Cohabitation is a family structure experienced by many Black children; yet, we have limited understanding of how personal and interpersonal processes operate within these families to influence the parenting provided to these children. Informed by both family systems theory and the spillover hypothesis and using a model to account for the interdependence of the mother and her partner, the current study sought to understand the direct and indirect associations among parental mindfulness, the mother–partner relationship quality, and firm parenting practices in a sample of 121 Black cohabiting low-income stepfamilies. Assessment consisted of standardized measurements of maternal and male cohabiting partner reports on mindfulness (i.e., acting with awareness) and relationship quality (i.e., relationship satisfaction, ability to resolve conflict, and coparenting conflict) as well as adolescent report on parenting (i.e., parent’s firm control). Mindfulness was directly related to each individual’s own perceptions of relationship quality, and some support emerged for a cross-informant link (e.g., mother’s mindfulness related to partner report of relationship quality). Furthermore, maternal perceptions of relationship quality, as well as mindfulness operating through relationship quality, were related to youth reports of maternal firm parenting. The results suggest that both mindfulness and the relationship quality of adults are variables deserving attention when studying the parenting received by children in cohabiting stepfamilies. Clinical implications of the findings are considered.

Keywords: parental mindfulness, dyadic relationship quality, parenting, Black cohabiting stepfamilies

The vast majority (72%) of Black youth are born to unwed mothers and most (67%), compared with the general population (23%), will live in a single-parent household at some point during childhood and/or adolescence (Martin et al., 2013). This shift in the structure of Black families has been cited as a primary explanation for elevated rates of negative psychosocial outcomes among Black youth (Lipman, Boyle, Dooley, & Offord, 2002), including both internalizing and externalizing problems (Simons, Chen, Simons, Brody, & Cutrona, 2006), relative to European American youth and youth raised in traditional two parent homes. A principal reason cited for the overrepresentation of negative psychosocial outcomes among Black youth from low-income single-mother families is the compromise in maternal parenting that may occur when mothers must balance the competing demands of both work and family and may be less available to effectively
parent their children (Jones & Lindahl, 2011). Firm control parenting (e.g., having rules and sticking to them) in particular is critical when youth reach adolescent age (Dishion & McMahon, 1998), especially for low-income youth living in high-risk environments (Jones & Lindahl, 2011).

These findings, however, are more complex than they initially appear; a focus on marital status alone fails to take into account that “single-mother” status does not necessarily mean that mothers are the only adults involved in child rearing, particularly in Black families (see Jones & Lindahl, 2011, for a review). In fact, the majority of Black mothers who are “single” by definition of their marital status endorse the assistance of another adult or family member with whom they coordinate child-rearing responsibilities (i.e., coparenting; Jones, Forehand, Dorsey, Foster, & Brody, 2005; also see, McHale & Lindahl, 2011, for review). Of these coparents involved in child rearing, they are often biologically unrelated male cohabiting partners (MCP) residing in “single-mother” families (Dunlap, Golub, & Benoit, 2010; Lichter, Turner, & Sassler, 2010). For example, Bumpass and Lu (2000) reported that 40% of children will spend some time before age 16 in a cohabiting stepfamily. An MCP potentially can serve as a stepfather or “social father” for a child (Bzostek, 2008), engaging in coparenting activities (e.g., helping child with homework, preparing child’s lunch for school) with the biological mother (Forehand, Parent, Golub, & Reid, 2014). As the number of cohabiting families is rapidly increasing (Dunifon & Kowaleski-Jones, 2002; Huang, Smock, Manning, & Bergstrom-Lynch, 2011), the study of this family structure is critical for understanding the environment in which many children grow up. Specifically, identifying what each adult brings to the family, the quality of adult relationships, and how these personal and interpersonal constructs link to parenting experienced by children will enhance our knowledge about this family structure.

Cohabitation is beginning to receive attention in the research literature. Black adolescents growing up in these families have higher rates of problem behaviors (e.g., delinquency) than those living in families with two married parents and similar rates to those in single-parent families (Dunifon & Kowaleski-Jones, 2002; also see Manning & Lamb, 2003). Not surprisingly, firm control parenting (e.g., having rules and sticking to them) is a parenting skill related to these problem behaviors (Dunifon & Kowaleski-Jones, 2002). Unfortunately, the respective roles that a mother and an MCP play in supervising adolescents in these families is not known. MCPs are involved in child-rearing activities of adolescents (Forehand et al., 2014) but at lower levels than other types of residential fathers (e.g., married stepfathers, cohabiting biological fathers; Carlson & Berger, 2013) and than mothers (Carlson & Berger, 2013; Forehand et al., 2014). The lower level of involvement may result from family roles not being clearly defined, as cohabiting fathers do not have the rights of married fathers (see Cherlin, 1978; Manning & Lamb, 2003). Forehand et al. recently suggested that research should move from examining the extent of involvement of MCPs in cohabiting families to the parenting skills, such as firm control, they use when involved.

The current study not only focuses on both mother and MCP use of firm control parenting but on the associations of this parenting skill with an individual characteristic of each member of the dyad and their dyadic relationship quality: Mindfulness—this construct has received significant attention in different fields of psychology and medicine (Hofmann, Sawyer, Witt, & Oh, 2010; Keng, Smoski, & Robins, 2011), but is only beginning to receive attention in research with relational well-being and more specifically family systems (Cohen & Semple, 2010).

From a family systems perspective (Cox & Paley, 1997; Minuchin, 1985), family members are interdependent and their behaviors cannot be adequately understood by analyzing the individual or even a single dyad in isolation (Minuchin, 1985). Furthermore, family systems theory emphasizes the reciprocal influence that different family subsystems (e.g., individual, dyadic, family wide) potentially have with one another. In this respect, to more accurately understand the complexity of associations within the family system, it is important to investigate how each parent’s attributes (e.g., mindfulness) may be associated with their partner’s relationship satisfaction and behavior. One relevant exemplar of the multidirectional influences of different family members and groups is the
“spillover hypothesis” (Erel & Burman, 1995; see Krishnakumar & Buehler, 2000, for a review), which posits that functioning in one subsystem can impact functioning in another subsystem. For example, conflict in the adult dyadic relationship can “spill over” into the parenting domain, leading to negative parenting (Buehler, Benson, & Gerard, 2006).

Informed by family systems theory and the spillover hypothesis, the current study examines the following question: Is parental mindfulness, as part of the individual subsystem, linked to the parental dyadic subsystem (i.e., relationship quality: relationship satisfaction, disagreement resolution, and coparenting conflict), and, in turn, indirectly associated with parenting (i.e., firm control) in low-income cohabiting Black stepfamilies? As depicted in Figure 1, we propose that each individual’s mindfulness influences not only his or her own perceptions of relationship quality but also those of the MCP. In turn, we hypothesize that perceptions of the dyadic relationship quality are associated with how an individual parents and how the MCP parents.

We elected to test our model in inner city, low-income cohabiting families because all components of the model are particularly relevant for them. Urban Black families are more likely to live in chronic poverty (Huston, McLoyd, & Coll, 1994), which is associated with chronic interpersonal stressors (e.g., interparental conflict) and elevated daily hassles (Conger, Ge, Elder, Lorenz, & Simons, 1994). In addition, living in urban poverty brings increased exposure to crime and violence, particularly for adolescents (Forehand et al., 2000). Given the disproportionally high exposure to stressful experience among low-income Black families, the search for protective factors that foster resilience for these families is particularly important (Grant et al., 2000). The elements of mindfulness—awareness and nonjudgmental acceptance of one’s moment-to-moment experience—are well-established as effective counters to common forms of psychological distress (e.g., anxiety, worry, general psychological stress). By countering psychological stressors with mindfulness practice, adults in cohabiting families can focus on enhancing relationship quality with the partner, a relationship that may be unstable and a stressor itself. In turn, a robust literature reviewed below supports a relation between adult dyadic relationship quality and parenting in both married and cohabitating families (Carlson & McLanahan, 2006).

In the following paragraphs, we delineate each of the components of our model and, drawing on both the existing empirical literature and theory, develop support for the associations among mindfulness, relationship quality, and parenting shown in Figure 1. We draw from the existing literature to support the links in our model but acknowledge the family structure and race of our participants may impact the findings.

Figure 1. Conceptual model. M = mother report; MCP = male cohabiting partner report.
Mindfulness is defined as “the awareness that emerges through paying attention on purpose, in the present moment, and nonjudgmentally to the unfolding of experience moment by moment” (Kabat-Zinn, 2003, p. 145). Thoughts as events without judgment allow one to differentiate between one’s perception and one’s response. In turn, this differentiation allows an individual to act with intention rather than react automatically. Theoretically, mindfulness practice over time may lead to greater cognitive complexity and increased emotional awareness because of an increased ability to draw distinctions between separate cognitive and affective experiences (Bishop et al., 2004). In general, cross-sectional and treatment studies have reported that mindfulness and mindfulness-based therapies are associated with less psychopathology (Hofmann et al., 2010; Kabat-Zinn, 2003) along with better emotion regulation and well-being (Brown & Ryan, 2003).

Mindfulness research has primarily focused on the individual; however, since the early 1990s, the relevance of mindfulness for interpersonal relationships has been considered. Kabat-Zinn (1991, 1993) proposed that mindfulness enhances closeness in relationships and compassion for the self, which can lead to responsiveness to others. Furthermore, mindfulness has been viewed as enhanced coping, which can be beneficial in approaching stressful situations (Kabat-Zinn, 1993). Since 2007, several qualitative and quantitative studies have supported an association between mindfulness and dyadic relationship quality. Specifically, higher levels of mindfulness have been shown to be associated with multiple components of relationship quality: a greater capacity to respond positively to relationship stress (Barnes, Brown, Krusemark, Campbell, & Rogge, 2007); increased empathy and acceptance toward oneself and others (Allen, Bromley, Kuyken, & Sonnenberg, 2009); lower levels of romantic relationship conflict and coparenting conflict around child rearing (Bailie, Kuyken, & Sonnenberg, 2012); enhanced communication quality (Allen et al., 2009; Barnes et al., 2007); decreased reactivity and escalation of anger in challenging interactions (Bailie et al., 2012); increased emotional availability (Allen et al., 2009); and increased relationship satisfaction (Barnes et al., 2007; Jones, Welton, Oliver, & Thoburn, 2011; Wachs & Cordova, 2007).

Unfortunately, the existing research on the association between mindfulness and dyadic relationship quality was not designed to account for the dependency between romantic partners or to examine partner effects. In the current study, we accounted for this dependency by using the actor–partner interdependence model (APIM) developed by Kenny and his colleagues (Kenny, Kashy, & Cook, 2006). The APIM includes both actor effects (in our case the association between one’s own mindfulness and one’s own perceptions of relationship quality) and partner effects (in our case the association between one’s partner’s mindfulness and one’s own perceptions of the relationship). In allowing for the simultaneous estimation of actor and partner effects while accounting for shared couple-level context, such a model helps to identify “truly relational phenomena” (Kenny et al., 2006, p. 147). As depicted in Figure 1, we hypothesized that higher levels of individual mindfulness will be related to one’s own perceptions of a higher quality dyadic relationship (actor effects) as well as the partner’s perceptions of a higher quality dyadic relationship (partner effects). We hypothesized that these associations would exist for both maternal and MCP mindfulness. That is, mindfulness by each member of the dyad will be associated not only with his or her own perception of relationship quality, but will also be associated with the partner’s perception of their relationship quality.

The APIM applies to the next link in our model also. In terms of the actor effect, a large body of literature has consistently documented an association between both positive (e.g., relationship satisfaction) and negative (e.g., conflict) aspects of the interparental dyadic relationship and parenting (Buehler et al., 2006). Consistent with the spillover hypothesis, parents may misdirect negativity surrounding their romantic relationship to their interactions with their children. Specifically, relationship quality as reported by both mothers and fathers has been negatively associated with firm parenting (Schoppe-Sullivan, Schermersorn, & Cummings, 2007). Our research with other samples suggests that actor effects (i.e., interparental dyadic relationship quality linked to parenting) exist in Black single-mother families (Goodrum, Jones, Kincaid, Cuellar, & Parent, 2012; Jones et al., 2005; Parent, Jones, Forehand,
Cuellar, & Shoulberg, 2013; Shook, Jones, Forehand, Dorsey, & Brody, 2010). However, as with the mindfulness and interpersonal relationship association, partner effects have not been taken into account in research with these families. In the current study, we examine both actor and partner effects and hypothesize that each person’s perspective of relationship quality will be associated with one important aspect of his or her own parenting as well as their partner’s parenting. As we noted earlier, we focus on a parenting behavior that has been identified as critical for adolescents living in high-risk environments (e.g., urban, low income families): firm control parenting. We hypothesize that perceptions of a more positive dyadic relationship will be associated with higher levels of firm control parenting.

Method

Overview

The current study is part of an ongoing project examining the role of cohabiting partners in low-income Black families (e.g., Forehand et al., 2014).

Participants

Participants were 121 low-income Black single-mother families with an MCP and an adolescent in the 10 to 17 year age range living in New York City. The MCP was not biologically related to the adolescent. The mean ages of participating youth, mothers, and MCPs were 13.17 years (SD = 1.97; 56.2% girls), 38.5 years (SD = 7.86), and 40.66 (SD = 10.74), respectively. Of the mothers, 38% did not complete high school, 33% completed high school and 29% had some college/vocational school after high school, respectively. Of the participating MCPs (n = 81), 29% did not complete high school, 57% completed high school/GED, and 14% had some college/vocational school after high school, respectively. Household incomes averaged US$22,966 per year (SD = US$18,361). In all families, at least one of the two adults (mother or MCP) identified as Black. The mean number of children per family was 2.09 (SD = 1.3). Sixty-two percent of the mother-MCP relationships were “established” (≥13 months) and 38% were “new” (≥12 months).

Procedure

The National Development and Research Institute Institutional Review Board reviewed and approved the study. All participants initially signed consent (mother/MCP) and assent (adolescent) forms. Study participants were recruited by field staff members experienced in working with low-income Black residents of New York City. Field staff used existing networks of research study participants, field informants, street recruiting, and social services agency contacts to recruit potential participants. The mother and adolescent had to agree to participate and the MCP was urged to participate. Families completed the assessment either at a community site or in their home, according to the preferences of each family. Family members completed the assessments separately and privately with interviewers, who entered the responses into a computer database. The mothers, MCPs, and adolescents completed measures assessing a range of variables related to personal and family psychosocial functioning, including the variables of focus in the current study. Each interview took ~60 min to complete; adults were compensated US$40 and adolescent were compensated US$20 for their participation.

Measures

Demographic information. Mothers and MCPs completed a demographic measure about themselves (e.g., age, education), the target child (e.g., child’s age, gender), their families (e.g., family income), and their relationship (e.g., length).

Mindfulness. Three items with the highest factor loading from the Acting with Awareness subscale of the Five Facet Mindfulness Questionnaire (Baer et al., 2008) were used to assess mindfulness: “I don’t pay attention to what I’m doing because I’m daydreaming, worrying, or thinking about something else”; “When I do things, my mind wanders off and I’m easily distracted,” and “It seems I am ‘running on automatic’ without thinking about what I’m doing.” Items from this subscale were chosen because the subscale assesses the extent to which

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1 This analysis excluded 12 families in which the father was the custodial parent and three families in which the child was the MCP’s biological child and the parents had only recently moved in together. The full sample includes 136 Black cohabiting families.
an individual brings full awareness and undivided attention to current activities or experiences. This component of mindfulness is important for enhancing relationship quality (e.g., listening to partner, engaging in mutual problem solving). Mothers and MCPs responded to items on a 5-point Likert scale from 1 (never or very rarely true) to 5 (very often or always true). The Five Facet Mindfulness Questionnaire has been shown to have good internal consistency and construct validity (Baer et al., 2008). Higher scores reflect greater individual mindfulness. Internal consistency for both mother (α = .81) and MCP (α = .73) report in the current sample was good.

**Dyadic relationship quality.** Dyadic relationship quality was conceptualized as a multifaceted construct that included relationship satisfaction, ability to resolve conflict, and coparenting conflict. Each of these dimensions of relationship quality have been found to be important markers of dyadic relationship quality and to be related to parenting (see Cummings & Davies, 2011; McHale & Lindahl, 2011). Both mothers and MCPs completed all measures.

The Quality of Marriage Index (QMI) was used to assess relationship satisfaction (Norton, 1983). The QMI is a six-item measure of global marital satisfaction that was adapted for the current study to assess relationship satisfaction as opposed to martial satisfaction. In the current study, respondents indicated their agreement with each of five items on a 5-point Likert-type scale from 0 (strongly disagree) to 4 (strongly agree) and rated one global item, “Everything considered, how would you rate the quality of your partnership” on a 10-point Likert-type scale from 1 (being very poor) to 10 (being very good). For the current study, only the five items on the 5-point Likert scale were used. The QMI has well-established psychometric properties across studies (for a meta-analysis, see Graham, Diebels, & Barnow, 2011) as well as specifically with African American couples (e.g., α = .94–.96; Fincham, Ajayi, & Beach, 2011). Internal consistency for both mother (α = .95) and MCP (α = .94) reports on the five-item QMI for the current sample was excellent.

To assess disagreement resolution, we used items from the National Survey of Families and Households (Brown, 2000, 2003). Four items assessing the frequency of a response to disagreement with the partner were rated on a 5-point scale from 0 (never) to 4 (always): “Just keep your opinions to yourself”; “Discuss your disagreements calmly”; “Argue heatedly or shout at each other”; and “End up hitting each other or throwing things at each other.” The first item was not significantly correlated with the other three items and thus was dropped from analyses. The third and fourth items were reverse coded so that high values correspond with reports of low frequencies of shouting, hitting, or throwing things at one another. Therefore, higher scores indicated more adaptive disagreement resolution. Internal consistency for both mother (α = .73) and MCP (α = .57) were moderate.

Both conflict about child rearing specifically in front of the child and general coparenting conflict about child rearing not specifically in front of the child were assessed. Coparenting conflict about child rearing in front of the child was assessed by mother and MCP report on the O’Leary-Porter Scale (OPS; Porter & O’Leary, 1980). The OPS is composed of 10 items that mothers/MCPs rated on a 5-point Likert scale ranging from 0 = Never to 4 = Very Often, with higher scores indicating more mother–partner coparenting conflict in front of the child. The scale primarily measures the amount of verbal aggression, along with one item assessing physical aggression, between the mother and partner in front of the child (Porter & O’Leary, 1980). When used with married couples, it has a test–retest reliability of .96 and an internal consistency of .86 (Porter & O’Leary, 1980). Internal consistency for both mother (α = .78) and partner (α = .81) report in the current sample was good. The scale was reverse scored such that higher values reflected lower levels of conflict.

Two items from the Parenting Convergence Scale (PCS; Ahrons, 1981) were used to assess general coparenting conflict from the perspective of the mother and MCP: “When you and (MCP/custodial parent) talk about how to raise this child, how often is the conversation hostile or angry?” and “Do you and this other person (MCP/custodial parent) have big differences of opinion as to how to raise this child?” The items were rated on a (1) none/very little to (5) a lot Likert scale, with higher scores indicating more coparenting conflict. They were moderately correlated (mother report: r = .46, p < .001; MCP
report: \( r = .33, p < .01 \), suggesting the items are measuring a common factor about general coparent conflict about child rearing. Both items were reverse scored so that higher scores indicated less conflict.

**Firm control parenting.** The Firm versus Lax control subscale of the 30-item version of the Children’s Report of Parental Behavior Inventory (CRPBI-30; Schuldeman & Schuldeman, 1988) was used to assess maternal and MCP parenting. Adolescents indicate whether each parent/coparent is “like,” “somewhat like,” or “not like” such statements as “[my mother/mother’s partner] insists that I must do exactly as I am told” and “[my mother/mother’s partner] does not pay much attention to my misbehavior.” This factor is composed of items assessing the degree to which the parent consistently regulates and monitors the child’s activities and conduct and is coded such that higher scores indicate more firm control parenting. The Firm/Lax factor has been shown to be internally consistent and convergent and discriminant validity has been well demonstrated in prior research (Fauber, Forehand, Thomas, & Wierson, 1990; McKee, Jones, Forehand, & Cuellar, 2013).

Prior research has demonstrated that firm control parenting is a difficult construct on which to obtain adequate internal consistency with samples that include cohabiting families. For example, Dunifon and Kowaleski-Jones (2002) reported alpha coefficients below .33 across several years of assessment. Similar to previous findings, the Firm/Lax factor for the current sample also demonstrated poor internal consistency (mother \( \alpha = .53 \); MCP \( \alpha = .61 \)). As a consequence, an exploratory factor analysis using maximum likelihood estimation and varimax rotation (constrained to fit on one factor) in SPSS 21.0 was conducted on adolescent report of maternal firm/lax control to examine factor loadings. Of the 10 items, only four had factor loadings above an absolute value of .25 and thus the remaining six items were dropped. The items that were retained (e.g., “sticking to rules instead of allowing a lot of exceptions”) had factor loadings between .40 and .84. A confirmatory analysis using maximum likelihood estimation, as implemented by Mplus 6.1 software (Muthen & Muthen, 2010), was conducted on adolescent report of MCP firm control parenting and demonstrated good fit, \( \chi^2(2, N = 117) = 4.65, p > .05 \), root mean square error of approximation (RMSEA) = .10, Comparative Fit Index (CFI) = .97, standardized root mean square residual (SRMR) = .03, confirming the factor structure. Adolescents’ reports of their mother’s and MCP’s firm control after the items were dropped demonstrated adequate internal consistency: .65 and .73, respectively.

### Data Analytic Plan

**Preliminary analysis of demographic and study variables.** Missing data ranged by reporter with no missing data for mother-report variables, 2.8% missing for adolescent-report variables, and 24.8% for MCP-report variables. Little’s Missing Completely at Random test was conducted for all main study variables with missing data and was nonsignificant, \( \chi^2(8, N = 124) = 12.42, p > .10 \), suggesting that the data are missing completely at random. Therefore, when conducting preliminary analyses prior to model estimation in Mplus, missing data were treated as ignorable (missing completely at random) and multiple imputation in SPSS version 21.0 was used for inclusion of all available data. Pooled statistics are reported for preliminary results conducted in SPSS.

Correlations between primary outcome variables (i.e., relationship quality and firm control parenting) and continuous demographic/control variables were examined. The effect of categorical demographic variables (e.g., child gender) on the primary outcomes was examined using analysis of variance. The correlations among the primary study variables also were examined.

**Actor–partner interdependence model.** Based on hypotheses and the dyadic data available, we used the APIM to examine relations between parental mindfulness, perceptions of dyadic relationship quality, and parenting. Research using multiple informants of relationship quality is limited (i.e., Barr & Simons, 2012; Schrodt, 2011), and the current study, to the best of the authors’ knowledge, is the first study to test an APIM examining coparenting relationship quality in low-income cohabiting Black stepfamilies (i.e., mothers and MCPs). As recommended by Kenny et al. (2006), structural equation modeling (SEM) was used in the current study to test the APIM. All estimates of actor and partner effects were generated while...
accounting for all other effects in the model (Cook & Kenny, 2005), including effects due to mutual influence (i.e., by estimating the covariances).

**Evaluation of the structural APIM.** A confirmatory factor analytic measurement model was estimated prior to estimating structural models in order to test the fit of the factor structures under investigation and to determine the factor loadings for each indicator. SEM using full information maximum likelihood estimation, as implemented by Mplus 6.1 software (Muthen & Muthen, 2010), was used to test the APIM depicted in Figure 1. The following fit statistics were used to evaluate model fit: RMSEA (.08 acceptable, .05 excellent), CFI (>0.90 acceptable, >0.95 excellent), and SRMR (<0.08 acceptable, <0.05 excellent; Browne & Cudeck, 1992; Hu & Bentler, 1999). Missing data were treated as ignorable (missing completely at random), and full information maximum likelihood estimation techniques were used for inclusion of all available data.

**Secondary Analyses.** The model presented in Figure 1 proposes that parental mindfulness has an indirect association with firm control parenting through the dyadic relationship quality. Dumas (2005) has proposed that mindfulness may be directly related to parenting and some (Williams & Wahler, 2010), but not all (Parent et al., 2010), evidence supports this hypothesis. To examine if there was a direct association of mindfulness and parenting, a nested model comparison was conducted using a chi-square difference test. The nested model compared the primary model (see Figure 1) with a model that added direct paths from maternal and MCP mindfulness to maternal and MCP firm control parenting. To test the significance of the indirect effect from parental mindfulness to parenting through dyadic relationship quality, the Model Indirect command in Mplus was used to calculate a standardized indirect effect parameter and bias-corrected bootstrap confidence interval. As an effect size of the indirect effect, the ratio of the indirect to the total effect is reported (ab/c; Preacher & Kelley, 2011).

**Results**

**Preliminary Analyses**

Descriptive data and bivariate correlations among the primary study variables are presented in Table 1. In regard to demographic variables, the following variables were not related to the primary outcome variables: mother or MCP education, relationship length (coded as established [≥13 months] or new [≤12 months]), child gender, family income, maternal age, MCP age, and adolescent age. Therefore, none of the demographic variables were controlled for in the primary analyses.

The correlations among the primary study variables suggest that mindfulness of each adult was associated with multiple indicators of the

<table>
<thead>
<tr>
<th>Variables</th>
<th>M (SD)</th>
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<th>6</th>
<th>7</th>
<th>8</th>
<th>9</th>
<th>10</th>
<th>11</th>
<th>12</th>
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</thead>
<tbody>
<tr>
<td>1. Mindfulness (M)</td>
<td>12.30 (2.82)</td>
<td>.09</td>
<td>.28**</td>
<td>.13</td>
<td>.31**</td>
<td>.12</td>
<td>.33**</td>
<td>.14</td>
<td>.19**</td>
<td>.20</td>
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<td>.12</td>
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<td>2. Mindfulness (MCP)</td>
<td>12.64 (2.31)</td>
<td>—</td>
<td>.23**</td>
<td>.39*</td>
<td>.14</td>
<td>.24*</td>
<td>.09</td>
<td>.11</td>
<td>.13</td>
<td>.22**</td>
<td>—</td>
<td>.06</td>
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<tr>
<td>3. QMI (M)</td>
<td>15.31 (4.87)</td>
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<td>.37**</td>
<td>.23**</td>
<td>.23*</td>
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<td>4. QMI (MCP)</td>
<td>16.87 (3.72)</td>
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<td>5. OPS (M)</td>
<td>29.08 (6.92)</td>
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<td>6. OPS (MCP)</td>
<td>28.57 (6.95)</td>
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<td>7. PCS Conflict (M)</td>
<td>6.42 (1.72)</td>
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<td>.48**</td>
<td>.33**</td>
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<td>.15</td>
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<td>9. DR (M)</td>
<td>8.74 (2.23)</td>
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<td>10. DR (MCP)</td>
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<td>—</td>
</tr>
<tr>
<td>11. Firm Parenting (A-M)</td>
<td>5.62 (1.92)</td>
<td>—</td>
<td>—</td>
<td>—</td>
<td>.45**</td>
<td>—</td>
<td>—</td>
<td>—</td>
<td>—</td>
<td>—</td>
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<td>—</td>
</tr>
<tr>
<td>12. Firm Parenting (A-MCP)</td>
<td>3.33 (2.36)</td>
<td>—</td>
<td>—</td>
<td>—</td>
<td>—</td>
<td>—</td>
<td>—</td>
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</tr>
</tbody>
</table>

*Note.* N = 121; M = mother report; MCP = male cohabiting partner report; A-M = adolescent report on the mother; A-MCP = adolescent report on the male cohabiting partner; QMI = Quality of Marriage Index; OPS = O’Leary Porter Scale; PCS = Parenting Convergence Scale conflict subscale; DR = disagreement resolution.

*p < .05.  **p < .01.
dyadic relationship quality. Of note, the mean level of firm control parenting reported by adolescents for the MCP was only 60% of that for mothers (3.33 vs. 5.62), indicating that MCPs exhibited less firm control parenting than did mothers. All other variables had similar mean levels for mothers and MCPs.

**Primary Analyses**

**Evaluation of the measurement model.** In all models, the first indicator for each latent factor was set at 1.0 to establish the metric, and all factors were allowed to covary freely. Standardized factor loadings are reported. Inspection of the initial measurement model suggested a few areas for improving fit by freeing the error between pairs of indicators: (a) MCP report on the disagreement resolution and QMI total scale and (b) MCP and maternal report on the PCS conflict scale. The above pairings of correlated error were indicators of similar constructs as reported by the same family member or the same two items reported by the dyad. Therefore, there are substantive reasons that the above pairs would have correlated error. All factor loadings were significant, above .30, and are displayed in Figure 2. The final measurement model demonstrated excellent fit:

$$
\chi^2(17, N = \ldots) = 66.50, p = .02, \text{root mean square error of approximation} = .06, 95\% \text{ confidence interval} .03–.09, \text{Comparative Fit Index} = .92, \text{standardized root mean square residual} = .08.
$$

![Figure 2. Structural model of the influence of parental mindfulness on coparenting and parenting. M = mother report; MCP = male cohabiting partner report; Standardized coefficients are presented. *p < .05, **p < .01. QMI = Quality of Marriage Index; OPS = O'Leary Porter Scale; PCS_CON = Parenting Convergence Scale conflict subscale; DR = disagreement resolution. \( \chi^2(45, N = 121) = 66.50, p = .02, \text{root mean square error of approximation} = .06, 95\% \text{ confidence interval} .03–.09, \text{Comparative Fit Index} = .92, \text{standardized root mean square residual} = .08.\)
Table 2
Summary of Model Paths, Correlations, and Indirect Effects

<table>
<thead>
<tr>
<th>Outcome variable</th>
<th>β</th>
<th>95% CI</th>
</tr>
</thead>
<tbody>
<tr>
<td>Relationship quality (M)</td>
<td></td>
<td></td>
</tr>
<tr>
<td>Maternal mindfulness</td>
<td>.38**</td>
<td>.21–.56</td>
</tr>
<tr>
<td>MCP mindfulness</td>
<td>.19</td>
<td>-.03-.49</td>
</tr>
<tr>
<td>Relationship quality (MCP)</td>
<td></td>
<td></td>
</tr>
<tr>
<td>Maternal mindfulness</td>
<td>.23*</td>
<td>.02–.44</td>
</tr>
<tr>
<td>MCP mindfulness</td>
<td>.37**</td>
<td>.16–.59</td>
</tr>
<tr>
<td>Maternal firm parenting</td>
<td></td>
<td></td>
</tr>
<tr>
<td>Relationship quality (M)</td>
<td>.39*</td>
<td>.00–.78</td>
</tr>
<tr>
<td>Relationship quality (MCP)</td>
<td>-.37</td>
<td>-.78–.04</td>
</tr>
<tr>
<td>MCP firm parenting</td>
<td></td>
<td></td>
</tr>
<tr>
<td>Relationship quality (M)</td>
<td>.08</td>
<td>-.34-.52</td>
</tr>
<tr>
<td>Relationship quality (MCP)</td>
<td>-.16</td>
<td>-.64-.31</td>
</tr>
<tr>
<td>Correlations</td>
<td></td>
<td></td>
</tr>
<tr>
<td>Mindfulness (M)–Mindfulness (MCP)</td>
<td>.08</td>
<td>-.11-.27</td>
</tr>
<tr>
<td>Parenting (M)–Parenting (MCP)</td>
<td>.49**</td>
<td>.34-.65</td>
</tr>
<tr>
<td>Relationship (M)–Relationship (MCP)</td>
<td>.71**</td>
<td>.51-.90</td>
</tr>
<tr>
<td>Indirect Effect</td>
<td></td>
<td></td>
</tr>
<tr>
<td>Mindfulness (M)–Parenting (M)</td>
<td>.15</td>
<td>-.02–3.2</td>
</tr>
</tbody>
</table>

Note. N = 121; M = mother report; MCP = male cohabiting partner report.
* p < .05. ** p < .01.

Discussion

Low-income cohabiting Black stepfamilies with a single mother and an MCP represent a family structure in which many children grow up. Understanding how individual and dyadic relationships in these cohabiting stepfamilies are associated is important for promoting children’s healthy psychosocial adjustment. In particular, identifying individual and dyadic variables that relate to parenting can lead to strategies that protect children living in high-risk environments. The current study drew from family systems theory (Cox & Paley, 1997) and used an APIM methodological framework (Cook & Kenny, 2005) to examine the association of individual (i.e., parental mindfulness) and dyadic (i.e., relationship quality) subsystems and their link to one critical parenting behavior: firm control. Our findings provided partial support for the hypotheses derived from the model we tested: Each member of the dyad’s mindfulness was related to his or her own perceptions of relationship quality and those of the partner. However, only maternal perceptions of relationship quality were related to her own parenting. Finally, maternal mindfulness (and therefore not displayed in Figure 2), the MCP’s mindfulness was positively related to the mother’s perceptions of the relationship quality (p = .09). However, MCP perceptions of relationship quality were not related to the MCP’s or the mother’s firm control parenting. It should be noted that mother and MCP reports of their own mindfulness were not correlated whereas their reports of relationship quality and the adolescent report of mother and MCP parenting were correlated.

Secondary analysis. When direct paths between maternal and MCP mindfulness and firm control parenting were added to the model, no significant direct effect paths emerged. Model fit was not significantly improved with the inclusion of these paths, \( \Delta \chi^2(4) = 8.37, p > .05 \). Thus, the first model, without direct effects, was adopted based on parsimony, overall fit to the data, and theoretical interpretability. Furthermore, the indirect effect of maternal mindfulness to maternal firm control parenting, through maternal perceptions of dyadic relationship quality, accounted for 70% of the total effect (p = .08).

Evaluation of the structural APIM. The results of the structural model are depicted in Figure 2. The proposed model demonstrated acceptable fit, \( \chi^2(45, N = 121) = 66.50, p = .02 \), RMSEA = .06, 95% CI .03-.09, CFI = .92, SRMR = .08. Model statistics are presented in Table 2. Maternal mindfulness was significantly related to both her own (i.e., an actor effect) and the MCP’s (i.e., a partner effect) perceptions of relationship quality such that higher levels of maternal mindfulness were related to perceptions of a higher-quality dyadic relationship. In turn, maternal perceptions of relationship quality were related to maternal (i.e., actor effect), firm control parenting: Higher relationship quality as perceived by the mother was related to higher levels of firm control parenting reported by the adolescent. The MCP’s mindfulness was related to his own (i.e., actor effect) perceptions of relationship quality such that higher levels of MCP mindfulness were related to perceptions of a higher quality dyadic relationship. Similar to the mother, but not reaching traditional levels of statistical significance.

\( 121 = 22.04, p > .15, \text{RMSEA} = .05, 95\% \text{CI} .00-.10, \text{CFI} = .98, \text{SRMR} = .07. \)
was indirectly, but not directly, related to maternal parenting practices through her perceptions of dyadic relationship quality. The results indicate that mindfulness is related to relationship quality. Of importance, these findings extend the existing research in three ways. First, the association between one’s mindfulness and one’s perception of relationship quality was demonstrated for the first time with low-income cohabiting Black couples. Second, partner effects were accounted for by using data analytic strategies based on APIM (Cook & Kenny, 2005). Third, both actor and partner effects were estimated and shown to be mutually influential when examining the association of mindfulness and perceptions of relationship quality. While the present model is cross-sectional and does not address causality, results indicate that individual mindfulness is related to relationship satisfaction within and across both members of the dyad. Present-moment focus and low distraction, key components of mindfulness, have been associated with more positive communication and less distress in dyadic interactions (Barnes et al., 2007). Thus, mindfulness may relate to relationship quality by bolstering effective communication in dyadic interactions and/or through broader stress reduction. Alternately, increased relationship quality may result in increased mindfulness; future research using longitudinal designs will be needed to ascertain the directionality of effects.

Partially supporting hypotheses, maternal perceptions of relationship quality were related to maternal parenting, as measured by firmness of control. This finding is congruent with the spillover hypothesis and with previous research with Black single mothers (Parent et al., 2013; Shook et al., 2010; Sterrett, Jones, Forehand, & Garai, 2010) showing that a higher quality relationship as perceived by the mother is related to more positive parenting (e.g., firm control). In contrast, prior studies with families headed by single Black mothers have not examined the reciprocal influences of actor and partner relationship quality with parenting. The current study failed to find support for either of these associations.

One hypothesis for the absence of a link between MCP perceptions of relationship quality and MCP firm control parenting is that MCPs are not equally invested in all aspects of the family (Kelly Raley & Wildsmith, 2004). For example, MCPs may be more invested in the dyadic relationship than parenting. Differential investment in these two components of family life may diminish associations between the MCP’s perceptions of the adult relationship quality and his own parenting. It is also important to note that the MCP’s role in different family subsystems may be, at least in part, determined by how a mother defines her male partner’s role. For example, his main role may be to meet her relationship needs and/or contribute to completing general household responsibilities (e.g., grocery shopping, cleaning) rather than setting limits on an adolescent age child. Limit setting with an adolescent is a difficult task and a mother may believe it is her responsibility, leading to maternal gatekeeping in this area of parenting (see Kelly Raley & Wildsmith, 2004; Schoppe-Sullivan, Brown, Cannon, Mangelsdorf, & Sokolowski, 2008). Future research should examine the investment hypothesis by directly assessing maternal and MCP beliefs about the MCP’s parenting role, her gatekeeping behavior, and MCP involvement in and commitment to the dyadic relationship and parenting.

Our secondary analyses provided support for an indirect, but not direct, association of maternal mindfulness and her firm control parenting, which is consistent with earlier research with a predominately White sample (Parent et al., 2010). Substantial research in the family literature indicates that individual (e.g., depressive symptoms) and dyadic (e.g., marital satisfaction) level variables are interconnected and influence parenting (Cummings & Davies, 2011). The current findings suggest that parental mindfulness needs to be considered in the context of dyadic relationships among adults when considering how this variable is associated with firm control parenting.

It is important to note that we focused on only one aspect of parenting: firm control. As we have pointed out, this is a critical parenting practice, especially for children living in high-risk environments. And, as our findings indicate, this parenting variable is linked to a mother’s mindfulness through dyadic relationship quality with the MCP. However, other parenting practices (e.g., psychological control,
warmth/support) and other behaviors that constitute involvement with the adolescent (e.g., helping with homework, see Forehand et al., 2014) and in the family (e.g., cleaning, shopping, see Reid, Golub, & Vanzan, under review) may have different associations with mindfulness and with relationship quality for the mothers and MCP.

There are several limitations of the current study that should be noted. First, the data are cross-sectional, raising questions about the direction of causal effects and temporal precedence that are better addressed by longitudinal designs. As a consequence, caution should be used when interpreting causal pathways in the current model and future research examining similar questions should use longitudinal designs. Second, we used an abbreviated measure of mindfulness that assessed self-appraisal of acting with awareness in general. Other components of mindfulness (e.g., nonjudging of inner experience) or mindfulness specifically in dyadic relationship or parenting interactions could lead to different findings. In many ways the current study of mindfulness can be viewed as exploratory because it moves the field into examining not only partner effects but also to a subset of cohabiting families: low-income Black stepfamilies. Third, although several aspects of dyadic relationship quality were assessed in the current study, other important aspects of relationship quality were not assessed, such as parenting practices congruence, emotional support for coping with parenting stress, and mother–MCP communication quality. Future research would benefit from a more comprehensive multidimensional assessment of dyadic relationship quality. Fourth, the original 10 items of the Firm versus Lax Control parenting scale failed to demonstrate adequate internal consistency for adolescent report on mothers and MCPs. This raises the issue of whether parenting scales such as the CRPBI are appropriate for urban low-income cohabiting Black stepfamilies. Through factor analysis, a 4-item scale was identified that had adequate internal consistency for both adults; nevertheless, future research should focus on developing and validating parenting measures for samples such as the one examined in this study. In addition, other aspects of parenting (e.g., warmth) should be examined in future studies. Fifth, the current study examined the hypothesized model among a highly specific subsample of the population, which limits generalizability of findings to the broader population. Future research should examine the hypothesized model among diverse samples in order to enhance both the breadth and confidence in findings as well as the broad scale generalizability of findings to families and children. Nevertheless, as we noted earlier, we believe all components of our model are particularly important for the families we studied.

The current study also had several significant strengths that should be noted. First, multiple informants were used to assess constructs in the model. Maternal and MCP reports on relationship quality and youth report of maternal and MCP firm control parenting increase the confidence in the findings by reducing potential “reporter effects.” Second, the use of statistical procedures that model measurement error was an additional strength of the current study. Third, the current study is the first to examine the association between mindfulness and dyadic relationship quality using SEM and an APIM to account for the dependency between romantic partners’ behaviors. Fourth, the current study is also the first to examine the association between dyadic relationship quality and parenting using an APIM. Fifth, both maternal and MCP perceptions of relationship quality were included. Previous research with Black single-mother families has included only maternal perceptions of relationship quality (Jones et al., 2005). Finally, the current study is the first to examine the associations among parental mindfulness, dyadic relationship quality, and parenting in a single model.

The clinical implications of this study are important to consider for prevention and intervention programs targeting low-income cohabiting Black families. First, our findings suggest that cohabiting male partners play a role in low-income Black stepfamilies: Their individual mindfulness is associated with dyadic perceptions of relationship quality. As such, it may be beneficial to include MCPs in family-based interventions for cohabiting stepfamilies. Second, each partner’s mindfulness is related both to individual perception of relationship quality and to partner perceptions, with maternal mindfulness showing the strongest association with the MCP perception of relationship quality. Our findings are congruent with the view of mind-
fulness as a transdiagnostic treatment process (Baer, 2007; Barlow et al., 2011) that can influence multiple personal and interpersonal problems: Mindfulness-based interventions (e.g., Mindfulness-Based Relationship Enhancement; Carson, Carson, Gil, & Baucom, 2004; Mindfulness-Based Stress Reduction; Kabat-Zinn, Lipworth, & Burney, 1985), even when conducted with only one member of the dyad, may influence relationship satisfaction of both members of the dyad and potentially reduce negative partner interactions. In turn, and of importance for adolescents residing in low-income cohabiting Black stepfamilies, maternal perceptions of a higher quality dyadic relationship may enhance her firm control parenting. As a consequence, it is possible that inclusion of a mindfulness component and relationship-building skills into family-focused interventions will improve at least one important component of maternal parenting practices: firm control. Although implementation of clinical recommendations based on the current findings would be premature, the findings provide a first step toward building a foundation of research to inform the development of mindfulness-based programs for low-income cohabiting Black stepfamilies aimed at enhancing interparental relationship quality and parenting through increasing maternal and potentially MCP mindfulness.

References


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