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Chapter 8
Parent-Child Relationships and Well-Being

Shannon M. Suldo and Sarah A. Fefer

8.1 Introduction

Modern parenting often entails a seemingly endless cycle of schedules and concerns, complicated by information overload. Parents are pressured to have their children reading and toilet-trained at near impossible ages, to expose their children to novel and enriching situations (while ensuring the children do not disrupt tranquility at restaurants or on airplanes, of course), to develop an impressive array of extracurricular talents in their young sons and daughters, and to buy "necessities" (e.g., college savings plans, summer camps, gifts for teachers) that require a disposable income level most accessible to households with dual earners. While parents are making difficult choices about how to spend their time and what to sacrifice, they are bombarded with media messages replete with statistics and warnings: an alarming number of youth turn to drugs, drop out of high school, commit crimes, lack empathy, fail to marry before starting a family, etcetera. In a quest to protect children from dismal outcomes, successful parenting turns from fostering excellence to preventing despair. This chapter summarizes the growing body of research finding that happy children have parents who express warmth, care, and support, and spend quality time with their children. Particularly in fast-paced and fear-oriented societies, parents seeking insight about how to raise happy children need to hear the value of relatively simple parenting practices that do not require extensive funds or time. After defining well-being as entailing the presence of positive indicators of psychological functioning, this chapter advances applications and interventions from studies that delineate which aspects of the parent-child relationship co-occur with optimal psychological well-being in children and adolescents.

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8.1.1 Defining Well-Being

The bulk of psychological research has focused on remediating deficits or ameliorating mental health problems. In contrast, researchers and clinicians operating from a positive psychology perspective have sought to understand what contributes to states of optimal functioning. Such a perspective intentionally involves striving for complete well-being that is beyond the asymptomatic or neutral point of existence. Well-being outcomes included under the positive psychology umbrella include subjective well-being (Diener et al. 2009) and other indicators of flourishing (Keyes 2009). Diener and colleagues (2009) define high subjective well-being as "experiencing high levels of pleasant emotions and moods, low levels of negative emotions and moods, and high life satisfaction" (p. 187). As such, happy individuals experience more frequent positive affect relative to negative affect, and judge the quality of their lives to be high in relation to their satisfaction with personally-relevant domains of life. More is known about links between parent-child relationships and the cognitive component of subjective well-being in comparison to the affective component. While subjective well-being (and life satisfaction in particular) is a dominant indicator of well-being, other indicators of wellness and flourishing merit consideration. For instance, Seligman (2002) advances that well-being entails positive emotions about one's past (e.g., gratitude) and one's future (e.g., hope, optimism) in addition to contentment with one's present (e.g., positive affect). Keyes (2009) operationalizes positive mental health as including indicators of social well-being (e.g., positive interpersonal relationships, social contribution, community integration) and psychological well-being (e.g., personal growth, purpose in life, self-acceptance) in addition to emotional well-being (akin to the positive affect and life satisfaction components of subjective well-being). This model yields mental health categories that range from languishing (equivalent to mental unhealth) to flourishing – high hedonic/emotional well-being in addition to positive functioning in more than half of the social and psychological domains. Due to the variety of terms currently available for use when defining youth well-being in a positive manner, the subsequent literature review was intentionally comprehensive and specifies how well-being was operationalized in a given study.

8.1.2 Defining Parent-Child Relationships

The parent-child relationship in relation to child outcomes has most often been studied in terms of behavioral dimensions of parenting practices. As summarized by O'Connor (2002), the dimensions of parenting that have been examined the most include: (a) warmth/support/responsiveness; (b) conflict or rejection; (c) level of supervision and [punitive] control techniques; and (d) autonomy promotion. Overarching parental attitudes and patterns of use of specific parenting practices in combination are reflected in parenting styles. An *authoritative* style, characterized

by high parental responsiveness in tandem with high control/demandingness (including firm behavioral control and supervision), is most commonly associated with enhanced competence and reduced psychopathology in youth (Baumrind 1991; Steinberg et al. 2006).

Studies on parenting practices in relation to youth well-being are summarized next. Conclusions from this synthesis should be tempered in light of the following limitations in the extant literature: (a) failure to account for method variance (i.e., few studies that assessed the parent-child relationship and youth well-being via different methods or sources); (b) few studies with young children (most samples include older children or adolescents, or even adults who retrospectively recall parenting, largely due to the current lack of means for assessing well-being among children who do not have the cognitive capacity and/or reading ability to complete self-report rating scales); and (c) proliferation of studies that purport to assess youth "well-being" but instead measure psychopathology, and equate well-being with a lack of symptoms. This misuse of terms is contradictory to studies in the positive psychology literature that demonstrate psychopathology and subjective well-being are not synonymous (e.g., Antaramian et al. 2010; Suldo and Shaffer 2008), and instead both an absence of mental health problems and the presence of well-being are needed to attain optimal outcomes.

8.2 Empirical Links Between Parent-Child Relationships and Youth Well-Being

The family context is a central determinant of subjective well-being throughout the lifespan, including the childhood and adolescent years (Diener and Diener McGavran 2008). For example, a cross-sectional study of 587 American middle school students found that in early adolescence, high life satisfaction was much more tied to positive relationships (in terms of attachment [perceptions of trust, support, care]) with parents than with friends (Ma and Huebner 2008). While high attachment to both sources co-occurred with greater life satisfaction, parent attachment explained 19 % of the unique variance in early adolescents' life satisfaction scores, in comparison to 3 % unique variance explained by peer attachment. Further, peer attachment partially mediated the influence of parent attachment on girls' life satisfaction, with greater parent attachment predicting greater peer attachment, which, in turn, linked to higher life satisfaction. Thus, while adolescents' peer relationships take on significant meaning during youth, relationships within the family set the foundation for the potential benefits of strong friendships on youth well-being.

The strong association between youth well-being and parent-child relationships is robust across cultures. This conclusion is illustrated by a study of 1,034 early adolescents (ages 10–14) from 11 cultures ($n = 31$–246 children per country) that evaluated the relationships between children's life satisfaction and their peer and

parent relationships, while considering average levels of family values in a given culture (e.g., family vs. individuation orientation; Schwarz et al. 2012). Adolescent life satisfaction was assessed by a 5-item measure of global satisfaction and satisfaction with four domains (friendships, family, school, and health). Zero-order bivariate relationships between these variables in the entire sample suggested that higher life satisfaction co-occurred with higher reports of intimacy with parents (i.e., self-disclosure and open communication in parent-child relationships) and peer acceptance, and particularly with admiration from parents (i.e., feelings of warmth and acceptance). Results of multi-level modeling concluded that whereas the strength of the association between peer acceptance and life satisfaction varied by culture (with a weaker association within cultures that placed greater importance on family values), admiration from parents yielded strong, positive associations with life satisfaction across cultural groups and a positive trend between intimacy with parents and life satisfaction was noted across cultures. Findings led Schwarz and colleagues (2012) to conclude that "parental warmth and acceptance are important for early adolescents relatively independent of the respective cultural values" (p. 72).

In light of the robust link between youth subjective well-being and family dynamics, a logical question is which aspects of the parent-child relationship are most important. Some insight was provided by a qualitative study of 19 youth (ages 12–16) in South Finland, in which participants explained what family factors contribute to their happiness (Joronen and Astedt-Kurki 2005). The researchers identified six themes in children's responses, including that family factors associated with high subjective well-being included: (a) a safe, inviting, and comfortable physical home; (b) family interactions that were primarily harmonious and fun in nature; (c) open communication between family members that engendered trust; (d) high levels of parent involvement and supervision; (e) permission for a child to have a life outside of the family; and (f) child's sense that they were a valued and contributing member of the household. A cross-sectional study of 239 youth (ages 12–17) from the same region confirmed significant associations between adolescent life satisfaction and multiple aspects of family dynamics; specifically, adolescents' perceptions of mutuality (i.e., high perceptions of comfort and support by family members in addition to low feelings of isolation) and stability (i.e., low disorganization) in the family predicted 54 % of the variance in adolescents' life satisfaction (e.g., positive attitudes towards, and joy in, life; Rask et al. 2003).

A review of empirical studies with multiple samples of youth in different cultures concluded that the parenting practices linked to high youth subjective well-being are aligned with an authoritative parenting style (e.g., promotion of psychological autonomy, supervision of youth whereabouts), with a particular emphasis on high levels of warmth, care, and emotional support (Suldo 2009). In contrast, low subjective well-being appears to co-occur with parental over control and punishment, as well as parent-child conflict. These conclusions have been confirmed in research published since that review was written. Case in point, among 448 high school students in China, greater life satisfaction and positive affect co-occurred with higher perceptions of fathers' and mothers' care and emotional warmth, and were

inversely associated with youth report of punitive parenting (Yang et al. 2008). In a separate sample of Chinese youth (specifically, 625 children ages 10–18 in migrant families), the parent-child relationship accounted for 15 % of the variance in youth life satisfaction (Wong et al. 2010). Aspects of the relationship that drove the effect were parent-child loving exchanges (i.e., "genuine harmonious displays of love, respect, and understanding between parents and children" p. 152) and companionship (i.e., greater time spent together in structured and play activities). These dimensions emerged as more influential than other family relationship factors such as parent-child conflict and the child's perceived contribution to the relationship. The benefits of positive parenting practices may last into the adult years, as suggested by a study of 984 adult women (in England) who reported greater psychological well-being (i.e., environmental mastery, personal growth, purpose in life, self-acceptance) in mid-life when they recalled their mothers and fathers as demonstrating more care and greater autonomy promotion (lower levels of over control) during their childhood (Huppert et al. 2010).

The simplistic hypothesis that parenting behaviors effect youth may not tell the entire story; longitudinal studies suggest that children's well-being may shape their family experiences. This bi-directionality is illustrated by research with a sample of 819 middle and high school students who rated their life satisfaction and parents' levels of authoritative parenting at two time points separated by 1 year (Saha et al. 2010). Findings included that higher levels of authoritative parenting were correlated with greater youth life satisfaction the following year (specifically, small correlations were associated with parental supervision and autonomy promotion; parent support yielded a moderate correlation). These bivariate correlations are in accordance with the bulk of previous research showing that greater life satisfaction is linked to higher levels of authoritative parenting, experienced either concurrently or earlier in life. However, in regression analyses that controlled for baseline (Time 1) levels of life satisfaction, none of the parenting behaviors at Time 1 predicted changes in life satisfaction. Rather than parenting behaviors predicting changes in life satisfaction, the reverse direction was supported, with baseline life satisfaction predicting positive increases in perceived parental support the following year (Time 2). Thus, child characteristics (life satisfaction) appeared to exert an effect on changes in the parent-child relationship (i.e., parental support) rather than the parent-child relationship predicting changes in child well-being.

Such bi-directionality notwithstanding, positive parent-child relationships appear to exert promotive and protective effects on youth subjective well-being, as illustrated by an ongoing study our lab is completing. In an effort to understand the development of subjective well-being in high school students, we are assessing 500 high school students at two time points separated by a year. Preliminary analyses from the first year of data pertain to the extent to which social support from parents and school sources (teachers, classmates) predicts students' subjective well-being (youth self-reports of life satisfaction, positive affect, and negative affect), as well as may protect students who experience peer victimization (relational and overt bullying) from diminished subjective well-being. Results of regression analyses indicated that students who perceived higher social support from their parents

reported the greatest happiness, indicative of a promotive effect of parent-child relations among the general sample of youth (Hoy et al. 2012). Moreover, parent support emerged as a protective factor. Specifically, students with high parent support reported high subjective well-being regardless of the frequency with which they were bullied by peers. In contrast, for students with average and low levels of parent support, increased bullying co-occurred with lower happiness. This buffer effect underscores the importance of positive parent-child relationships to youth subjective well-being.

More research is needed to understand associations between parent-child relationships and indicators of youth wellness beyond subjective well-being, such as positive emotions about the past and future, or evidence of flourishing in the social or academic realms. One notable exception is a recent study of children's hope in relation to the family context (Padilla-Walker et al. 2011). Within a sample of 489 children (ages 9–14), higher levels of child hope were associated with higher levels of children's perceived connectedness to their mothers and fathers ($r = .51$ to .54). This link was important in that high hope, in turn, co-occurred with a host of desirable outcomes, including better school engagement, more kind/prosocial behavior, and fewer symptoms of psychopathology.

8.3 Interventions

One of the primary criticisms aimed at the relatively new field of positive psychology is that "applications are outstripping the science" (Diener 2009, p. 9). Given that research on correlates of youth well-being has lagged behind the corresponding literature on well-being in adults, this caution is particularly relevant to those desiring to implement clinical interventions to promote optimal family functioning (i.e., desirable parenting practices) or youth happiness (e.g., indicators of subjective well-being). In the absence of empirically-supported interventions that improve children's *well-being* by systematically improving parent-child relationships, what we offer instead are (a) logical applications of the existing studies on family correlates of youth well-being, including interventions that target parenting practices as a means to reduce children's mental health problems, (b) recommendations for improving child well-being by targeting parent well-being, and (c) theoretical models of family-focused applications of positive psychology.

8.3.1 Targeting Parenting Behaviors That Link to Youth Well-Being

Whether through systematic prevention efforts, targeted interventions for at-risk families, or provision of guidance to families seeking advice, a reasonable strategy for improving youth-well-being involves increasing families' use of positive

parenting practices that correlate with youth subjective well-being. The key parenting behaviors suggested as viable targets through empirical research on correlates include the hallmarks of an authoritative parenting style, including support, supervision, and autonomy promotion (Suldo and Huebner 2004). Public health campaigns that describe and strengthen these parenting practices could constitute a form of universal intervention to improve overall family functioning and impact youth well-being. For example, parents should be informed of the strong associations between adolescents' happiness and their perceptions of emotional support from parents. In becoming motivated to increase their expression of care, warmth, and acceptance to their children, parents may be interested to learn relevant research findings, such as that youth who are bullied experience much lower happiness levels when parent support is low, whereas happiness is generally intact among bullied high school students who are fortunate to perceive high levels of parent support (Hoy et al. 2012).

Evidence of the efficacy of universal guidance on parenting practices that strengthen relationships and improve child outcomes is provided by the public health approach evident in the media-based parent information campaign component of the Triple P – Positive Parenting Program (Sanders 2008). Triple P is a multi-tiered continuum of interventions designed to promote positive parenting and caring parent-child relationships via teaching of relationship enhancement skills (e.g., spending quality time together, providing affection) and behavior management strategies to teach desirable behaviors as well as prevent and manage misbehavior. The media component of Triple P entails the dissemination of effective parenting strategies via a 12-episode television series designed to highlight the importance of healthy family relationships, normalize parenting challenges, model effective parenting, and instill hope for positive change in children's behavior. Compared to a wait-list control group, mothers of young children who viewed the TV series incurred statistically and clinically significant improvements in the frequency of their children's behavior problems, as well as reported greater perceptions of parenting competence; positive changes were maintained at a 6-month follow-up (Sanders et al. 2000).

Families in need of more intensive, psychologist-facilitated interventions due to the presence of family risk factors or child behavior problems can be referred to behavioral parent training programs that focus on decreasing child behavior problems by enhancing parenting practices. In general, the focus is to equip parents with effective strategies for managing child behavior by teaching parents: (a) the common functions of child behavior; (b) methods to minimally attend to negative behavior and praise positive behaviors; and (c) effective strategies for discipline and limit setting. Although the overarching goal of the parent training programs is often to decrease child behavior problems, these interventions are relevant to the current discussion because the parenting practices addressed are also linked to youth well-being. One example of a targeted intervention that teaches effective parenting practices as well as purposefully attends to relationship building is Parent-child Interaction Therapy (PCIT; Zisser and Eyberg 2010). PCIT is a two-stage family therapy program that first trains parents to increase nurturance and spend quality time in play in order to establish a more positive family context, and then provides

instruction in parenting practices that prevent and reduce child misbehavior. Abundant research shows positive effects of PCIT on positive parenting practices, such as praise and effective discipline, and improvements in negative child behaviors, such as aggression and defiance (Bagner and Eyberg 2007; Matos et al. 2009).

A more informal way for parents to learn parenting practices likely to promote youth well-being involves self-study of books written for parents that offer research-based practical guidance. Two examples include *Raising Happiness* (Carter 2010) and *The Ten Basic Principles of Good Parenting* (Steinberg 2004), focused on applications of positive psychology and authoritative parenting, respectively. Carter (2010) synthesizes research on many positive psychology topics (e.g., benefits of positive emotions, emphasizing youth kindness and gratitude, mindfulness) as well as authoritative parenting into a relaxed and informal self-help book for parents. Steinberg's (2004) classic book summarizes the fundaments of effective parenting practices, as determined by decades of psychological studies (e.g., research conducted by Baumrind, Maccoby, and Steinberg himself; representative works include Baumrind 1989; Collins et al. 2000; and Steinberg 2001). He relays the importance of parental warmth, involvement and interest, developmentally appropriate limit-setting and autonomy promotion, and avoidance of overly harsh punishment techniques. Optimism for the ability of parents to internalize evidence-based practices via self-study is gleaned from a study that compared the efficacy of three forms of Triple P on preschoolers' behavioral outcomes (Sanders et al. 2007). Sanders and colleagues (2007) found that the lasting improvements in children's behaviors that were evidenced by families assigned to two therapist-facilitated forms of Triple P (Enhanced and Standard Behavioral Family Intervention) were as strong and well-maintained as those improvements seen in families who completed the Self-Directed form of Triple P. In Self-Directed Triple P, parents are provided with a self-help manual that includes 10 weeks of structured learning activities independent of contact with a psychologist or other professional.

As aforementioned, the bulk of parent-focused interventions developed and tested in the twentieth century target effective parenting practices as a means to improve child behavior. An exciting development relevant to the field of psychology involves interventions that target parents' positive mindsets and/or assess change in positive indicators of well-being in establishing intervention effectiveness. Specifically, a growing body of research extends the practice of mindfulness into the context of parent-child relationships. In brief, mindfulness involves attending to the present and intentionally focusing attention on the here and now. As given by Langer (2009), "the mindful individual is likely to choose to be positive and will experience both the advantages of positivity and the advantages of perceived control for well-being" (p. 279). Increased mindfulness in parenting is likely to help parents focus on the present and become attune to their child's emotions, reduce negative (over) reactivity to challenging child behaviors, and enable parents to select more desirable methods of communicating with their children. Mindful parenting entails five key components which overlap with features of effective parenting, including: listening, acceptance of self as a parent and of the child, emotional awareness of self and child, self-regulated parenting, and compassion (Duncan et al. 2009).

Duncan and colleagues (2009) propose that mindful parenting positively influences the parent-child relationship, which in turn leads to decreased problem behaviors and increased positive outcomes in youth.

Regarding empirical support for this model, Singh and colleagues have used single-subject methodology to investigate the impact of training in mindful parenting among families of three children with autism (Singh et al. 2006), four children with developmental delays (Singh et al. 2007), and two children with Attention-Deficit/Hyperactivity Disorder (Singh et al. 2010). Findings suggest that mothers who participated in 12 weeks of training in mindful parenting reported reduced parenting stress (Singh et al. 2007), as well as increased satisfaction with parenting and parent-child interactions (Singh et al. 2006, 2007, 2010). Although child behavior was not directly targeted, mindful parenting was linked to less child aggression and more appropriate child social interactions with siblings (Singh et al. 2007), as well as increased child compliance with parents' directives (Singh et al. 2010). These authors suggest that training in mindfulness is a wellness-focused alternative to typical behavioral interventions that focus on decreasing challenging behavior (Singh et al. 2007, 2010). Replication of this mindfulness training is encouraged by the developers who provide a detailed intervention outline in an appendix (Singh et al. 2007).

Promising outcomes (including positive indicators of youth wellness) have also been evidenced in mindfulness interventions delivered separately to both adolescents and their parents (Bogels et al. 2008). Specifically, following eight sessions of mindfulness-based cognitive therapy delivered to the families of 14 youth with externalizing behavior problems, parent ratings showed increases in children's self-control and attunement to others, as well as decreased child behavior problems. Adolescents reported increases in happiness and mindful awareness, and fewer externalizing and internalizing problems (Bogels et al. 2008). These effects were maintained at an 8-week follow-up. Because parents and youth both received training in mindfulness, it is unknown whether increased child happiness and other positive gains were an indirect result of mindful parenting or a direct effect of the youth training in mindfulness.

Perhaps the strongest empirical support for the value of increasing mindful parenting practices is provided by a pilot randomized trial investigating a modified version of the Strengthening Families Program for Parent and Youth 10–14 (SFP 10–14; Molgaard et al. 2001) that incorporated brief training in mindful parenting (Coatsworth et al. 2010). A community sample of 65 families with children in 5th through 7th grade were randomly assigned either to traditional SFP 10–14, SFP 10–14 with mindfulness components, or a wait-list control group. The two SFP 10–14 intervention conditions yielded comparable effects on positive parenting practices, including monitoring and rules communication. In line with the model proposed by Duncan and colleagues (2009), SFP 10–14 with mindfulness yielded the greatest influence on indicators of positive parent-youth relationship, and mindful parenting practices mediated this relationship (Coatsworth et al. 2010). The encouraging results of this preventative study with typically-developing early adolescents provide support for the utility of mindful parenting interventions beyond populations of youth with challenging behaviors.

8.3.2 Targeting Parent Well-Being in Light of Links with Child Well-Being

Well-designed studies have established that mental health problems in adults, ranging from maternal depression to parental externalizing behaviors, predict greater psychopathology in their offspring during childhood and adolescence (e.g., Bornovalova et al. 2010; Campbell et al. 2009). A reasonable extension of this research on familial transmission of psychopathology is that parents' and children's well-being is also likely linked. Support for this notion comes from recent studies with children (ages 9–12; Hoy et al. in press) and adolescents (ages 12–17; Casas et al. 2008) that yielded statistically significant, positive associations between children's and parents' levels of life satisfaction. Specifically, Hoy and colleagues (in press) assessed life satisfaction within 150 American families, using psychometrically-sound measures of global life satisfaction appropriate for the developmental levels of the participating children and parents. Children's global life satisfaction was correlated with both fathers' and mothers' life satisfaction ($r = .29$ and .26, respectively). These findings suggesting happier children have happier parents are consistent with findings from Casas and colleagues' (2008) study of 266 Spanish families, in which both parents and children rated their level of satisfaction with the same seven domains of life (e.g., health, relationships, community connection, safety). Children's sum score on this personal well-being index yielded a .19 correlation with their parents' personal well-being index.

In addition to these studies that establish modest but reliable associations between parents' and children's life satisfaction, research on the affective component of subjective well-being affirms that associations between parents' well-being and their children's behavior and well-being are significant and reciprocal. In a community sample of 944 mothers of 2- to 16-year-olds, maternal levels of positive affect linked to child behavior problems indirectly, through maladaptive parenting (Karazsia and Wildman 2009). Specifically, lower levels of positive affect were associated with increases in maladaptive parenting behaviors (i.e., discipline styles that were overly permissive or angry/authoritarian discipline), which in turn predicted higher levels of child behavior problems. A logical, albeit untested, application of these findings is that improvements in mothers' positive affect may result in enhanced parenting, which would be highly desirable in light of the established links between youth subjective well-being and parenting practices characterized by consistent and caring guidance. The associations between parents' happiness and their children's behavior and well-being are likely bi-directional; for example, among parents of children with intellectual disabilities, mothers reported higher levels of positive affect when their children had fewer behavior problems (Lloyd and Hastings 2009). Weis and Ash's (2009) study on parent characteristics associated with improvements in child outcomes further augments the small but growing body of research that supports the value of attending to parents' positive emotions as a viable mechanism for increasing children's well-being. Specifically, among youth in therapy, adolescents'

behavioral improvements were in part predicted by caregivers' levels of hopefulness and optimism about their child's treatment prognosis. These findings led Weis (2010) to recommend clinicians incorporate hope-focused interventions for parents of child clients. Durand and Hieneman (2008) have also suggested that targeting parent optimism throughout family-based behavioral interventions increases intervention effectiveness and leads to greater change in child challenging behavior.

In light of the positive associations between parents' and their children's subjective well-being, attempting to increase parents' happiness may be a logical strategy for improving children's well-being. In contrast to the paucity of empirical support for systematically improving youth happiness, there is a larger body of literature on the efficacy of happiness-increasing strategies for adults. Optimism for a momentous effect of such interventions is tempered in line with such realities as the genetic set-point (i.e., approximately 50 % of happiness is genetically determined and unlikely to change over time, as summarized by Nes 2010) and the hedonic treadmill (i.e., most individuals eventually acclimate to positive changes in their circumstance by returning to their baseline level of happiness; Diener et al. 2006). Nevertheless, a growing number of systematic experiments prove that lasting changes in adults' happiness can be achieved through their active participation in happiness-increasing interventions targeting increased kindness (Buchanan and Bardi 2010), gratitude (Emmons and McCullough 2003), private reflection on past positive events (Burton and King 2008; Lyubomirsky et al. 2006), and visualizing a positive future (King 2001; Sheldon and Lyubomirsky 2006). Given that increased levels of happiness as a result of positive activities are tied to higher levels of personal motivation to become happier (Lyubomirsky et al. 2011), clinicians working to improve families' well-being by targeting adults should inform parents of the many benefits of happiness (Lyubomirsky et al. 2005) as well as the links between parents' and children's levels of well-being (Casas et al. 2008; Hoy et al. in press).

8.3.3 Theoretical Models of Family-Focused Applications of Positive Psychology

A hallmark of the positive psychology perspective involves a strengths-based approach to assessment and intervention in clinical contexts. In addition to developing clinical interventions for improving parenting practices and parents' positive emotions, in recent years psychologists have advanced conceptual models for applying a strengths-based approach to work with family units (as opposed to, or in addition to, individual clients). One relevant model is the ecological Family-Centered Positive Psychology (FCPP) approach, as advanced by Sheridan and colleagues (2004; Sheridan and Burt 2009). FCPP merges ideas from positive psychology with ecological and systems theories (Sheridan et al. 2004). Within an ecological perspective, the family context is recognized as a central domain in which children learn and grow. FCPP focuses on enhancing child outcomes by

focusing on family strengths and assets, and building family competence. Sheridan and Burt (2009) assert that family members are motivated to work towards the goals that they value and prioritize, thus the FCPP service delivery model addresses family-developed (rather than clinician-created) goals. Key tenets of FCPP include building upon existing family strengths, empowering parents to play a central role in the intervention process, helping families to acquire skills and competencies related to problem-solving, and promoting child and family social supports. A central assumption of FCPP is that families continue to build capacity, grow, and work towards positive change, even after professional consultation has ended, because family members generalize skills gained during intervention to future endeavors (Sheridan et al. 2004). In accord with its positive psychology roots, the FCPP framework acknowledges that it is not adequate to address or solve problems, but rather the focus is on acting proactively to build family assets that can be applied to a variety of future challenges (Sheridan et al. 2004). Sheridan and colleagues (2004; Sheridan and Burt 2009) offer Conjoint Behavior Consultation (CBC) as an example intervention that helps professionals to collaborate and work *with* families rather than *treat* families, as is traditionally emphasized in models of behavior intervention. CBC focuses on collaborating across key developmental contexts for children (home and school) and engaging in problem-solving, intervention implementation, and data collection to address parent and teacher developed goals; caregivers are empowered to promote change within a family while minimizing dependence on outside professionals (Sheridan et al. 2004; Sheridan and Burt 2009). Empirical studies demonstrate that CBC decreases students' challenging behaviors (Sheridan et al. 2001) and empowers parents and teachers (Sheridan et al. 2006). Research is needed to support the viability of FCPP to improve child well-being in general samples.

Conoley and Conoley (2009) propose a model of family therapy that merges positive psychology research, humanistic and solution-focused therapy orientations, and systemic family therapy into an integrated model termed Positive Family Therapy. This model emphasizes that each individual family member influences overall family development, with a focus on moving towards family goals rather than ameliorating problems within the family context. Specific therapeutic techniques emphasized include: finding the strengths of each individual and the family as a whole, linking existing strengths to family goals, circular questioning, therapist as a neutral individual exhibiting unconditional positive regard, parent modeling of positive behaviors, reframing and finding exceptions, the miracle question, as well as paraphrasing and summarizing (Conoley and Conoley 2009). Other positive psychology strategies, such as practicing gratitude, creating closeness through sharing positive aspects of yourself and celebrating successes of others, and practicing acceptance and awareness (in line with mindfulness practices), are suggested as homework for the therapist to assign to families between therapy sessions. The end goal of Positive Family Therapy is to increase happiness among all members of a family. Research is needed to demonstrate successful outcomes of this approach.

8.4 Conclusions

Information summarized in this chapter illustrates the importance of the family context to youth well-being. Given the resources spent preventing maladaptive youth outcomes, it seems possible and prudent to provide parents with the level of support they need to raise children who flourish. Families with high levels of conflict or children with challenging behaviors may need intensive interventions to achieve harmony and wellness. In contrast, families with a healthier foundation may simply need guidance regarding effective, authoritative parenting practices and the importance of attending to all family members' positive emotions. Virtually all families would benefit from encouragement to limit coercive discipline strategies that may appear to achieve immediate results but at the cost of the affection and emotional support that facilitates youth well-being. As such, applied recommendations for psychologists include:

1. Provide information to all families (via summaries of the literature, recommendations for evidence-based self-help books) regarding the importance of positive parent-child relationships and healthy parenting practices.
2. In individual work with youth clients, encourage children and adolescents to invest time and energy into sustaining and improving family relationships, point out ways that parents demonstrate support and warmth, empower youth to seek autonomy in healthy ways, and discuss youth behaviors that elicit positive parenting.
3. When clinically indicated, enroll families in behavioral parent training programs to strengthen the parent-child relationship, shape parenting practices, and improve child behavior; parent-focused interventions that address mothers' and fathers' hope or optimism for change may be particularly effective.
4. Keeping in mind familial links in happiness, aim to improve adults' positive emotions, including via happiness interventions and mindful parenting.
5. Adopt a strength-based approach to child service provision that includes the entire family, empowers parents, and targets goals relevant to the family.

In many ways, the field of positive psychology and the literature specific to healthy families has come a long way in only a few years. But given the fragmented state of the literature and the gaps in existing knowledge, there are many opportunities for seminal contributions to the research base. Recommendations for future research include:

1. Develop a means to reliably assess positive indicators of well-being in young children, in part to permit the extension of research on happy families to include children in preschool and the early elementary school grades.
2. Identify the family correlates of the full range of youth positive emotions, including gratitude, hope, and indicators of psychological flourishing.
3. Through longitudinal studies, determine the contributions of parent and child behaviors, and the wellness levels of each party, to subsequent parent-child relationship quality and well-being levels in parents and children.

4. Empirically illustrate the superiority, or at least the equivalence, of a strength-based approach to youth clinical services with regard to improving well-being and enhancing family functioning, in addition to remediating psychopathology.
5. Develop and evaluate universal interventions that educate parents on effective parenting practices, the value of conveying emotional social support to their offspring, and the short-sightedness of prioritizing risk prevention over wellness promotion when raising children.

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