates that women and younger people, blacks, persons with less education and household income, nonmarried persons, and those not employed fulltime report significantly higher levels of depression. However, in contrast to some prior research that finds no difference in mental health between childless adults and parents in general (e.g., Aneshensel et al. 1981), we find that as a group parents report significantly *higher* levels of depression than nonparents once sociodemographic and status characteristics are held constant. We suspect that the inconsistency between our and others' findings reflects the relatively high percentage of single, noncustodial, cohabiting, and stepparents in our national sample. Moreover, in contrast to the assumption that the disadvantages of parenthood are greater for women than for men, supplemental interactional analyses (not shown) reveal that there is no gender difference in the association between current depression and being a parent compared to not being a parent.

Additionally, and in accord with earlier work—which shows that persons residing with young children are more distressed than nonparents (Aneshensel et al. 1981; Pearlin and Johnson 1977; Umberson and Gove 1989)—model 2 indicates that fullnest parents are significantly more depressed than their childless peers, controlling for sociodemographic and status variables. However, in contrast to some prior studies that find that emptynest parents are less distressed than nonparents (Mirowsky and Ross 2003; Umberson and Gove 1989), we find that emptynest parents do not significantly differ from their childless counterparts with respect to depression, even when sociodemographic and status variables are held constant. That is, while parents at the stage of the life course when their children are young and living at home report significantly more depression than nonparents, parents at the stage of the life course when their children are grown and living independently do not enjoy better mental health than persons who never had children. Auxiliary interactional analyses (not shown) also indicate that the association between parenthood (compared to nonparents) and depression at these two different stages of the life course does not significantly differ by gender.[5]

Finally, model 3 shows that persons who have minor children at home, noncustodial children, adult children at home, and nonresidential adult stepchildren all report significantly more symptoms than nonparents when control variables are included. In fact, there is *no* type of parent in this national sample that reports less depression than nonparents. While persons who have minor stepchildren in the household and nonresidential adult children do not significantly differ from persons who have never had children, most types of parents report significantly more depression than childless persons. Once again, additional interactional analyses (not shown) indicate that there are no gender differences in the association of depression and being any of these types of parents compared to not being a parent.

Taken together, this set of analyses provides support for our first hypothesis: Unlike other major adult roles in the United States, parenthood is not associated with lower levels of depressive symptoms. Our results for emptynest parents are interesting and can be interpreted in two ways. On the one hand, they indicate that the emotional disadvantages of parenthood do not apply to persons at the stage of the life course when their own children are grown and independent. On the other hand, they indicate that there are no emotional benefits of emptynest parenthood for current depression. The findings for stepparents, especially those residing with minor stepchildren, are counterintuitive in light of cultural beliefs about the negative consequences of stepparenthood. Although persons who have nonresidential adult stepchildren report more symptoms, persons residing with minor stepchildren do not differ from nonparents with respect to depression. The latter finding

TABLE 2. Unstandardized Coefficients from Regressions of Depression on Childless Adults and Different Types of Parents

Independent Variables	Model 1 (N = 11,473)	Model 2 (N = 8,716)	Model 3 (N = 11,473)
Female (yes = 1)	1.97***	2.00***	2.19***
	(.33)	(.38)	(.34)
Age	–.19**	–.25***	–.26***
	(.06)	(.07)	(.06)
Age-squared	.00	.01	.01
	(.01)	(.01)	(.01)
Black[a] (yes = 1)	1.25**	1.49**	1.17**
	(.43)	(.50)	(.43)
Other racial background[a] (yes = 1)	–1.22*	–.91	–1.17*
	(.57)	(.64)	(.57)
Education	–.69***	–.67***	–.66***
	(.06)	(.07)	(.06)
Household income	–.16***	–.13*	–.17***
	(.05)	(.06)	(.05)
Cohabiting[b] (yes = 1)	2.35***	2.67**	2.10**
	(.74)	(.87)	(.75)
Single[b] (yes = 1)	4.20***	3.83***	4.13***
	(.37)	(.42)	(.37)
Full-time employment (yes = 1)	–3.71***	–3.34***	–3.78***
	(.39)	(.44)	(.39)
All parents[c] (yes = 1)	1.36***	—	—
	(.40)		
Fullnest parents[c] (yes = 1)	—	.87*	—
		(.45)	
Emptynest parents[c] (yes = 1)	—	.26	—
		(.63)	
Parents with minor children at home[c] (yes = 1)	—	—	.92**
			(.38)
Parents with minor stepchildren at home[c] (yes = 1)	—	—	.61
			(.88)
Noncustodial parents[c] (yes = 1)	—	—	3.04***
			(.62)
Parents with adult children at home[c] (yes = 1)	—	—	.145
			(.62)
Parents with nonresidential adult children[c] (yes = 1)	—	—	.84
			(.48)
Parents with nonresidential adult stepchildren[c] (yes = 1)	—	—	2.47***
			(.68)
Constant	29.78	30.33	30.85
Adjusted R^2	.064	.061	.067

* $p < .05$; ** $p < .01$; *** $p < .001$ (two-tailed tests)
Note: Numbers in parentheses are standard errors.
[a] White persons are the reference group.
[b] Married persons are the reference group.
[c] Childless persons are the reference group.

may reflect the social selection of persons into this type of stepparenthood on the basis of their mental health status. While stepparenthood may be distressing, it is possible that those who enjoy better mental health and have more coping resources and social support are more likely to become stepparents of minor children. Finally, in contrast to the assumption that parenthood is associated with more depression for women than for men, the emotional disadvantages of being a parent relative to not being a parent are not greater for women, and this appears to be the case regardless of the type of parent one is. Having assessed parental status differences in mental health, we next examine variation among parents.

Variation in Depression among Parents

Our second set of analyses investigates (1) whether some types of parents report more

depression than others, and (2) whether there are gender differences in the association between parenthood and depression. Table 3 presents the results of dummy variable analyses in which respondents' symptoms are regressed on their gender, sociodemographic and status characteristics, and the type of parent they are. To assess differences in depression between parents at different stages of the life course, model 1 focuses on fullnest and emptynest parents. Model 2 assesses gender differences in the association between symptoms and parenthood at these two different stages of the life course. The reference group for models 1 and 2 is fullnest parents. Recall that an assumption underlying theory and research in this area is that parents who have dependent children in the household are more distressed than most other types of parents. To examine whether this assumption is correct, model 3 focuses on depression differences between parents who have minor children at home and all other types of parents. Model 4 assesses gender differences in the association between symptoms and these different types of parenthood. The reference group for models 3 and 4 is parents who have minor children in the household. Table 3 contains several intriguing results.

In contrast to some previous research indicating that persons at the emptynest stage of parenthood enjoy better mental health than persons at the stage in the life course when they are residing with their minor children (Aneshensel et al. 1981; Kandel et al. 1985; Umberson and Gove 1989), we find no significant difference in depression between emptynest and fullnest parents (see model 1). Moreover, although some qualitative research suggests that emptynest parenthood is more beneficial for women's mental health than for men's (Rubin 1979), there is no significant gender difference in the association between emptynest parenthood and symptoms (see model 2). Supplemental analyses (not shown) further reveal that the association between fullnest parenthood and depression does not significantly differ for women and men. This finding is also in contrast to some prior studies showing that residing with young children is more disadvantageous for the well-being of women than of men (Aneshensel et

TABLE 3. Unstandardized Coefficients from Regressions of Depression on Different Types of Parents

Independent Variables	Model 1[a] (N = 5,763)	Model 2[a] (N = 5,763)	Model 3[b] (N = 8,520)	Model 4[b] (N = 8,520)
Emptynest parents (yes = 1)	.91	.75	—	—
	(.94)	(1.12)		
Female × emptynest parents	—	.24	—	—
		(.96)		
Parents with minor stepchildren at home (yes = 1)	—	—	.38	–.05
			(.91)	(1.05)
Noncustodial parents (yes = 1)	—	—	2.50***	1.68*
			(.66)	(.81)
Parents with adult children at home (yes = 1)	—	—	1.59**	1.62**
			(.64)	(.64)
Parents with nonresidential adult children (yes = 1)	—	—	1.51**	.77
			(.61)	(.79)
Parents with nonresidential adult stepchildren (yes = 1)	—	—	2.68***	1.72
			(.69)	(1.10)
Female × parents with minor stepchildren at home	—	—	—	1.86
				(2.06)
Female × noncustodial parents	—	—	—	2.28
				(1.37)
Female × parents with adult children at home	—	—	—	.54
				(.81)
Female × parents with nonresidential adult children	—	—	—	1.38
				(.99)
Female × parents with nonresidential adult stepchildren	—	—	—	1.59
				(1.41)
Constant	34.73	34.84	35.16	36.07
Adjusted R^2	.073	.073	.076	.077

* $p < .05$; ** $p < .01$; *** $p < .001$ (two-tailed tests)

Notes: Numbers in parentheses are standard errors. Each model controls for gender, sociodemographic variables including age, race, education, and household income as well as respondents' marital and employment status.

[a] Fullnest parents are the reference category.

[b] Parents who have at least one minor biological/adopted child at home are the reference category.

al. 1981; Bird and Rogers 1998; Glenn and McLanahan 1981). Differences between our findings for fullnest compared to emptynest parents and those of some other studies may reflect differences in measures across studies; recall that our measure of fullnest parents includes people residing with minor children under the age of 18, whereas some other studies focus only on those living with children under the age of 6.[6]

We do, however, find significant depression differences between parents who have minor children living at home and most other types of parents. Although persons residing with minor stepchildren do not significantly differ from people living with their own minor children, those who have noncustodial children, adult children at home, nonresidential adult children, and nonresidential adult stepchildren all report significantly *higher* symptom levels (see model 3). Interactional analyses reveal no significant gender difference in the associations between any of these different types of parenthood and depression (see model 4). Moreover, supplemental analyses (not shown) show no significant gender difference in the association between being a parent with minor children at home and depression.[7]

On balance, these analyses provide support for our second hypothesis: There is considerable variation in depression among parents. Although fullnest and emptynest parents do not differ as some research suggests, parents residing with their own minor children actually report less (rather than more) depression than most other types of parents. Together, these findings contradict the assumption that parents with minor children in the household are the most distressed type of parent. In light of cultural assumptions about the stressfulness of stepparenthood, we are once again surprised by our findings for stepparents. Our failure to find depression differences between parents residing with their own minor children and those living with minor stepchildren may reflect underlying selection processes. Along similar lines, while noncustodial parenthood is likely to be stressful and depressing, our finding that noncustodial parents report higher symptom levels than custodial parents may reflect the selection of depressed people out of custodial parenthood. We are also surprised to find that having nonresidential adult children is associated with more depression than having minor children in the household—a finding for which we do not have a ready explanation. At the same time that these analyses provide support for our hypothesis that there is variation in distress among parents, they provide no support for the hypothesis that there are gender differences in the association between parenthood and depression. Despite the female excess of depression among all types of parents, there is no type of parenthood that is more closely associated with depression for women than for men. This finding contradicts the assumption that parenthood is more consequential for the emotional well-being of women.

Marital Status Variation in the Associations between Parenthood and Depression

We now evaluate our final hypothesis that most types of unmarried parents (including both single and cohabiting parents) report more depression than their married peers. Table 4 presents analyses in which respondents' symptoms are regressed on the same set of variables. However, since the purpose of these analyses is to assess depression differences not only between different types of married and single parents but also between different types of married and cohabiting parents, we included dummy variables for each marital status for each type of parent. The married are the reference category in these analyses.

From an initial glance at Table 4, it is clear that single persons report significantly more symptoms than married persons among all types of parents. However, upon close investigation, Table 4 also reveals that depression differences between cohabiting and married persons are evident only among certain types of parents. Consistent with previous research showing that single persons living with minor children are more distressed than their married counterparts (Aneshensel et al. 1981; Brown and Harris 1978; Glenn and McLanahan 1981; Pearlin and Johnson 1977), model 1 indicates that both single and cohabiting persons who have minor children at home report significantly more symptoms than their married counterparts. However, while single persons residing with minor stepchildren report significantly more symptoms than their married peers, there is no significant depression difference between married and cohabiting persons living with minor stepchildren (model 2). Although these findings should be interpreted cautiously due to the small number of single persons residing with

TABLE 4. Unstandardized Coefficients from Regressions of Depression on Different Types of Parents by Marital Status

Independent Variables	Model 1 (N = 4,859)	Model 2 (N = 389)	Model 3 (N = 812)	Model 4 (N = 838)	Model 5 (N = 3,467)	Model 6 (N = 669)
Single parents with minor children at home[a] (yes = 1)	5.15***	—	—	—	—	—
	(.61)					
Cohabiting parents with minor children at home[a] (yes = 1)	3.83*	—	—	—	—	—
	(1.30)					
Single parents with minor stepchildren at home[a] (yes = 1)	—	21.03*	—	—	—	—
		(9.27)				
Cohabiting parents with minor stepchildren at home[a] (yes = 1)	—	2.52	—	—	—	—
		(2.07)				
Single noncustodial parents[a] (yes = 1)		—	5.56***	—	—	—
			(1.41)			
Cohabiting noncustodial parents[a] (yes = 1)	—	—	–1.36	—	—	—
			(2.08)			
Single parents with adult children at home[a] (yes = 1)	—	—	—	4.46**	—	—
				(1.45)		
Cohabiting parents with adult children at home[a] (yes = 1)	—	—	—	9.31	—	—
				(5.78)		
Single parents with nonresidential adult children[a] (yes = 1)	—	—	—	—	3.91***	—
					(.67)	
Cohabiting parents with nonresidential adult children[a] (yes = 1)	—	—	—	—	–2.76	—
					(2.10)	
Single parents with nonresidential adult stepchildren[a] (yes = 1)	—	—	—	—	—	4.27*
						(1.92)
Cohabiting parents with nonresidential adult stepchildren[a] (yes = 1)	—	—	—	—	—	1.02
						(5.63)
Constant	33.16	34.01	52.48	26.47	61.96	23.84
Adjusted R^2	.073	.069	.105	.084	.071	.042

* $p < .05$; ** $p < .01$; *** $p < .001$ (two-tailed tests)

Notes: Numbers in parentheses are standard errors. Each model controls for gender, sociodemographic variables including age, race, education, and household income as well as respondents' employment status.

[a] Married parents are the reference group.

minor stepchildren, similar results are evident among persons who have noncustodial children (model 3), residential adult children (model 4), nonresidential adult children (model 5), and nonresidential adult stepchildren (model 6). In other words, while single persons who have noncustodial children, adult children at home, nonresidential adult children, and nonresidential adult stepchildren all report more symptoms than similar married persons, there are no differences between these types of married and cohabiting parents.[8]

Overall, Table 4 results provide some support for our final hypothesis regarding marital status differences in the association between parenthood and mental health. However, in contrast to our expectation that most types of unmarried parents report higher levels of depression than their married peers, these analyses reveal depression differences between married and cohabiting persons only among certain types of parents. That is, while all types of single parents report higher symptom levels than all types of married parents, differences between married and cohabiting parents are evident only among those residing with their own minor children. This latter finding strongly suggests that the emotional benefits of marriage relative to cohabitation only apply to persons living with dependent biological and/or adopted children.

CONCLUSIONS AND DISCUSSION

In this article, we addressed some limitations of previous theory and research and attempted to clarify the relationship between parenthood and depression in the United States. We hypothesized that most types of parents are more depressed than persons who never had children. However, we also hypothesized that certain types of parenthood are associated with more depression than others. Expanding theoretical arguments about the consequences of role involvement for individuals' mental health, we argued that variation in mental health among parents reflects variation in their experiences as parents; some types of parenthood are associated with more stress and distress than others. Our argument builds on McLanahan's and Adams's (1989) earlier work and is consistent with recent emphases on the importance of social context—in this case family context—for understanding the relationship between role involvement and mental health more generally; based on a national sample of adults, there is support for most, though not all, of our hypotheses.

In contrast to some earlier research, our analyses indicate that as a group parents report significantly higher levels of depression than nonparents when sociodemographic and status variables are held constant. We noted that inconsistencies between our and others' findings probably reflect the relatively high percentage of single, noncustodial, cohabiting, and stepparents in this relatively recent national sample. Moreover, and consistent with other research, we found that persons at the stage of the life course when they are residing with their minor children report significantly more depression than their childless peers when sociodemographic and status variables are included in analyses. We concur with other authors (e.g., Umberson and Gove 1989; McLanahan and Adams 1985) that the emotional demands of parenthood at this stage of the life course may simply outweigh the emotional rewards of having children. However, we also found that emptynest parents do not significantly differ from persons who have never had children, even when sociodemographic and status characteristics are controlled, which suggests that there are no emotional benefits associated with emptynest parenthood with respect to current depression. While it is inconsistent with some previous studies, our finding for emptynest parents is not too surprising. Although the demands associated with parenthood subside as children age and become independent—freeing parents to reap the rewards of having children—most parents are probably involved in their adult children's lives and continue to be concerned with their well-being, which can also be emotionally costly. In fact, one of our most interesting findings is that there is *no* type of parent that reports less depression than nonparents. Another interesting finding is that the association between all types of parenthood—relative to not being a parent—and depression does *not* significantly differ for women and men. This finding contradicts assumptions about gender differences in the emotional consequences of parenthood—a point to which we will return. Overall, the first set of analyses provides support for our first hypothesis: Unlike other major adult roles in the United States, parenthood is not associated with enhanced emotional well-being.

Subsequent analyses also provide support for our second hypothesis: There is considerable variation in depression among parents, irre-

spective of gender and marital status. Although there is no depression difference between fullnest and emptynest parents, as some prior research suggests, persons living with minor biological and/or adopted children report *fewer,* rather than more, depressive symptoms than most other types of parents. We noted that this finding contradicts the assumption underlying theory and research that persons residing with minor children are the most distressed type of parent. We also acknowledged that differences between our findings and those of other studies may be due to differences in the measures used for this type of parent.

However, additional analyses failed to support our hypothesis regarding gender differences in the association between parenthood and depression. Despite the female excess of depression among all types of parents (and nonparents) in our national sample, the association between parenthood and symptoms does *not* significantly differ for women and men. These findings are not only inconsistent with some earlier studies, but they are also inconsistent with another assumption of work in this area, which is that parenthood is more consequential for the emotional well-being of women than of men. Although we did not find gender differences in the associations between parenthood and depression, our findings clearly show that certain types of parenthood are predominantly male, whereas other types are predominantly female. These gendered parenting patterns no doubt reflect contemporary custodial arrangements in the United States, where mothers are more likely than fathers to reside with their young biological and/or adopted children in the event of nonmarital childbearing, cohabitation, separation, divorce, and remarriage.

Additional analyses nevertheless revealed marital status differences in the association between parenthood and depression; most types of unmarried parents report more symptoms than most types of married parents. However, depression differences between married and cohabiting persons are evident only among certain types of parents; while all types of single parents report more symptoms than all types of married parents, depression differences between married and cohabiting parents are evident only among persons residing with their own minor children. On the basis of these findings, we suggested that the emotional benefits of marriage relative to cohabitation only apply to persons living with their own dependent children.

Taken as a whole, the results provide support, albeit indirect support, for our argument that variation in mental health among parents reflects a myriad of factors affecting different parenting experiences. While data limitations prevented us from doing so, future research should directly examine whether these social-psychological, sociocultural, and social-structural factors contribute to the emotional costs and rewards associated with parenthood at different stages of the adult life course and different types of parenthood. While we agree with mental health and family scholars that the benefits derived from parenthood may be canceled out or exceeded by the costs associated with the role, definitive conclusions about this argument await further work.

It is equally important for future research to investigate whether individuals select themselves into—and out of—certain types of parenthood on the basis of their mental health status. Although our theoretical framework assumes social causation, we believe that social selection processes operate, especially for certain types of parents. Recall that persons residing with minor stepchildren are no more depressed than persons living with their own children. We suggested that while stepparenthood with residential minor children may be depressing, persons who select themselves into this type of stepparenthood may also enjoy better mental health to begin with. We provided a similar interpretation for our findings for noncustodial parents who report more symptoms than custodial parents. While noncustodial parenthood is also likely to be distressing, depressed persons may be more likely to select themselves out of custodial parenthood for the sake of themselves and their children.

Future research should also investigate the meanings individuals attach to different types of parenthood. Our analyses strongly suggest that certain types of parenthood (e.g., parenthood that involves one's own and one's partner's minor children in the household) have predominantly positive meanings, whereas other types (e.g., noncustodial parenthood and parenthood that involves nonresidential adult stepchildren) have largely negative meanings. These meanings are no doubt rooted in cultural beliefs about the "ideal" type of parenthood. Finally, research should examine whether gay and lesbian parents report more (or less) depression than their heterosexual peers. This

is an important and timely topic that warrants careful attention from sociologists.

At the same time that our research opens up some new lines of inquiry into the relationship between parenthood and mental health, our findings urge theory and research about the emotional consequences of social role involvement to go beyond simplistic conceptions of adult roles. Building on McLanahan's and Adams's study (1989), we have shown that, although parenthood is currently not associated with enhanced mental health, there are different types of parenthood that appear to be differentially consequential for emotional distress. These different types of parenthood no doubt reflect a diverse range of experiences individuals have as parents. Our analyses clearly indicate that certain types of parenthood—particularly parenthood with minor children in the household—are associated with less depression than other types of parenthood.

NOTES

1. Although we think it is misleading, the term "active" parent is often used to refer to persons at the stage in the life course when they are residing with minor children. We avoid using this term because it is possible to be an active parent even when one's minor children are not living in the household; conversely, one can reside with minor children and still *not* be an active parent. The term "empty nest" parent refers to persons whose children are grown and living independently.
2. Although we do not present these analyses in our article, we used two waves of the NSFH to assess whether there is a *change* in depression from time 1 (1987–1988) to time 2 (1992–1994) with the transition to parenthood. Interestingly, we do not find a significant increase (or decrease) in depression among respondents who became first-time parents over the five-year study period. Our findings are consistent with those reported by Nomaguchi and Milkie (2003) using the same data.
3. While cohabitation is more common among nonparents than among parents, Table 1 indicates that there is a relatively high percentage of cohabitation among both noncustodial parents and persons residing with minor stepchildren. The latter finding suggests that persons need not be married in order to consider their partner's children from a prior relationship to be stepchildren. Additional analyses indicate that while the majority of mothers—including those residing with their own minor children—are in the labor force full-time, all types of mothers are less likely to be employed full-time than all types of fathers and childless women.
4. Although we cannot assess this possibility with our data, we suspect that the differential distribution of men and women in the three adult children parent categories reflects the greater tendency for women to *report* having these children, probably because they maintain greater contact with children over the entire life course than do men.
5. Supplemental interactional analyses reveal no significant interactions between age, race, education, and household income with parenthood at these two stages of the life course, with one exception: The modest (i.e., nonsignificant) positive association between emptynest parenthood and depression in model 1 is greater for persons with "other" racial backgrounds than it is for whites.
6. To assess this possibility, we computed another variable for fullnest parents based on respondents who only have children less than 6 years old living at home. Auxiliary analyses indicate that these parents do not report more depression than their childless peers.
7. Additional interactional analyses also reveal no significant interactions between age, race, education, and household income with any type of parent shown in Table 3, with one exception: The positive significant association between parents with nonresidential adult children and depression is significantly greater for younger than for older persons. The absence of significant educational and household income differences in depressive symptoms for *all* types of parents suggests that these social and economic resources do little to reduce (i.e., buffer) this type of emotional distress among parents.
8. Paralleling the findings shown in Table 4, supplemental analyses of parents at the two different stages of the life course indicate that both single and cohabiting fullnest parents report significantly more depression than their married counterparts. In contrast, while single emptynest parents report significantly more depression than their married peers, there is no significant depression difference

between cohabiting and married emptynest parents.

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