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## GRANDPARENTAL SOCIAL SUPPORT AND COMMUNICATION WITH PEERS AS PREDICTORS OF RESILIENCE IN ADOLESCENTS FROM SINGLE-MOTHER FAMILIES

In the research paradigm focused on the stress-loaded functioning of single-mother families it has been observed that the efficiency of coping with stress depends on many factors, among which social support is one of the most important. Research results show that a higher level of social support is usually associated with more positive indicators of the functioning of an individual. On the basis of this assumption it was expected that social support provided by grandparents would be a significant predictor of mental resilience in adolescent grandchildren from single-mother families – also in conditions differentiated by household type: living with or without grandparents. Studies performed on a sample of 278 adolescents with the *Berlin Social Support Scales* (BSSS), the *Adolescent–Peer Communication Scale*, and the *Resilience Measurement Scale* (SPP-18) have shown that grandparental social support is not the only predictor of adolescents' functioning.

**Keywords:** social resources; resilience; single-mother family.

### INTRODUCTION

Among the sociocultural changes affecting contemporary families, one of the most marked tendencies and at the same time one of those that may lead to the weakening of family bonds is the growing number of divorces and separations (Kitanović, 2015). Family breakdown is a particularly stressful event, and its consequences significantly affect all areas of life of the participants in the family

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system, particularly children and youth. The growing number of divorces calls for more attention to the consequences they lead to (Dudziak, 2012).

The achievement of an optimal level of psychosocial functioning is an important indicator of adolescents' efficiency in overcoming the stress caused by father's absence from the family. Research reports on individuals coping with difficult experiences show that there are many personal and social resources that enable better adaptation to changed conditions (Heszen, 2013). These resources include self-esteem and self-efficacy, received social support, or sense of humor (Basińska, 2009). It should be stressed that the resources which turn out to be important in coping with difficult family situations are social support and positive relations with peers, since they are associated with the level of satisfaction of the individual's needs – such as approval, sense of belonging, or sense of security – by significant others. Given that the number of divorces has been growing year by year in Poland, and that, consequently, the number of incomplete families has been increasing, it can be assumed that many children and adolescents need other people's help after the breakdown of their parents' relationship (Kozerska, Miszczak, & Napora, 2015).

### **Social support**

Social support is an interpersonal transaction that encompasses emotional support, material help, and informational support and that takes place inside or outside the family. It contributes to the growth of personal resources used in the performance of life tasks, which includes increasing positive attitudes towards others. Social support is a resource that facilitates coping with stress in various life domains (Smoktunowicz, Cieślak, & Żukowska, 2013). Its components are positive thinking, self-confidence, access to support from family and friends (Rose & Fatout, 2003), and emotional intimacy with family members (Napora, 2017).

Social resources are also the external opportunities available, such as social network, attachment relationships in the family, or friends (Falewicz, 2016). The inclusion of grandparents in the process of child care and upbringing frequently results in the grandparents replacing parents, becoming the children's playmates and life mentors (Brzezińska, 2000). Relations with grandparents make it easier for young people to acquire skills, mainly patience, responsibility and persistence, honesty and practical wisdom, as well as the ability to cope with challenges in difficult life situations (Kukołowicz, 2001). Empirical studies on intergenerational relationships have revealed that close family members, including

grandparents, contribute to a better quality of family life in many ways – mainly by ensuring financial and emotional support (Napora, Kozerska, & Miszczak, 2014), supporting good physical and mental state, and taking care of family members when this is needed. Marks and McLanahan (1993) observed that single mothers more often interacted with their parents and siblings than mothers living in relationships. The social support thus obtained, mainly instrumental, is conducive to greater engagement in childcare and household duties compared to mothers receiving support from their husbands. At this point, it is worth citing the results of research based on the assumption that the evaluations of relations between grandparents and grandchildren in terms of frequency and intimacy are differentiated by the structure of young people's family of origin and by whether the grandparents are relatives on the mother's or the father's side). Measurement results (Napora, 2016a) not only confirmed this expectation but also revealed significant differentiation of evaluations according to grandparents' sex and grandchildren's phase of life (adolescence). The analysis of the collected research material supported the conclusion that the frequency of contacts between grandparents and grandchildren is directly related to the intimacy of the relationship, regardless of the subjects' phase of life.

Grandchildren's emotional intimacy with grandparents is associated with a lower number of depressive symptoms (Ruiz & Silverstein, 2007) and has positive influence on the cognitive development of children and young people (Zawadzka, 1998). It is also conducive to the stability of family relationships and to the increase in satisfaction in grandparents (Brzezińska, 2000). Grandparental support supplements parental care and contributes to an increase in grandchildren's well-being. Research shows that single parents' children who lived together with their grandparents in the same household graduated from universities or colleges more often compared to those who had never lived with relatives more distant than parents or siblings (Aquilino, 1996).

### **Peer relations**

Peer relations constitute an important social resource for young people (Goldstein, Davis-Keen, & Eccles, 2005). They are considered to be assistance available in difficult situations (Grygiel, 2015) and the main source of support (Stach-Hejusz, 2011). Help and support from peers leads to the satisfaction of the individual's psychological needs (Oleszkowicz & Senejko, 2013) – success, belonging, acceptance and recognition, and playing roles (Sęk, 2000). It contributes to the development of the ability to interpret and communicate experiences (Ryś,

2012). Experiences with peers make it possible to acquire many skills as well as develop attitudes and behaviors that influence social adaptation (Berns, 2007). Peer acceptance has a much stronger effect on young people's social functioning than parental influence does.

In adolescence, communication is one of the most important developmental factors for individuals, because it gives form to identity and inspires taking up life roles (Mendecka, 2003). It plays an important role particularly in the period of growing up, when the process of the teenager's separation from the family takes place (Barnes & Olson, 1985) and when the influence of the peer group becomes more intensive. Openness in communication is the basis of good relations with others and leads to the formation of bonds that allow for understanding and being understood by others (Napora & Pękala, 2014). Communication is important also because of the problems of adolescence, which adolescents more easily solve with peers than with parents (Harris, 1998). Dependence on peers is a consequence of the desire to gain autonomy and freedom from one's parents.

### **Resilience**

Resilience is understood as a relatively stable disposition that determines flexible adaptation to the changing demands of life (Ogińska-Bulik & Juczyński, 2011) and as a process of effectively coping with negative life events (Juczyński & Ogińska-Bulik, 2011). Resilience as a trait and as a process are not understood as identical phenomena. Their determinants, their occurrence, and the roles they play differ significantly (Nadolska & Sęk, 2007). Their common denominator is the view of resilience as a characteristic that enables a person to earn the optimal standard of living, to maintain efficiency, and to recover balance despite failures and difficulties (Heszen, 2013). This research perspective enables multifaceted exploration of the concept of resilience, especially in the context of the individual's ability to cope with adversities and overcome stress, understood as the outcome of the influence of many factors within the community ecosystem in which the individual functions (Luthar, Cicchetti, & Becker, 2000).

According to researchers, what is of great significance for resilience is attachment. In a study of grandchildren aged below 20 for whom grandparents acted as caregivers, normal attachment to grandparents was found to have an impact on the development of strength and resilience in grandchildren (Sands, Glen, & Shin, 2009). The interactions that the individual engages in in the family and the interpersonal relations that develop thanks to these interactions may be an opportunity to gain new experiences (Tyszkowa, 1990). This suggests that, as

children, resilient individuals had at least one significant other in their life who was a role model for them (Winfield, 1994).

Protective factors can be defined as specific characteristics or situations that are necessary for the development of resilience (Dyer & McGuinness, 1996). The factors that scholars mention as increasing the level of resilience in the family include close and stable relationship with a caregiver, attachment to and support from a significant other who is a role model, positive family atmosphere, and a low level of conflict between family members (Konaszewski & Kwadrans, 2017). Another factor is perceived support from friend and peer groups. The large number of protective factors may support the development of resilience and self-confidence in young people, as well as the experience of positive emotions and better adjustment.

In the research paradigm pertaining to the stress-burdened functioning of the single-mother family, it is pointed out that the effectiveness of coping depends on many factors, social resources being among the most important ones. The size of these resources is a subject of debate, and it is obvious that various forms of social support (instrumental support, living together with family members) are among the resources available to many single-mother families. The results of the existing studies have shown that higher social support is associated with more positive indicators of individual functioning (Wei et al., 2012). Young people who receive support from their grandparents have fewer problems adapting to the situation connected with their parents' separation (Ruiz & Silverstein, 2007).

The influence of social support on the individual's psychological functioning still remains a subject of academic debate (Janowski, Tatala, Jedynak, Księżopolska, & Głowacka, 2016). A particularly unexplored area is the relations between grandparental social support as well as communication with peers and resilience in adolescents from single-mother families. There is also a scarcity of studies addressing the role of social support in the development of resilience in young people from single-mother families, taking into account the generational composition of the family household in which the young people live – namely, analyzing the influence of living together with grandparents or the consequences of the lack of this kind of community. When addressing these issues, I expected that adolescents from single-mother families living with grandparents would differ in terms of resilience, social support, and communication with peers from adolescents from single-mother families living without grandparents. I also assumed that adolescents from single-mother families living with grandparents would more often experience higher grandparental support (while exhibiting lower need for support and lower support seeking) and that they would rate the

openness of their communication with peers higher. At the same time, I expected that more significant predictors of resilience would be observed in the group of adolescents from single-mother families living with grandparents than in the group of adolescents from single-mother families living without grandparents.

### OBJECTIVE AND METHODOLOGY

The aim of the study was to compare adolescents from single-mother families living together with grandparents and in adolescents from single-mother families living without grandparents in terms of social and personal resources, as well as to identify the predictors of resilience in adolescents from single-mother families differentiated by household type: with or without grandparents. I formulated the following hypotheses:

H 1 – adolescents from single-mother families living together with grandparents will rate their own resilience, grandparental support, and open communication with peers significantly higher than adolescents living without grandparents.

H 2 – adolescents from single-mother families living together with grandparents will exhibit significantly lower need for support and support seeking compared to young people from single-mother families living without grandparents.

H 3 – significantly more significant predictors of resilience will be observed in adolescents from single-mother families living together with grandparents than in those living without grandparents.

### Participants

The participants in the study were 278 adolescents. All of them came from families of single mothers in different life situations, connected with marital status (divorced, widows, separated). I divided the sample according to the type of single-mother family household: into the group of young people living together with grandparents ( $n = 136$ , 49%) and the group living without grandparents ( $n = 142$ , 51%). The participants' mean age was 16.67 years (Min. = 13, Max. = 19). The group living with grandparents consisted of 55 women (40.44%) and 81 men (59.55%), while in the group without grandparents there were 85 women (59.85%) and 57 men (40.14%).

The groups were similar in terms of place of residence: the group living with grandparents consisted of 75 subjects (55.1%) living in the country and 61 (44.9%) living in towns and cities; the group living without grandparents con-

sisted of 73 (51.4%) subjects living in the country and 69 subjects (48.6%) living in towns and cities. The adolescents had a similar number of siblings (the group living with grandparents:  $M = 1.42$ ,  $SD = 0.92$ ; the group living without grandparents:  $M = 1.47$ ,  $SD = 0.94$ ), but they were usually only children, and the largest number of siblings was three. The subjects were similar in terms of the time of father's absence from the family (in the group living with grandparents:  $M = 7.37$ ,  $SD = 3.77$ ; the group living without grandparents:  $M = 7.5$ ,  $SD = 3.71$ ). The shortest time of father's absence was three years and the longest time was 16 years.

### Procedure

The selection of participants for the study was purposeful and based on two criteria: being a member of a single-mother family and being an adolescent. I conducted the study among adolescents from single-mother families from the Śląskie (Silesian), Łódzkie (Łódź), and Małopolskie (Lesser Poland) Voivodeships in Poland. The individuals who consented to participate in the study or whose mothers consented to their participation received a set of questionnaires together with instructions. The study was conducted on an anonymous and individual basis, without time limits. The participants could withdraw from the study at any time and with no consequences, which they had been informed about. The study was conducted from March to September 2016.

### Measures

*Berlin Social Support Scales* (BSSS) – adapted into Polish by Łuszczynska, Kowalska, Mazurkiewicz, and Schwarzer (2002) – are six independent scales, distinguishing: (1) perceived available support, (2) need for support, (3) support seeking, (4) actually received support, (5) protective buffering support, and (6) satisfaction with support. The names of scales correspond to the names of these variables: *Perceived Available Support* – the scale measures the perceived availability of help from others; this kind of help has direct influence on health and well-being regardless of situational factors (8 items); *Need for Support* – this scale measures the need to use support in a stressful situation (4 items); *Support Seeking* – this scale measures the seeking of help from other people (5 items); *Actually Received Support* – this scale parametrizes perceived help provided by others, reducing the sense of danger in stressful situations (15 items); *Protective Buffering Support* – this scale measures support defined as protecting the close



ones from bad news (6 items). The last scale in the set – *Satisfaction With Support* – parametrizes the measurement of that satisfaction. The respondent rating his or her attitude to the items on a 4-point scale (from 1 – *strongly disagree*, to 4 – *strongly agree*). Scores are computed for particular scales: the higher the score, the higher the perceived social support.<sup>1</sup> The values of Cronbach's  $\alpha$  for particular scales ranged from .59 to .89 and were similar to the values obtained by the authors of the scales (Łuszczynska et al., 2006).

Communication with peers was measured with the *Adolescent–Peer Communication Scale*, from the perspective of two subscales: Openness and Difficulties (Napora, 2017). Openness in communicating consists in sincere and straightforward self-disclosure and in confiding in others. The respondent uses a 5-point scale (1 – *completely untrue*, 5 – *completely true*) to rate the extent to which a given item is true about his or her peer. The overall score is computed as the sum of item ratings. The higher the respondent scores on the Openness scale, the more explicitly and openly he or she communicates with the peer. As regards communication difficulties, the lower the score, the more positive the adolescent's result. Cronbach's  $\alpha$  coefficient was .93 for the Openness subscale and .92 for the Difficulties subscale.

To measure resilience, I administered the *Resilience Measurement Scale* (SPP-18; Ogińska-Bulik & Juczyński, 2011). The scale enables the measurement of the general level of resilience; the respondent rates each item on a 5-point Likert scale (from 0 – *strongly disagree*, to 4 – *strongly agree*). The instrument is used to assess individual levels of four aspects of resilience: (1) optimistic attitude and energy, (2) perseverance and determination in action, (3) openness to new experiences and sense of humor, and (4) personal coping skills and tolerance of negative affect. The internal consistency coefficient (Cronbach's  $\alpha$ ) for the scale as a whole was .89. To measure sociodemographic variables, I administered a personal data survey to the adolescents taking part in the study. The survey contained questions about age, sex, place of residence, the number of siblings, and the time of father's absence.

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<sup>1</sup> After consulting and obtaining approval from prof. A. Łuszczynska, I used the following scales in my study of adolescents: *Perceived Available Support*, *Actually Received Support*, *Need for Support*, *Support Seeking*, and *Satisfaction With Support* (e-mail correspondence dated March 29, 2016).



## RESULTS

Statistical analyses were performed by means of the PQStat package, version 1.6.2.901. To test the impact of support and communication with peers on resilience, I applied multidimensional regression analysis. To compute the results concerning differences among adolescents from single-mother families depending on household type – with vs. without grandparents, with no homogeneity of variance, I performed the nonparametric Mann–Whitney *U* test. The results of the calculations are presented in Table 1.

Table 1

*Results of Mann-Whitney U Test for Differences in the Variables in Adolescents According to Single-Mother Family Household Type*

Variables	Group	<i>M</i>	<i>SD</i>	Min.	<i>Me</i>	Max.	<i>z/p</i>
General resilience	A	55.27	10.83	27.0	54.0	72.0	3.06***
	B	59.32	9.25	36.0	60.0	72.0	
Optimistic attitude and energy	A	15.28	3.17	4.0	15.0	20.0	3.55***
	B	16.65	2.58	10.0	17.0	20.0	
Perseverance and determination in action	A	15.44	3.17	5.0	15.0	20.0	2.91***
	B	16.47	2.76	10.0	17.0	20.0	
Sense of humor and openness	A	12.58	2.60	5.0	12.0	16.0	2.61***
	B	13.43	2.43	8.0	14.0	26.0	
Personal coping skills and tolerance of negative affect	A	11.94	2.84	3.0	12.0	16.0	3.27***
	B	12.99	2.57	5.0	13.0	16.0	
Perceived emotional support	A	13.87	2.00	8.0	14.0	16.0	1.66 n.s.
	B	14.31	1.81	10.0	15.0	16.0	
Perceived instrumental support	A	13.79	2.09	7.0	14.0	16.0	1.02 n.s.
	B	14.21	2.42	9.0	14.5	26.0	
Need for support	A	11.79	1.86	8.0	11.0	16.0	3.15***
	B	12.35	2.03	6.0	12.0	16.0	
Support seeking	A	15.08	2.92	7.0	15.0	20.0	2.08*
	B	15.65	3.05	5.0	16.0	20.0	
Received emotional support	A	29.89	5.76	12.0	31.0	36.0	0.88 n.s.
	B	30.36	5.86	12.0	32.0	36.0	
Received instrumental support	A	9.84	2.00	4.0	10.0	12.0	2.82***
	B	10.46	1.79	4.0	11.0	12.0	
Received informational support	A	6.30	1.60	2.0	6.0	8.0	3.70***
	B	6.93	1.36	2.0	7.5	8.0	
Satisfaction with support	A	3.42	0.74	1.0	4.0	4.0	2.90***
	B	3.63	0.68	1.0	4.0	4.0	
Openness in communicating with peers	A	38.04	7.63	19.0	38.0	50.0	2.21**
	B	40.33	6.85	23.0	39.0	50.0	
Difficulties in communicating with peers	A	24.31	8.71	10.0	24.0	45.0	0.33 n.s.
	B	24.18	10.96	10.0	22.5	48.0	

*Note.* A – adolescents from single-mother families living without grandparents; B – adolescents from single-mother families living with grandparents; \*  $p < .05$ ; \*\*  $p < .01$ ; \*\*\*  $p < .001$ ; n.s. – not significant.

The results of analysis presented in Table 1 show that the general level of resilience and the levels of its dimensions as well as the levels of some aspects of social support and adolescent–peer communication significantly differentiate the subjects from single-mother families when considered in terms of household type (with or without grandparents). Young people living with their grandparents are more resilient and experience more social support from them. Adolescents from this group of respondents rate their seeking of, need for, and satisfaction with support significantly higher. They also have better opinions about the instrumental and informational support they receive. Moreover, the study revealed statistically significant differences in open communication with peers. The observed differences turned out to be highly significant. In terms of the remaining variables, the adolescents do not differ significantly.

To estimate the predictions of resilience in adolescents with different household types (single-mother families living with or without grandparents) taken into account, I applied multidimensional regression models. The results are presented in the tables below.

Table 2

*Multidimensional Regression Model for the Prediction of Resilience in All Adolescents From Single-Mother Families (N = 278)*

Explanatory variables	<i>B</i>	$\beta$	<i>t</i>	<i>p</i>
Intercept	22.578		3.88	<b>.0001</b>
Perceived emotional support	1.228	0.230	3.60	<b>.0004</b>
Perceived instrumental support	0.008	0.001	0.02	.979
Need for support	-0.520	-0.100	-1.83	.067
Support seeking	0.654	0.191	3.62	<b>.0004</b>
Received emotional support	-0.540	-0.306	-3.91	<b>.0001</b>
Received instrumental support	0.753	0.141	1.52	.128
Received informational support	-0.116	-0.017	-0.21	.833
Satisfaction with support	1.040	0.072	0.82	.410
Openness in communicating	0.561	0.402	6.11	< <b>.0001</b>
Difficulties in communicating	-0.118	-0.114	-1.81	.070

*Note.* Correlation coefficient:  $R = .676$ ; Determination coefficient:  $R^2 = .457$ ; Adjusted determination coefficient:  $R^2 = .436$ ; Equation significance:  $F(10, 278) = 22.32$ ;  $p < .001$ ; Standard error of estimation: 7.679.

Regression analysis revealed that four of the variables entered into the regression model were significant in predicting adolescents' resilience: *perceived*

*emotional support* ( $p = .0004$ ), *support seeking* ( $p = .0004$ ), *received emotional support* ( $p = .0001$ ), and *openness in communicating with peers* ( $p < .0001$ ). All these factors except received emotional support were stimulators. This means that their increase causes an increase in adolescents' general resilience. These variables explain more than 45% of variance in the dependent variable. The remaining variance is explained by other factors, not included in this model.

Table 3

*Multidimensional Regression Model for the Prediction of Resilience in Adolescents From Single-Mother Families Living Without Grandparents (n = 142)*

Explanatory variables	<i>B</i>	$\beta$	<i>t</i>	<i>p</i>
Intercept	22.273		2.79	<b>.006</b>
Perceived emotional support	1.286	0.240	2.71	<b>.007</b>
Perceived instrumental support	0.201	0.039	0.37	.706
Need for support	-0.753	-0.131	-1.68	.095
Support seeking	1.121	0.307	4.30	<b>&lt; .0001</b>
Received emotional support	-0.386	-0.207	-1.85	.066
Received instrumental support	1.015	0.189	1.51	.132
Received informational support	0.361	0.053	0.46	.644
Satisfaction with support	-2.231	-0.153	-1.28	.200
Openness in communicating	0.416	0.296	3.40	<b>.0009</b>
Difficulties in communicating	-0.196	-0.159	-1.99	<b>.048</b>

*Note.* Correlation coefficient:  $R = .707$ ; Determination coefficient:  $R^2 = .501$ ; Adjusted determination coefficient:  $R^2 = .462$ ; Equation significance:  $F(10, 142) = 12.95$ ;  $p < .0001$ ; Standard error of estimation: 7.863.

In the group of adolescents from single-mother families living without grandparents, regression analyses identified the variables that turned out to be statistically significant for resilience. These are: *perceived emotional support* ( $p = .007$ ), *support seeking* ( $p < .0001$ ), as well as *openness* ( $p = .0009$ ) and *difficulties in communicating with peers* ( $p = .048$ ). All these factors – except difficulties in communicating with peers – are significant stimulators of resilience. The results suggest that their increase leads to an increase in the level of general resilience in this group of adolescents. The identified variables explained more than 50% of variance in the dependent variable; the remaining variance is explained by other factors, not included in this model.

Table 4

*Multidimensional Regression Model for the Prediction of Resilience in Adolescents From Single-Mother Families Living With Grandparents (n = 136)*

Explanatory variables	<i>B</i>	$\beta$	<i>t</i>	<i>p</i>
Intercept	28.301		3.29	<b>.001</b>
Perceived emotional support	1.035	0.202	1.92	<b>.055</b>
Perceived instrumental support	-0.292	-0.076	-0.78	.433
Need for support	-0.465	-0.102	-1.26	.207
Support seeking	0.274	0.090	1.04	.299
Received emotional support	-0.569	-0.360	2.97	<b>.003</b>
Received instrumental support	-0.180	-0.034	-0.23	.815
Received informational support	-0.904	-0.132	-1.10	.272
Satisfaction with support	5.675	0.415	3.02	<b>.003</b>
Openness in communicating	0.699	0.518	4.85	<b>.0001</b>
Difficulties in communicating	-0.196	-0.159	-1.99	<b>.048</b>

Note. Correlation coefficient:  $R = .675$ ; Determination coefficient:  $R^2 = .456$ ; Adjusted determination coefficient:  $R^2 = .413$ ; Equation significance:  $F(10, 136) = 10.49$ ;  $p < .0001$ ; Standard error of estimation: 7.085.

In the group of adolescents from single-mother families living with grandparents, regression analyses identified the variables that were significant in explaining resilience: *perceived* ( $p = .055$ ) and *received emotional support* ( $p = .003$ ), *satisfaction with support* ( $p = .003$ ) as well as *openness* ( $p = .0001$ ) and *difficulties in communicating with peers* ( $p = .048$ ). *Received emotional support* and *difficulties in communicating with peers* were destimulators, and their increase reduced general resilience in adolescents. These variables explain more than 45% of variance in the dependent variable. The remaining variance is explained by other factors, not included in the model.

## DISCUSSION AND CONCLUSIONS

The aim of the study was to compare adolescents from single-mother families living together with grandparents and adolescents from single-mother families living without grandparents in terms of social and personal resources, as well as to identify the predictors of resilience as a process in adolescents from single-mother families differentiated by the household type mentioned above: with or without grandparents. The results made it possible to respond to the research hypotheses. The first hypothesis, postulating that adolescents from single-mother families living with grandparents would rate grandparental support and open

communication with peers as well as resilience significantly higher – compared to their peers living without grandparents – has been partly confirmed. The results show that adolescents from single-mother families living with grandparents are more resilient than those living only with their single mothers. Assuming that resilience is the ability to regain peace of mind after negative experiences and situations (Ogińska-Bulik, 2014), the result may suggest that living together with grandparents and experiencing their help sustains resilience in this group of adolescents. They exhibit even higher need for support and seek it more, while at the same time showing greater satisfaction with the support they have received. They also positively evaluate instrumental and informational support from their grandparents. They are more satisfied with open communication with peers, too. Assuming that resilience is formed by many factors, including the experiences in the early stages of life, for example in childhood (Ostaszewski, 2005), it can be concluded that the presence and availability of grandparents in adolescents' life was more frequent (Napora, 2016b) and that their influence on the grandchildren's resilience was stronger.

Regardless of the difference in household type defined by the presence or absence of grandparents, young people from single-mother families rate the availability of received emotional support and the availability of instrumental support similarly. They do not differ in terms of difficulties in communicating with peers, either. The absence of difference shows that adolescents have a similar level of these social resources. It can therefore be concluded that, regardless of their life situation, young people experience these kinds of social resources to a similar degree.

The result showing that adolescents from single-mother families living with their grandparents have higher need for support and seek support more intensely does not confirm the second hypothesis (H2). I expected that adolescents from single-mother families living with grandparents would experience significantly lower need for support and exhibit significantly lower support seeking compared to those from single-mother families living without grandparents. No support can be found for this hypothesis. At this point, it is worth citing the observation that young people from single-mother families living with grandparents have significantly higher resilience, which suggests that they can adjust their abilities and skills to the situation and skillfully use the factors available in the environment (Uchnast, 1998). The coping potential in this group is higher than in adolescents from single-mother families living without grandparents. This is because highly resilient individuals effectively cope with the complexity of the situation (Cheng, 2001), more often experience positive emotions, have higher self-confidence,

and are more effective in everyday life. On the other hand, it should be noted that in the family system which includes everyday presence of grandparents the number of family members is higher. There are also more relationships in which tension probably grows between members of the family system and in which there may be more conflicts, forcing adolescents to develop higher need for support and higher social support seeking.

When looking at the results obtained in the case of young people from the second group, it can be observed that adolescents living only with their single mothers – without grandparents – exhibit lower resilience than their peers from multigenerational families. They are characterized by lower need for support, seek this support less intensely, and are correspondingly less satisfied with it. This suggests that everyday burdens may be a source of negative experience for adolescents from single-mother families living without grandparents. Their lower resilience may be an attempt to defend themselves by reducing willingness to seek social support (Grzankowska, Napora, & Basińska, 2018).

The analysis of data yielded interesting results concerning the last hypothesis (H3), expressing the expectation that in adolescents from single-mother families living with grandparents there would be significantly more predictors of resilience than in adolescents living only with their mothers, without grandparents. I conducted the analyses using the data obtained in both groups of adolescents – according to household type (with or without grandparents) as well as for the whole research material taken together, without the presence or absence of grandparents in the common household as a differentiating criterion. The analyses of data without the distinction according to household type showed that in the case of young people from single-mother families the significant protective factors for resilience were perceived and received emotional support as well as support seeking and openness in communicating with peers. Except received emotional support, these factors were stimulators, which means that their growth increased the level general resilience. Perceived social support – being subjective evaluation of its availability, which manifests itself in faith that support will be provided the moment it is needed – plays an important role in the individual's life, since what is important is how an individual perceives support rather than what support he or she objectively receives (Machnik-Czerwik, 2015).

Perceived emotional support from grandparents as well as support seeking and openness in communicating with peers are stimulators of resilience in adolescents living without grandparents, while reducing difficulties in communicating with peers. In the case of these young people, what is significant for resilience is perceived emotional support and support seeking as well as open com-

munication with peers. This observation is consistent with research concerning other social groups, such as adolescent daughters (Napora & Pękala, 2014). The results suggest that the scope of coping strategies used by adolescents from single-mother families living without grandparents is much narrower than it is in the case of individuals from single-mother families living with grandparents.

The factors significant for the resilience of adolescents from single-mother families living with grandparents are: perceived and received emotional support, satisfaction with support, as well as difficulties and openness in communicating with peers. In the group of adolescents living with grandparents, I found a significant negative relationship between received emotional support and resilience. This effect can be interpreted as showing that an increase in the adolescents' experience of this support is accompanied by a decrease in their resilience. The result suggests that an excess of grandparental messages reducing motivation to overcome difficulties as well as an excess of messages providing ready-made recipes does not build resilience. The result may also be related to the expectation concerning grandparental emotional support being replaced by open communication with peers.

These analyses reveal that, based on the levels of perceived and received emotional support, support seeking, and openness in communicating with peers, it is possible to predict resilience in young people. Generally, the study has shown that perceived and received social support and communicating with peers are strongly predictive of high resilience in adolescents. The higher the social support (except received emotional support) and open communication, the higher the resilience. For this reason, social support can be considered as a factor that determines the development of young people's competencies and self-image. It should be stressed that intimate and open relations with grandparents enrich the broadly understood social resources of the family; in particular they provide support and help as well as contribute to the soothing of disturbances and anxiety (Kukołowicz, 2001). Open communication with peers plays a similar role. The obtained effects show that interest and help from family members and peers are more important than other kinds of formal assistance – for example, provided by therapists or social workers (Day, 2006).

To sum up, the prediction of resilience in adolescents from single-mother families with household type (with or without grandparents) taken into account made it possible to determine the type and amount of social support from grandparents and communication with peers. Because researchers usually investigate received and perceived support (Norris & Kaniasty, 1996), which is reflected in the literature, my analyses supplement the previous results by adding the dimen-



sions of social support making up family resources differentiated by the fact of living together with grandparents or the lack of this kind of community. The obtained effects lead to further conclusions:

1. Adolescents from single-mother families living with grandparents are more resilient, experience more social support from grandparents, and are more satisfied with their communication with peers.

2. By testing the resources of adolescents from single-mother families, I found positive and significant associations of their resilience with social support provided by grandparents, perceived emotional support, instrumental support, as well as support seeking and open communication with peers. The association with received emotional support was negative.

3. A negative association of adolescents' resilience with received emotional support occurs in the case of the single-mother family living together with grandparents. This suggests an increase in adolescents' resilience with a decrease in grandparental emotional support and with a decrease in difficulties in communicating with peers.

4. Social support plays a more significant role for resilience in the group of adolescents from single-mother families living with grandparents – correspondingly, this role is less significant in the group of adolescents from single-mother families living without grandparents. Adolescents from single-mother families probably use the available social resources in the form of support from their peers to a greater extent.

The findings of the present study are consistent with the research reports found in the literature, where it is stressed that grandparents behave altruistically towards their relatives and that their support is a highly important element in the functioning of the family system (Putney & Bengtson, 2001). This implies the need for assistance programs targeted at families to address not only areas covering the basic composition of the family system – i.e., children and their parents – but also the circle constituted by the living grandparents. It also turns out that the concept of social resources is significant in analyzing how adolescents growing up in single-mother families are differentiated by household type – with or without grandparents. A high level of these resources allows for predicting higher resilience in young people.

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