

ABSTRACT

Title of Document: THE BEST FRIENDSHIPS OF YOUNG ADOLESCENTS:
THE ROLE OF INTERNALIZING SYMPTOMS,
CHARACTERISTICS OF FRIENDS, FRIENDSHIP
QUALITY, AND OBSERVED DISCLOSURE.

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The best friendships of emotionally distressed and typical young adolescents were investigated. A group of 5th and 6th grade young adolescents completed ratings on friendship quality and participated in videotaped friendship tasks. Emotional distress was identified using a *T* score cut-point of 60 on the Internalizing symptoms subscale of the Child Behavior Checklist (*CBCL*). There were 131 friendship dyads available for analyses. Of these, 48 were considered distressed dyads (24 female dyads; 24 male dyads) and 83 were considered typical dyads (47 female dyads; 36 male dyads). Results demonstrated similarity of internalizing symptoms between best friends of typical adolescents, but not distressed adolescents. Analyses on friendship quality ratings emphasized the importance of perspective. Distressed targets rated their friendships lower on validation/caring, help/guidance and total positive friendship quality than did typical targets. However, friends of distressed adolescents did not rate their friendships differently than friends of typical adolescents. Congruent

with past research, females tended to rate their friendships higher on intimate disclosure than did males. No developmental differences emerged in analyses of friendship quality. Regarding observed disclosure, only half of the dyads engaged in spontaneous disclosure talk. The majority of disclosures involved negative speech about the self or dyad. Females tended to devote more time to disclosure talk and respond to disclosure in more positive ways than males. Fifth-graders tended to devote more time to disclosure talk, initiate more disclosures and respond in more negative ways than 6th graders. Differences between distressed and typical dyads did not emerge in analyses of observed disclosure. Finally, relations between reported friendship quality and observed disclosure were explored. Overall, a lack of relation among variables suggests that the ways in which adolescents think about friendship quality are not related to visible interactions that took place in the laboratory.

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FRIENDSHIP QUALITY, AND OBSERVED DISCLOSURE

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Dedication

I wish to dedicate this dissertation to my wonderful family and friends. Thank you to my parents, Ron and Diane, and my sister, Jen. You have believed in me from the beginning, and your faith in me has meant the world. I also wish to thank the newest member of my family, my husband, Flint. Your endless patience and support gave me the strength to persevere. Finally, I would like to extend my thanks to my fabulous girlfriends. Very few people are lucky enough to have friendships that have endured the test of time. I appreciate our friendship more than I can say; they have been the inspiration for this dissertation. So, to all of you, I say “Thank you.” Throughout the years, your love and encouragement have never wavered. Without you, none of this would be possible. I hope that I have made you all proud.

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CHAPTER 1

Introduction

Many theorists including Sullivan (1953), Damon (1977), and Selman (1980, 1981) have emphasized the importance of establishing close, dyadic relationships. Friendship is thought to provide youth with a special context for development. Friendships provide social and emotional support, in addition to instrumental resources (Asher & Parker, 1989; Wright, 1974). They help youth develop perspective-taking and interpersonal problem solving skills (McGuire & Weisz, 1982; Selman, 1981; Youniss, 1980) as well as positive self-esteem (Bagwell, Newcomb, & Bukowski, 1998). The nature of friendships and the functions they serve change as children develop into adolescents. In childhood, friends serve as playmates; in adolescence, they are viewed as confidants who provide emotional closeness (Buhrmester, 1996; Buhrmester & Furman, 1987; Furman & Buhrmester, 1992).

Gender differences in friendship also emerge during the developmental transition from childhood to adolescence. Girls tend to experience greater instability in their friendships than do boys (Hardy, Bukowski, & Sippola, 2002). Adolescent girls tend to place more importance on affirmation of connectedness in their friendships, whereas boys favor verification of status or agency (Buhrmester, 1996). Research indicates that because girls place more importance on their friendships than do boys, they may be more vulnerable to problems in them (Gore, Aseltine, & Colten, 1993; Leadbeater, Blatt, & Quinlan, 1995; Leadbeater, Kuperminc, Blatt, & Hertzog, 1999). Some researchers have suggested that females' investment in relationships may expose them more to stress (e.g., Gore et al., 1993; Kessler & McLeod, 1984).

By being emotionally involved in the lives of others, females may become more vulnerable to the stress of their own lives *and* to the stress of their friends' lives (Kessler & McLeod, 1984).

Thus, it is extremely important to examine the role of friendship as both beneficial and harmful to youth's development. The *overall purpose* of the proposed study was to investigate the best friendships of anxious/depressed youth. (Herein, anxious/depressed youth will be referred to as "emotionally distressed" youth.) Research regarding the peer relationships of emotionally distressed children and adolescents has focused on group acceptance and similarity within the peer group. Research suggests that youth reporting symptoms of anxiety and/or depression are more likely to be rejected by their peers (La Greca & Harrison, 2005; Mufson, Weissman, Moreau, & Garfinkel, 1999; Nolan, Flynn, & Garber, 2003; Ueno, 2005); however, prevalence rates of rejection and internalizing symptoms demonstrate that not all rejected youth are emotionally distressed and not all distressed youth are rejected (Anderson, Williams, McGee, & Silva, 1987; Coie, Dodge, & Cappotelli, 1982; Fleming & Offord, 1990; Gazelle, 2006; McGee, Feehan, Williams, Partridge, Silva, & Kelly, 1990; Bell-Dolan & Brazeal, 1993; Lewinsohn, Hops, Roberts, Seeley, & Andrews, 1993; Parker & Asher, 1993). Furthermore, rejection by the peer group cannot be equated with friendlessness (Rubin, Bukowski, & Parker, 2006).

Researchers are only beginning to study the dyadic best friendships of emotionally distressed youth. Studies indicate that anxious/depressed adults are more likely to select other distressed adults as friends (e.g., Rosenblatt & Greenberg, 1988; 1991); we do not know if this pattern holds true for youth. Research on the

friendships of aggressive children (e.g., Mariano & Harton, 2005) and shy/withdrawn children (e.g., Rubin, Wojslawowicz, Rose-Krasnor, Booth-LaForce, & Burgess, 2006) supports the notion that individuals befriend others who are similar to them, and, that they exacerbate each other's problem behaviors. There is burgeoning evidence that this pattern also may apply to emotional characteristics and problems, such as internalizing symptoms (Haselager, Hartup, Van Lieshout, & Riksen-Walraven, 1998; Hogue and Steinberg, 1995; Mariano & Harton, 2005). However, the aforementioned studies (e.g., Haselager et al., 1998; Hogue & Steinberg, 1995) have assessed friendship networks, or groups of friends, rather than the characteristics of *best* friends. Thus, the *first specific aim* of this dissertation was to identify the best friends of *emotionally distressed* young adolescents along with a group of *typical* adolescents, and ascertain whether youth befriend others' of similar emotional distress.

Given that friendships should provide youth with certain provisions that change with age, it is also important to understand whether emotionally distressed children are able to have qualitatively "good" friendships. Many researchers have concentrated on specific aspects of friendship, such as support (e.g., Daley and Hammen; 2002; Lewinsohn, Roberts, Seeley, Rohde, Gotlib, & Hops, 1994; Sheeber, Hops, Alpert, Davis, & Andrews, 1997) and conflict (e.g., La Greca & Harrison, 2005; Mufson et al., 1999; Sim, 2000). However, these researchers have examined these aspects as predictors of internalizing symptoms, rather than as a dimension of relationship quality. Therefore, the *second specific aim* of the current study was to

compare the friendship quality of distressed youth and typical (non-distressed) youth based on both self- and friend-reports.

Finally, because intimate disclosure is an important hallmark of the difference between children and adolescents' friendships (Buhrmester, 1990; Buhrmester & Furman, 1987), this construct was examined observationally. Many observational studies have involved the assessment of intimate disclosure during conversations between depressed individuals and strangers (e.g., interviewer, unknown peer) (e.g., Edison & Adams, 1992), roommates (e.g., Burchill & Stiles, 1988), or spouses (e.g., Ruscher & Gotlib, 1988)—but not friends. Studies of disclosure within friendship have been conducted mostly with undergraduate college students (Jacobson & Anderson, 1982; Segrin & Flora, 1998). It is important to note that in the few observational studies of disclosure (e.g., Gottman & Mettetal, 1986; Tannen, 1990; Rose, 2002), youth were instructed to discuss a problem; disclosure did not occur spontaneously. Thus, an important limitation to this work is that very little is known about the role of spontaneous disclosure in friendship. As such, the *third specific aim* of the current study was to observe instances of disclosure in the best friendships of distressed and typical youth, noting whether distressed dyads disclosed more than did typical dyads. Of dyads that did engage in negative disclosures, the following were examined: the initiator of disclosure, the topic of disclosure and the response to the disclosure. In the case of all aims, developmental (i.e. grade) and gender differences were explored.

Research Questions

In summary, emotionally distressed young adolescents and their best friends were identified from an archival data set of 5th and 6th grade youth along with typical (non-distressed) friendship dyads. The following questions were addressed:

- 1) Are best friends similar in their levels of internalizing symptoms?
Are distressed adolescents more similar to their best friends than typical adolescents?
- 2) Do distressed young adolescents report that their best friendships are lower in relationship quality than do typical youth? Do the best friends of distressed youth report that their friendships are lower in relationship quality than do the best friends of typical youth?
- 3) Do distressed dyads engage in more negative disclosures than typical dyads? Do distressed dyads disclosure about different topics than typical dyads? Do distressed individuals initiate disclosure more than typical individuals? Do distressed individuals respond to disclosures in more negative and co-ruminative ways than typical individuals?

Grade and gender differences were considered for all research questions.

Furthermore, relations among reported friendship quality and observed disclosure were explored.

CHAPTER 2

Literature Review

Definitions

Childhood and Adolescence

Childhood and adolescence are often divided into different phases because so much psychological and social growth takes place during these developmental periods (Santrock, 2005; Steinberg, 2005). For the purposes of this review, childhood has been divided into *early childhood*, ages 2 through 6, and *middle childhood*, ages 6-11. Adolescence was divided into *early adolescence*, ages 10 through 13, *middle adolescence*, ages 14 through 17, and *late adolescence* or *emerging adulthood*, ages 18 through 22 (Steinberg, 2005). The participants in the current study were in the 5th and 6th grades (ages 10-to-12 years); thus, this literature review focuses on youth in the period of early adolescence.

Early adolescence is a developmental period fraught with change. In the state of Maryland, where the current study was conducted, 5th grade marks the final year of elementary school and 6th grade is the beginning of middle school. The transition from elementary to middle school is an extremely important one to study as it involves multiple individual-level and school-level changes. On an individual level, as children develop into adolescents, they face many personal changes. Their social-cognitive abilities become more sophisticated (Piaget, 1932; Selman, 1980; Yeates & Selman, 1989) as they develop a new consciousness of self and identity, a more advanced understanding of others, and more sophisticated analytic skills (Hill & Palmquist, 1978; Kohlberg & Gilligan, 1972). Furthermore, the onset of puberty

brings about numerous biological-psychosocial changes (Petersen, 1987) that adolescents may find troubling or confusing (Berndt, 1982; Douvan & Adelson, 1966). There is a multitude of contextual changes youth face as they cross this transition. Elementary schools differ greatly from middle schools. Typically, several elementary schools feed into a single middle school. Children move from small classrooms to large schools with increased demands on their academic performance, but without the teacher support they benefited from in elementary school (Eccles, Wigfield, & Schiefele, 1998; Harter, Whitesell, & Kowalski, 1992; Midgley, Anderman, & Hicks, 1995). In the new school, young adolescents are faced with unfamiliar peers and school staff, along with new rules and expectations (Akos, 2002). Douvan and Adelson (1966) have argued that close friendships may be especially significant to young adolescents facing these changes as friendships may serve as a significant source of support.

Emotional Distress

In addition to the stress associated with the changes of middle school, this transition also has been associated with an increase in more severe psychological distress (Chung, Elias, & Schneider, 1998; Crockett, Peterson, Graber, Schulenberg, & Ebata, 1989). Risks for developing internalizing symptoms and disorders, namely anxiety and depression, increase during this developmental period (Burke, Burke, Regier, & Rae, 1990; Fleming & Offord, 1990; Petersen, Sarigiani, & Kennedy, 1991; Rutter, 1991; Sorenson, Rutter, & Aneshensel, 1991). Indeed, prevalence studies suggest that feelings of anxiety and depression are quite common in children and adolescents (Anderson et al., 1987; Essau, Conradt, & Petermann, 2000; Fleming & Offord, 1990;

McGee et al., 1990; Bell-Dolan & Brazeal, 1993; Lewinsohn et al., 1993), and that there is strong comorbidity among anxiety and depressive disorders in youth (Anderson, 1994; Craske, 1997; Kovacs, Gatsonis, Paulauskas, & Richards, 1989). Given the prevalence of these emotional problems during this period, it would appear timely for researchers to focus on young adolescents evidencing emotional distress.

Another reason to study this age group is that gender differences pertaining to prevalence rates first make an appearance. Prevalence rates for girls increase more than do those for boys (Angold & Rutter, 1992; Bourdon, Boyd, Rae, Burns, Thompson, & Locke, 1988; Cicchetti & Toth, 1998; Nolen-Hoeksema & Girgus, 1994; Ollendick, 1983). Researchers have revealed that in early and middle adolescence, girls begin to manifest higher rates of internalizing symptoms than do boys (e.g., Allgood-Merten, Lewinsohn, & Hops, 1990; Angold, Costello, & Worthman, 1998; Angold, Weissman, John, Wickramaratne, & Prusoff, 1991; Crick & Ladd, 1993; Ge, Conger, & Elder, 2001; Ge, Lorenz, Conger, Elder, & Simons, 1994; Hussong, 2000; Mariano & Harton, 2005; Petersen et al., 1991; Rudolph, 2002; Rudolph & Conley, 2005; Wichstrom, 1999). These gender differences continue through adulthood; some evidence suggests that adult women report rates of depression twice that of men as well (Leadbeater et al., 1995; Nolen-Hoeksema, 1987).

Finally, internalizing symptoms are related to serious adjustment outcomes for youth. Regardless of gender, youth who experience symptoms of anxiety and depression are likely to experience a host of other problems. Several researchers have found evidence of significant social impairment (Canino et al., 2004; Gotlib &

Hammen, 1992; Hammen & Rudolph; 1996; Weisz, Rudolph, Granger, & Sweeney, 1992). For example, Lewinsohn and colleagues found that adolescents who experienced depression also experienced impairment in occupational performance, interpersonal functioning, quality of life, and physical health in young adulthood (Lewinsohn, Rhode, Seeley, Klein, & Gotlib, 2003). Furthermore, emotional distress during adolescence is associated with an increased risk of suicide (Harrington et al., 1994; Weissman et al, 1999). In 2001, suicide was the third leading cause of death among young people ages 15- to- 24 (Anderson & Smith, 2003).

Defining internalizing problems. It is important to define the terms “anxiety” and “depression.” They are often referred to as “internalizing disorders,” which have been defined as “conditions whose central feature is disordered mood or emotion” (Kovacs, 1998, p.47). The symptoms of internalizing disorders include withdrawal, fearfulness, inhibition, and/or anxiety (Hogue & Steinberg, 1995; Kovacs, 1998). The internalizing disorders are comprised of depressive and anxiety disorders (Kovacs, 1998). Despite being recognized as separate disorders by the DSM-IV (American Psychiatric Association, 1994), empirical studies tend to find that depressive and anxious symptoms overlap considerably, particularly in children and adolescents (Achenbach & Edelbrock, 1978; Reynolds, 1992). At subclinical levels, depression and anxiety occur as part of an overall internalizing symptom picture; they can only be reliably distinguished for clinically impaired youth (Achenbach & McConaughy, 1992; Brady & Kendall, 1992; Compas, Ey, & Grant, 1993).

Recent research efforts have attempted to explain the shared aspects of these internalizing disorders. Findings of strong correlations (Brady & Kendall, 1992), co-

morbid diagnoses (Angold, Costello, & Erkanli, 1999; Zahn-Waxler, Klimes-Dougan, & Slattery, 2000), and successive diagnoses (Avenevoli, Stolar, Li, Dierker, & Merikangas, 2001; Mineka, Watson, & Clark, 1998) have led to this increased interest (Jacques & Mash, 2004). In the adult literature, a tripartite model has been proposed in which symptoms of anxiety and depression are considered along three broad dimensions (Clark & Watson, 1991; Watson et al., 1995). The first dimension consists of general affective distress or negative affect (NA) and is associated with both depression and anxiety. Physiological hyperarousal (PH), the second dimension, applies only to anxiety. The third dimension, a lack of positive affect (PA), applies only to depression. Researchers believe that the strong association between anxiety and depression can be explained by the shared symptoms of NA (Watson et al., 1995). Burgeoning evidence for this tripartite model has been found in nonclinical samples of children (Chorpita, Daley, Moffitt, Yim, & Umemoto, 2000; Muris, Schmidt, Merckelbach, & Schouten, 2001; Philips, Lonigan, Driscoll, & Hooe, 2002). However, studies suggest that the model is best supported in older children and adolescents (Cole, Truglio, & Peeke, 1997; Jacques & Mash, 2004).

Measuring internalizing problems. In order to assess internalizing symptoms, various methods may be used, the most common including self-report measures and surveys completed by parents, teachers, or important others. Questionnaires are easy to complete and allow researchers to gather data on many participants in a short amount of time. These measures assess the severity and frequency of symptom (Michael & Merrell, 1998), but are not meant for diagnostic purposes. Clinical interviews do allow for clinical judgment; however, they are extremely time-

consuming and require a reliable interviewer who is a trained clinician (Aschenbrand, Angelosante, & Kendall, 2005). Thus, many researchers rely on self-report or other-report questionnaires.

There are many self-report measures utilized to identify internalizing symptoms. The Youth Self Report (*YSR*; Achenbach, 1991c) is an example of one type of self-report questionnaire that assesses the presence of internalizing symptoms in youth. There are a plethora of self-report measures that assess only the presence of depressive or anxious symptoms. For example, the Reynolds Adolescent Depression Scale (*RADS*; Reynolds, 1986), Beck Depression Inventory (*BDI*; Beck, Ward, Mendelson, Mock, & Erbaugh, 1961), Children's Depression Inventory (*CDI*; Kovacs, 1980), and Depression Scale of the Center for Epidemiologic Studies (*CES-D*; Radloff, 1977; *CES-DC*; Weissman, Orvaschel, & Padian, 1980) are examples of frequently used self-report scales to assess depressive symptomatology. Several popular self-report measures of anxiety include the Revised Children's Manifest Anxiety Scale (*RCMAS*; Reynolds & Richmond, 1985), the revised Fear Survey Schedule for Children (*RSSC-R*; Ollendick, 1983), the State-Trait Anxiety Scale for Children (*STAIC*; Spielberger, 1973), and the Multidimensional Anxiety Scale for Children (*MASC*; March, Parker, Sullivan, Stallings, & Conners, 1997). However, whereas such questionnaires are designed to measure symptoms of *only one* disorder, they frequently include symptoms of comorbid disorders as well. For example, the Children's Depression Inventory (*CDI*; Kovacs, 1980) includes symptoms of anxiety in addition to symptoms considered to be more characteristic of depression (Compas et al., 1997).

There also are a multitude of other-report questionnaires available, but researchers have cautioned that a report by the child of his or her own state is important since internal distress may not be identifiable by others (Flanery, 1990). Findings suggest that there are discrepancies between maternal reports and youth's self-reports of internalizing symptoms (e.g., Breslau, Davis, & Prabucki, 1988; Friedlander, Weiss, & Traylor, 1986; Jensen, Traylor, Xenakis, & Davis, 1988), which have led researchers to question the validity of maternal-reports, especially concerning ratings of depressive symptoms.

Several explanations for this disagreement have been suggested. For example, Compas et al. (1997) suggested that perhaps because many symptoms of depression are not readily observable, it might be difficult for others to reliably assess another's depression. Another explanation suggests differences between clinical and community samples. Studies indicate that there seems to be better agreement between maternal- and self-reports in non-clinical samples (e.g., Butler, MacKay, & Dickens, 1995; Thomas, Forehand, Armistead, Wierson, & Fauer, 1990). Discrepancies in clinical samples may be related to higher incidences of maternal psychopathology (e.g., Berg-Nielsen, Vika, & Dahl, 2003; Najman et al, 2001). Finally, the discrepancy between maternal- and self-reports may be explained by methodology, and, more specifically, the statistical analyses being conducted. Richters (1992) conducted an analysis of 22 studies that claimed to demonstrate differences between maternal- and youth's self-reports of depression. Using a more conservative statistical test, Richters (1992) found that *none* of the studies met the criteria for establishing distortion.

There also have been studies indicating that parents are good reporters of their children's distress (e.g., Aschenbrand et al., 2005; Gerhardt, Compas, Connor, & Achenbach, 1999; Merrel, McClun, Kempf, & Lund, 2002; Romano & Nelson, 1988). In their study of over 1000 adolescents ($M = 14.4$ years), Gerhardt and colleagues (Gerhardt et al., 1999) found that youth and parent reports were highly comparable, particularly regarding the Anxious-Depressed syndrome scale and symptoms of the MDD (Major Depressive Disorder) Analogue. In a study of youth ages 7 to 14, Aschenbrand et al. (2005) demonstrated that the CBCL could serve as a screening tool to identify youth with anxiety disorders, though they did caution against using it to identify specific diagnoses. Interestingly, these researchers found that the optimal cutoff T score was 55, which is below Achenbach's (1991) recommended clinical cutoff score.

Regardless of the agreement between youth and parental reports, parental reports may still be important to consider. Mothers are often relied on as a source of information for their children since they are able to sample their children's behavior more often, across a variety of situations, and over extended periods of time (Richters, 1992). Also, as Compas et al. (1997) noted, parents are an important source of referral for mental health services for their children. In a study of referred and nonreferred adolescents (ages 11- 18), Compas and colleagues (Compas et al., 1994) found that parents' reports of anxiety/depression symptoms were more strongly associated with referral status than were adolescents' self-reports. Often, there are overlaps between the items listed on self-report measures and questionnaires

completed by others. For example, many of the items on the *CBCL*'s Anxious-Depressed syndromes are equivalent to those listed on the *CDI*.

Questionnaires completed by a parent or significant other typically ask an adult to rate the presence and severity of symptoms present in the focal child/adolescent. Common other-report questionnaires include the Child Behavior Checklist (*CBCL*; Achenbach & Edelbrock, 1983; Achenbach, 1991a), Conner's Parent/Teacher Rating Scale (*CPRS*, *CTRS*; Goyette, Conners, & Ulrich, 1978), the Behavioral Assessment System for Children (*BASC*; Reynolds & Kamphaus, 1992), the Child Symptom Inventory 4 (*CSI-4*; Gadow & Sprafkin, 1995a), the Adolescent Symptom Inventory 4 (*ASI-4*; Gadow & Sprafkin, 1995b), and the Teachers Report Form (*TRF*; Achenbach, 1991b). Symptom checklists commonly used in research contain a mixed syndrome scale containing elements of depression and anxiety (Compas, Oppedisano, Connor, Gerhardt, Hinden et al., 1997). For example, the Child Behavior Checklist (*CBCL*; Achenbach, 1991) contains an Anxious/Depressed Syndrome subscale including items reflecting both depressed and anxious affect in addition to an overall Internalizing symptoms scale.

The *CBCL* (Achenbach & Edelbrock, 1983; Achenbach, 1991a) is one of the most widely used measures of child and adolescent psychopathology (Biederman et al., 1993; Vignoe & Achenbac, 1997). It contains 118 items descriptive of emotional/behavioral problems. Principle components analysis has revealed the following syndrome scales: Withdrawn, Somatic Complaints, Anxious-Depressed, Social Problems, Thought Problems, Attention Problems, Aggressive Behavior, and Delinquent Behavior (Achenbach, 1991a). There also are broadband groupings of

Internalizing and Externalizing symptoms. Participants' raw scores then may be converted to *T* scores. Clinicians tend to prefer *T* scores which assist in comparisons of youth across different scales on the same form and across forms assessing the same construct. Moreover, the *T* scores are based on national normative samples. However, Achenbach (1991a) recommends using the raw scores on the *CBCL* behavior syndromes and problem scales for research purposes. The *T* scores of the behavior syndromes and problem scales were truncated and raw scores may show greater differentiation among individuals. The *T* scores for the broadband groupings were not truncated; thus, there should be no problem using them. For the Internalizing and Externalizing scales, *T* scores below 60 are considered in the normal range. Scores above 63 are identified as in the clinical range, and those falling between 60 and 67 are considered borderline (Achenbach, 1991a).

All indices of distress may be important to study, in that even at the symptom-level (as compared to the disorder-level), they are related to dysfunction (Judd, Akiskal, Maser, Zeller, Endicott, & Coryell, 1998; Kandel & Davies, 1982; Pine, Cohen, Cohen, & Brook, 1999). For example, moderate depressive symptoms have been found to be associated with academic and peer relationship problems (Nolen-Hoeksema, Girgus, & Seligman, 1992; Petersen et al., 1991; Susman, Dorn, & Chrousos, 1991). Even sub-clinical levels of depressive symptoms have been associated with significant psychosocial impairment (Judd et al., 1998; Lewinsohn, Solomon, Seeley, & Zeiss, 2000; Pickles, Rowe, Simonoff, Foley, Rutter, & Silberg, 2001). Like individuals with sub-clinical levels of depression, individuals with sub-clinical levels of anxiety tend to suffer on adjustment indices compared to non-

anxious individuals (Papsdorf & Alden, 1998). Thus, all the different classifications are important areas of legitimate study (Compas et al., 1993).

Because the *CBCL* has demonstrated excellent reliability and validity (Achenbach, 1991a, b), it was the measure chosen for use in the current study to identify adolescents as *typical* or *distressed*. To create groups, the *T* scores for the Internalizing scales were used to facilitate comparisons across clinical and normal samples. Recognizing that self-report assessments of mood are important, a measure of self-worth was included as well. Studies have demonstrated that adolescents with internalizing symptoms report feeling lower self-worth than non-distressed adolescents (e.g., McCarty, Vander Stoep, A., & McCaule, E., 2007; Ohannessian, Lerner, & Lerner, 1999). In the current study, the distressed group was expected to rate themselves as lower on a measure of global self-worth than the typical group.

Distress and peer relationships. When studying internalizing disorders in youth, researchers need to ensure that their methods are developmentally appropriate and sensitive to the issues children and adolescents face. There is a need to understand normative developmental issues, rather than to use a top-down approach drawn from adult models of the disorder (Hammen, Rudolph, Weisz, Rao, & Burge, 1999; Sroufe & Rutter, 1984). One way to approach the study of youth disorders is to identify important developmental tasks and assess whether symptoms affect these tasks. Forming close peer relationships is an important developmental task of the pre-adolescent and adolescent period (Berndt, 1982; Daley & Hammen, 2002; Parker, Rubin, Earth, Wojslawowicz, & Buskirk, 2006). The influence of parents and peers changes as a child moves into adolescence. Contact with peers increases, whereas

parental monitoring decreases during the transition into adolescence (Brown, 1990). Research indicates that during adolescence, best friendships become increasingly important as sources of social support, and that close friends significantly contribute to adolescents' self-concept and adjustment (Buhrmester, 1990; Compas, Slavin, Wagner, & Vannatta, 1986; Furman & Buhrmester, 1992).

Numerous studies have documented the association between adolescents' peer relationships and internalizing symptoms of depression and anxiety (e.g., Hecht, Inderbitzen, & Bukowski, 1998; Vernberg, 1990). Children who have friends seem to negotiate the middle school transition better than those who do not (Hartup, 1996; 2000). However, it is important to note that friendships can serve as a source of support (Berndt, Hawkins, & Jiao, 1999) or as a source of stress (Elias, Ubriaco, Reese, Gara, Rothbaum, & Haviland, 1992).

Peers and Friendship

To measure an individual's success in the social world, one can begin by examining relationships with peers. These relationships can be studied at multiple levels of the social world (Bukowski & Hoza, 1989; Rubin, Bukowski, & Parker, 2006; Windle, 1994). For example, one can examine the interactions between peers and the effects of these interactions on how *accepted* or *rejected* children may be within their peer group (i.e. group level analysis). One may also assess the experience of a friendship group or network. Or, one can examine the characteristics of individuals that may have an impact on the quality of their *best friendships* (i.e., dyadic level analysis). Experiences with best friends and peer groups offer different, yet important, opportunities for development (Rubin, Coplan, Chen, Buskirk, & Wojslawowicz,

2005). From their peer group interactions, youth learn skills required for group functioning including cooperation, information about social structure, and leadership and following behaviors (Fine, 1987). Peer groups also offer a variety of emotional connections to help cope with stress (Hartup, 1992). However, *best friendships* are closer, more intimate relationships that fulfill a variety of functions. Research has demonstrated that *best* friendships influence children's adjustment more than other good friends or the general peer group (Berndt, 1999).

To assess best friendships, researchers typically ask youth, "Who is your best friend?" (e.g., Bukowski, Hoza, & Boivin, 1994). It is important to consider mutuality of friendship nominations because friendship is a dyadic construct and, thus, there must be evidence of reciprocity of affection (Asher, Parker, & Walker, 1996). Thus, if Child A nominates Child B as a best friend, and if Child B does not name Child A as a friend, they would not be considered "best friends." As an additional note, in the friendship literature, researchers often only utilize same-sex nominations to eliminate possible sex-stereotyping (Zeller et al., 2003). Therefore, to address the objectives of the current study, I focused on reciprocated *best friendships* and emotional distress.

Researchers have indicated that youth experience important changes in their friendships as they move from elementary to middle school. In general, girls tend to experience greater instability in their friendships than do boys (Hardy et al., 2002). Within friendships, certain features may be especially important to high quality, lasting friendships. Characteristics such as intimacy, self-disclosure, and validation have been associated with positive self-esteem and promote adaptive coping during this period (Berndt et al., 1999; Lord, Eccles, & McCarthy, 1994).

Developmental theories of friendship. The functions of friendship change with development. In early childhood, friendships are often based on common activities, whereas friendships in late childhood involve mutual loyalty and caring (Aboud & Mendelson, 1996; Hartup & Stevens, 1997). Adolescents view friendships as opportunities for intimacy and self-disclosure (Berndt & Perry, 1990; Buhrmester, 1996), and, compared to younger children, tend to know more about their best friend's personality characteristics and preferences (Diaz & Berndt, 1982). Several theorists have discussed the importance of friendship and developed descriptions for how friendships change as youth develop.

Sullivan (1953) postulated that the nature of friendship changes to meet specific interpersonal needs appropriate to their stage of development. He defined friendship as a collaborative relationship, and suggested that true friendships do not emerge until preadolescence (at approximately the age of nine years). According to his theory, children do not develop a need for "chumships" until they enter the juvenile epoch. During the juvenile epoch (ages 6- 8), Sullivan believed children look for playmates. In preadolescence (ages 9- 12), children begin forming intimate relationships with others. There is a strong need for emotional closeness. In early (ages 13- 17) and late (ages 18- 22) adolescence, Sullivan posited that friendship needs become intertwined with the need to develop a romantic relationship. More recent conceptualizations of friendship (e.g., Berndt, 2004; Buhrmester, 1996) have been influenced strongly by Sullivan's (1953) work. Empirical evidence supports Sullivan's ideas, finding that adolescents report disclosing information to their friends more often than do younger children (Buhrmester, 1990; Buhrmester & Furman,

1987). Research also indicates that adolescent friendships involve intensive and intimate conversation, self-disclosure, and intense efforts to solve conflicts (Buhrmester, 1996).

Damon posited that a child's view of friendship could be characterized by three stages (Damon, 1977; Damon & Hart, 1988). In early childhood, children view their friends as being similar to them and with whom they share toys and activities. In the second stage, in middle childhood, children build friendships around the idea of mutual trust. In this stage, children view their friends as those they can count on for help. In the third stage, young adolescents look to friends for intimacy and loyalty. Bigelow and LaGaipa's (1980) research on children's friendship conceptions corresponds with Damon's stages. Their work indicated that young children in the *reward-cost stage* (ages 7- 8) view a friend as someone who lives near them, possesses nice toys, and enjoys similar activities. A child in the *normative stage* (ages 10- 11) believes a friend shares his or her values and rules, and is loyal to him or her. In the *empathetic stage* (ages 11- 13), friends have similar interests, share emotional connections with each other, and disclose personal information.

Finally, Selman's interpersonal theory (1980, 1981) identified five stages of friendship. *Stage 0* occurs in early childhood, during which children view friends as playmates. They consider, as friends, children who like to play with similar toys and engage in similar activities. In *Stage 1*, in middle childhood, children begin to appreciate others' perspectives. However, according to Selman, children continue to prioritize their own thoughts and feelings. They view a friend as someone who obeys their wishes. In early adolescence, *Stage 2*, children gain a better understanding of

reciprocity. Their focus continues to remain on their own self-interest, though they do believe that friends should do things for one another. *Stage 3*, which occurs in middle adolescence, the focus changes to the relationship, rather than on the individual. Adolescents view intimacy and mutual sharing of secrets as an important component of friendship. Finally, in late adolescence, *Stage 4*, adolescents understand that friendships develop as people do. Adolescents appreciate that friends have needs for dependency (committing to each other) and for autonomy (developing own independence).

Essentially, the work of Sullivan (1953), Damon (1977), Selman (1980, 1981) and others reveal that the nature of friendship changes as youth grow and develop. Early on, children equate friends with playmates. As they become more mature, so do their relationships. They begin depending on friends for emotional support, in addition to fun and recreation. In adolescence, youth see friends as peers with whom they can share intimate thoughts and feelings. While these theories offer explanations describing how friendships develop, they do not indicate *whom* children and adolescents befriend.

Similarity between friends. Berndt (1992) emphasized that it is important to examine the friends' characteristics; depending on these characteristics, friends may exert either a positive or negative influence. Friends are often similar to one another in many ways. Several theorists explain why this is the case. The *similarity-attraction hypothesis* (Kupersmidt, DeRosier, & Patterson, 1995) and the *homophily hypothesis* (Berndt, 1982; Cohen, 1977; Kandel, 1978) both posit that individuals select others with whom they share important characteristics to become friends. *Social influence*

and *socialization* theories claim that interactions between friends cause individuals to change and adapt to the others' interests and behaviors (Hartup, 1995; 1997; Hartup & Stevens, 1997). It is also possible that individuals with certain negative characteristics are rejected by their peers and become friends by default (Mariano & Harton, 2005).

There is much evidence demonstrating similarity of peer group behaviors, such as smoking (Urberg, Cheng, & Shyu, 1991), alcohol and drug use (Pruitt, Kingery, Mirzaee, Heuberger, & Hurley, 1991), and delinquency (Brown, Clasen, & Eicher, 1986). Recently, friends also have been found to be similarly aggressive (e.g., Haselager et al., 1998; Mariano & Harton, 2005), shy/withdrawn (e.g., Kupersmidt et al., 1995; Rubin et al., 2006), and inattentive/hyperactive (Mariano & Harton, 2005).

Characteristics of Best Friendships

Friendship Prevalence

Research has indicated that success in the peer group at large does not necessarily correspond to success within a child's friendships, and vice-versa (e.g., Bukowski & Hoza, 1989; Masters & Furman, 1981). Most youth have at least one reciprocated best friendship, with only about 10% of youth indicating they do not have a reciprocated friendship (Stevens and Prinstein, 2005). Few researchers have addressed whether emotionally distressed youth are more or less likely to have friendships. In one study, La Greca and Lopez (1998) investigated the friendships of socially anxious high school adolescents. They found that girls with high social anxiety reported having fewer best friends than less anxious girls. Among boys, social anxiety was not related to friendship. It is important to note that adolescents were

asked to nominate up to three of their closest friends, but reciprocity was not checked in this study. In Rockhill, Fan, Katon, McCaulley, Crick, and Pleck's study (2007) of 3rd through 7th graders, youth with low levels of depressive symptoms (score of 9 or below on CDI) and high levels of depressive symptoms (score of 13 or above on CDI) reported on their best friendships. Youth with high levels of depressive symptoms had significantly fewer reciprocated best friendships than youth with low levels of depressive symptoms, but the overall percentages were relatively high (75.3% versus 84.3%). Thus, although prevalence rates of best friendship in anxious and depressed youth have not been well established in the literature, it does appear that the majority of distressed youth do have close friendships.

Characteristics of Friends

An important question to address regards the characteristics of distressed youth's friends. As discussed earlier, research supports the idea of individuals choosing others who are like them to befriend. Among adults, research has shown that depressed individuals are likely to select other depressed individuals as friends and respond more positively to social interactions involving a depressed partner (Rosenblatt & Greenberg, 1988; 1991). Preliminary support has found evidence for this homophily effect in distressed youth, with friends being similar in their levels of depressive and anxious symptoms (Hogue & Steinberg, 1995; Kandel, Davies, & Baydar, 1990; Mariano & Harton, 2005; Stevens & Prinstein, 2005).

Most studies have compared a target youth to a friend and to a non-friend (e.g., Mariano & Harton, 2005; Haselager et al., 1998). These studies have indicated that compared to nonfriends, friends are more similar on internalizing symptoms

(Mariano & Harton, 2005; Haselager et al., 1998). Investigators have explored the association between internalizing symptoms and friendship among elementary- and middle-school-aged children. An important limitation to this research is that internalized symptoms were used as outcome variables, rather than as grouping variables. In only two published studies has similarity of internalizing symptoms between friends been examined. Rockhill (2000) compared groups of depressed youth (3rd through 7th graders) with groups of nondepressed youth. She did not find evidence for similarity; depressed youth were not more likely than nondepressed youth to choose a friend with a high level of depressive symptoms. While this study suggested that youth did not choose best friends with similar levels of depression, the sample was small (86 dyads) and developmental differences were not explored. In Hogue and Steinberg's (1995) study of high school youth, adolescents were asked to name their five closest friends, and completed self-report questionnaires of various adjustment indices. An average score of internalized distress was computed based on the self-reports of the five friends, and this average score was compared to the target youth's distress. They found that adolescents tended to choose friends who reported similar levels of internalizing symptoms. In Hogue and Steinberg's study, the dyadic nature of best friendships was not assessed and their results may be specific to friendship networks. The findings of the Rockhill (2000) and Hogue and Steinberg (1995) studies conflict; thus, more research is needed in this area.

Quality of Best Friendships

With mounting evidence that distressed youth befriend others with similar emotional problems, one may wonder if these children are able to be good friends to

one another. Research with shy/withdrawn children suggests that they are similar to their friends and have lower quality friendships compared to average children (Rubin et al., 2006). Possibly, distressed children suffer the same outcome. Researchers tend to agree that friendships are important for healthy mental development and that the absence of close relationships may increase the risk for disorder (Rutter, 1987). Poor friendships have been associated with persistent depressive disorder in youth (Goodyer, Herbert, Tamplin, Secher, & Pearson, 1997). Further evidence suggests that moderate to poor friendships after the onset of disorder predict poor recovery of both anxious and depressive disorders (Goodyer, Germany, Gowrusankur, & Altham, 1991).

Measuring Friendship Quality

In order to assess the quality of child and adolescent friendship, researchers typically use self-report questionnaires. Such questionnaires overlap on several domains (Buhrmester, 1990; Buhrmester & Furman, 1987; Bukowski, Hoza, & Boivin, 1994; Jones, 1991; Mannarino, 1976; Parker & Asher, 1989). After reviewing this literature, Rubin and colleagues (Rubin, Coplan, Chen, Buskirk, & Wojslawowicz, 2005) explicated that friendship functions to (1) enhance self-esteem while providing support and positive self-evaluation; (2) offer emotional security; (3) provide opportunities for disclosure and affection; (4) offer intimacy and affection; (5) validate interests, hopes, and fears; (6) assist and guide the other; (7) promote the growth of interpersonal sensitivity; and (8) offer prototypes for later romantic, marital, and parental relationships.

There are three questionnaires commonly used to assess positive and negative aspects of friendship. They are the *Network of Relationships Inventory (NRI)* (Furman & Buhrmester, 1985), *Friendship Quality Questionnaire (FQQ)* (Parker & Asher, 1993) and *Friendship Quality Scale (FQS)* (Bukowski et al, 1994). These measures ask participants to rate statements designed to assess the features of friendship discussed above. For example, the scales ask participants to rate their friend on companionship or supportiveness. The *Friendship Quality Questionnaire (FQQ)*, the measure used to assess friendship quality in the current study, contains subscales measuring companionship and recreation, help and guidance, validation and caring, intimate disclosure, conflict and betrayal, and conflict resolution. Data on the *NRI*, *FQQ* and *FQS* suggest that friendship quality may be viewed as having a positive dimension and a negative dimension (Berndt & McCandless, in press). Using the specific subscales instead of the broad dimensions may be helpful in differentiating which specific functions of friendship are linked with certain outcomes; however, this procedure may be problematic for psychometric reasons (Berndt & McCandless, in press). Therefore, in the current study, only subscales with appropriate alphas were used.

Friendship Quality of Distressed Youth

Research indicates that close friends significantly contribute to adolescents' self-concept and adjustment (Asher, Parker, & Walker, 1996; Buhrmester, 1990; Compas et al., 1986; Furman & Buhrmester, 1992; Rubin, Dwyer, Booth-LaForce, Kim, Burgess, & Rose-Krasnor, 2004). Several studies of friendship quality and emotional distress suggest that anxious/depressed youth may have trouble forming and

maintaining high quality friendships (e.g., Connolly, Geller, Marton, & Kutcher, 1992; La Greca & Lopez, 1998). For example, in a study of middle-school youth who recently relocated, Vernberg and colleagues (Vernberg, Abwender, Ewell, & Beery, 1992) found that high levels of generalized social avoidance and social distress at the beginning of the school year predicted lower levels of intimacy and companionship in close friendships several months later. These aspects of social anxiety seemed to contribute to less frequent interaction with friends and less intimacy in friendships. An important limitation of this study was that youth reported on the quality of *three* close friends; *average* scores were calculated and used for later analyses. Therefore, the study provided information on friendship networks, but not the dyadic nature of best friendships.

There may be an important reporting bias to consider. When two friends report on the quality of their friendship, the individuals may disagree on their ratings. Berndt and McCandless (in press) suggest that these discrepancies may occur for several important reasons. First, discrepancies may depend on the particular feature being assessed and the subjectivity involved in rating that feature. For example, ratings of companionship may ask participants to recall the frequency of interactions, a quantitative assessment that may be less subjective than ratings of perceived supportiveness. Second, Simpkins, Parke, Flyr, and Wild (2006) have posited that discrepancies may result because two friends may have different knowledge about each other. If one friend confides more in the other, for example, ratings of intimate disclosure might vary. Finally, items on these measures may refer to one friend's behavior rather than to dyadic interactions. Individuals may bring different

characteristics and behavior to the friendship; discrepancies in ratings may reflect these differences.

These biases may be especially significant in reference to internalizing symptoms. Brendgen and colleagues suggested that the way depressed youth view themselves in the context of their friendships differs from the ways in which their peers view them (Brendgen, Vitaro, Turgeon, & Poulin, 2002). These researchers found that depressed youth (those with raw scores on the CDI in the top 75th percentile of the sample) perceived themselves as less well liked and as having lower quality friendships compared to non-depressed adolescents. From their peers' perspective, however, depressed youth were not viewed as having these problems (Brendgen, et al., 2002). Daley and Hammen (2002) also explored how social support and depression were related in the context of a best friendship. In their study of 12th grade adolescent females, girls with high levels of depressive symptoms were invited to bring a best female friend to complete questionnaires assessing aspects of their relationship and adjustment. Overall, depressed girls viewed their friendship negatively. In particular, regarding emotional support, depressed girls did not perceive their friends as being supportive; on the other hand, their friends did report high levels of emotional support. This finding is especially significant in terms of the social support literature, which indicates that *perceptions* of support may be more important than *actual* support in predicting adjustment (e.g., Wethington & Kessler, 1986). In this study, depressed girls also viewed themselves as less socially competent than nondepressed girls. However, their friends did not hold the same negative perceptions. The friends of depressed girls did not rate the targets less

competent compared to the friends of nondepressed girls. Perhaps depressed girls have a more negative view of themselves as a result of their depression. Also possible is that best friends do not want to recognize the negative aspects of their friendship or do not want to provide negative reports to the experimenter. Regardless of the explanation, it is clear that friends often have different perceptions of each other and of their friendships.

One characteristic of depression is having a negative outlook; consequently, depressed youth simply may be under-estimating their abilities. Research on the construct of social support indicates that perceived and received support are empirically discernible (Dunkel-Schetter & Bennett, 1990), and that perceived support may be more important in predicting psychological symptoms (e.g., Wethington & Kessler, 1986). This discrepancy may prevent the emotional support offered to depressed girls from having any benefits. The same may be true for anxious youth as well. In a study of socially phobic outpatients, Alden and Wallace (1995) found evidence for a negative bias. Both socially phobic outpatients and non-clinical controls participated in an interaction with a confederate. (The confederate was an opposite-sex research assistant. No data were presented on the confederate's level of social anxiety.) Socially phobic outpatients displayed a negative bias in their self-appraisals, but a positive bias in their appraisals of their partner's behavior. Possibly, emotionally distressed youth view their friendships as being lower in quality than do their friendship partners. Thus, it may be that although friends believe their relationship to be high quality, distressed youth may not hold these same perceptions and may not benefit from the functions of friendship.

Friendship researchers also have investigated the role of negative friendship qualities and emotional distress. Interpersonal stress and disruption have been considered as specific vulnerability factors in theories of developmental psychopathology (Cicchetti, Rogosch, & Toth, 1994; Cicchetti & Toth, 1998; Gotlib & Hammen, 1992; Hammen & Rudolph, 1996). For some youth, friendships may be a major source of stress. In support of this conjecture, Sim's (2000) study of Korean 5th and 6th graders found that hassles with friends were the best predictors of depression, followed by hassles with parents; friendship hassles explained 70% of the variance in depression scores. Similarly, Mufson and colleagues found that among adolescents, interpersonal problems were associated with feelings of depression (Mufson et al., 1999).

More specifically, in a study of youth ages 7- 16, Goodyer, Wright, and Altham (1990) found that friendship difficulties and undesirable events increased the probability of being emotionally distressed. In their study, a group of clinic youth with either depressive or anxious disorders was matched with a group of control youth from the community. The researchers found that significantly more emotionally distressed youth reported had moderate to poor friendships than did control youth. It is important to note that friendship ratings were gathered by interviewing youth on the nature of their friendship. Reciprocity of friendship nomination was not checked and friends' perceptions of the friendship were not gathered; thus, these findings must be viewed with caution. Possibly, the distressed youth reported on others who do not consider themselves friends. Or, even if there was mutuality of friendship, the *friends*

of distressed youth may not view their friendships as being of poor quality. Finally, the direction of effect is questionable.

Some evidence suggests that one person's depression can induce symptoms in another (Joiner & Katz, 1999). It may be not that friendship stress causes internal distress, but rather that individuals befriend distressed others who evoke distress. Coyne's (1976) interactional theory of depression (sometimes referred to as his interpersonal theory, e.g., Potthoff, Holanhan, & Joiner, 1995) argues for a cyclical pattern in which depressed individuals frustrate their significant others, eroding the relationship and eliciting depression in both themselves and the others. Similarly, Arkin's (1981) and Millon's (1981) theories suggest that anxious individuals employ self-protective behaviors that induce negative emotions in their relationship partners and result in partner avoidance.

Some research suggests that negative friendship qualities may play a more important role than do positive qualities. For example, in a study of high school adolescents, La Greca and Harrison (2005) found that negative best friendship qualities (such as exclusion and pressure) predicted symptoms of depression and social anxiety. Positive qualities of best friendships were only protective against feelings of social anxiety; they were not related to depressive symptoms. In this study, adolescents self-reported on their friendship with a same-sex friend, but these nominations were not checked for mutuality. As with the Goodyer et al. (1990) study, it is important to interpret these results with caution. They may represent only the viewpoint of the targeted adolescents.

Hartup and Stevens (1999) noted that for children and adolescents, friendship quality is related to psychological health and the way in which stressful events are managed. Yet the relation between stress and depression is modest suggesting that not all children who experience social stressors become depressed (Little & Garber, 2005). According to some researchers, individuals who exhibit high levels of interpersonal orientation, those who seek to maintain their self-esteem through their interpersonal interactions, are especially likely to become depressed following stressful interpersonal events (Beck, 1983; Blatt, 1974; Bowlby, 1977; Hammen & Goodman-Brown, 1990; Little & Garber, 2000, 2005). In a study of young adolescents (6th grade), Little and Garber (2005) found that youth who placed a high level of importance on interpersonal relationships were more susceptible to depressive symptoms following the occurrence of dependent social stressors, such as peer conflict, than were those youth for whom interpersonal issues were less important.

Some studies have found a stronger relation between negative friendship qualities and distress among girls than boys (Friedrich, Reams, & Jacobs, 1988; Moran & Eckenrode, 1991). Specifically, Moran and Eckenrode (1991) found that for girls (but not boys), social stress was correlated with higher depression. In a study comparing preadolescents and adolescents, Rudolph and Hammen (1999) found that adolescent girls reported the highest levels of interpersonal stress, particularly stress and conflict within both parent-child and peer relationships. Girls also demonstrated vulnerability to depressive responses to stress.

Rudolph (2002) also found evidence for gender differences in reactivity to friendship stress. Among outpatient youth, ages 8 through 18, girls indicated higher levels of anxiety and depression when faced with friendship stress than did boys. In their study of social anxiety among high school adolescents, La Greca and Lopez (1998) found evidence for gender differences in the relation between anxiety and friendship quality. To assess friendship, adolescents rated their three best friends (mutuality was not checked), and the responses were averaged. As with Vernberg et al., (1992) study, La Greca and Lopez (1998) focused on friendship groups and did not investigate the dyadic nature of best friendship. La Greca and Lopez (1998) found that socially anxious girls perceived their friendship networks as being lower in intimacy, companionship, and emotional support than less anxious girls. In general, social anxiety was not related to friendship qualities among boys. However, generalized social avoidance and distress in boys was associated with less perceived support and competency.

Thus, there is burgeoning evidence demonstrating that emotional distress is connected to low quality friendships. Several studies have indicated that negativity in friendship predicts feelings of anxiety and depression (La Greca & Harrison, 2005; Sim, 2000). Others have shown that youth suffering from emotional distress are more likely to have low quality friendships (Goodyer et al., 1990; Vernberg et al., 2000). Importantly, distressed youth may perceive their friendships as being lower in quality than do their friendship partners (Brendgen et al., 2000; Daley & Hammen, 2002). Notably, the methods used to determine friendship vary, and there is a need for researchers to study *reciprocated* friendships, and, in particular, the *dyadic* nature of

best friendships. Furthermore, rather than using anxiety and depression as outcome variables, more research is needed on internalizing symptoms, and how emotional distress relates to friendship with attention to potential developmental and gender differences.

Observed Disclosure in Best Friendships

One important aspect of friendship is intimate disclosure. Disclosure may include discussion of daily thoughts and concerns or more serious problems, such as parental divorce (Rotenberg, 1995). In the study of disclosure processes, it is believed that both verbal and nonverbal communications vary along a depth continuum, from very superficial to very personal (Altman & Taylor, 1973). As noted above, developmental theorists (e.g., Sullivan, 1953; Youniss, 1980) have posited that as youth age, disclosure becomes more central to their friendships. There is an increase with age in disclosure to peers above that to parents (Buhrmester & Prager, 1995). Particularly in middle childhood and early adolescence, youth are more likely to disclose to (and share more intimate disclosures with) same-sex friends than other-sex friends or parents (Buhrmester & Prager, 1995). As children enter adolescence, youth depend more on their friends for intimacy, self-disclosure, and help solving problems (Berndt & Perry, 1990; Buhrmester, 1990, 1996; Buhrmester & Furman, 1987; Newcomb & Bagwell, 1996). Research on communication in relationships indicates that as relationship closeness increases, communication becomes higher in both breadth and depth of disclosure, meaning that close friends share more intimacy and that this sharing generates feelings of emotional closeness (Altman & Taylor, 1973).

Research also has indicated that there are gender differences pertaining to normative disclosure processes. In general, females tend to disclose more than do males (Buhrmester & Prager, 1995). Females report more breadth and depth of disclosure in their interpersonal relationships than do males (Baxter & Wilmot, 1983). Female friendships are more likely to entail intimacy and disclosure than male friendships, especially in adolescence (Berndt, 1982; Cooper & Ayers-Lopez, 1985). For example, in a study of 3rd and 6th graders, Cohn and Strassberg (1983) asked children to respond to an audio recording of an unfamiliar peer making a disclosure. They found that girls spent more time providing high-intimate disclosures as well as more overall time disclosing than did boys responding to the audio recording. Research comparing males and females has indicated that females place a greater emphasis on harmonious relationships and demonstrate more social-evaluative concerns (Cross & Madson, 1997; Maccoby, 1990). Compared to males, females report worrying more about significant others (Gore et al., 1993). Some researchers have suggested that females' investment in relationships may expose them to more stress (e.g., Gore et al., 1993; Kessler & McLeod, 1984). By being emotionally involved in the lives of others, females may become vulnerable to the stresses of their own life events *and* to the stresses of their friends' life events (Kessler & McLeod, 1984).

Since disclosure is such an important aspect of interpersonal relationships, especially during this developmental period, it is important to examine whether distressed youth have difficulty with this aspect of their friendships. Research with emotionally distressed individuals suggests that their social skills make them less than

ideal candidates for disclosure. Depressed individuals have been found to make less eye contact, talk less, and smile less in conversation than nondepressed people (e.g., Segrin, 1990; Segrin & Abramson, 1994). The behavioral manifestations of anxiety are similar to those of depression, including lack of eye contact; speech disturbances, such as stutters and omissions; and fewer facial expressions, which also may make them less desirable partners for disclosure (Cheek & Buss, 1981; Jones & Carpenter, 1986; Papsdorf & Alden, 1998). Socially anxious individuals are viewed as less likable, less sympathetic, and less easy to talk to by their friends and family members (Jones & Carpenter, 1986). Some studies have suggested that anxious individuals spend less time talking, select less intimate topics, and fail to reciprocate their partner's level of disclosure (Bruch, Gorsky, Collins, & Berger, 1989; Cheek & Buss, 1981; Meleshko & Alden, 1993).

However, an important limitation to this work is that many of these studies assess conversations between the distressed individual and strangers, such as an interviewer or unknown peer (Edison & Adams, 1992; Papsdorf & Alden, 1998), roommates (Burchill & Stiles, 1988) or spouses (Ruscher & Gotlib, 1988)—but not friends. In an exception, Segrin and Flora (1998) compared college undergraduate students' verbal behaviors in conversations with friends to conversations with strangers. Half of the depressed participants (those with *BDI* scores greater or equal to 12) were invited to the laboratory with a close friend, while the other half was matched with an unfamiliar peer. (Close friends were not assessed for level of depressive symptomatology.) The dyads were instructed to discuss their day and any other topics that emerged in conversation. When conversing with friends (as

compared to strangers), depressed adolescents used more negative language, including criticism, negative solutions, justifications, disagreements, and negative self-disclosure. Surprisingly, they found that depressed individuals used more partner-focused speech (which included utterances that reflected an understanding of the partner's experience by the speaker, such as a confirmatory statement) than nondepressed youth, especially in conversations with friends.

Topics of Disclosure

The research concerning topics of disclosure is somewhat sparse. In general, youth disclose more intimate information to friends than nonfriends (Rotenberg & Sliz, 1998). The topics of disclosure may depend on the gender of the individuals disclosing. Girls' conversations with best friends tend to be more tightly focused and cover a smaller number of topics than boys' conversations (Tannen, 1990). Research on interpersonal relationships suggests that individuals approach friendships with a specific type of orientation that may be gender-specific (Cantor & Malley, 1991; McAdams, 1984). Girls tend to be relationship-oriented and focused on receiving peer approval, whilst boys tend to be more activity-focused (Rose & Rudolph, 2006; Rudolph & Conley, 2005). More specifically, girls are more likely to share information about interpersonal problems and concerns than are boys (Buhrmester & Prager, 1995). These findings suggest that topics of disclosure vary by gender, with girls discussing problems relating to interpersonal relationships and boys discussing problems relating to activities.

In one of the most thorough investigations of disclosure topics, Carlson, Schwartz, Luebbe, and Rose (2006) asked 10th grade same-sex friend dyads to discuss

problems for 16 minutes while being videotaped. Dyads discussed an average of five problems in that time. Evidence for gender differences in problem types was found. *Girls* were most likely to discuss problems about other close friends, whereas *boys* were most likely to discuss problems about extra-curricular activities. Other types of problems discussed included those with romantic partners, peers in general, parents, other family members, and academics.

Importantly, distressed youth may have different concerns that they discuss in their friendships. Heller and Tanaka-Matsumi (1999) matched depressed adolescents (ages 13 through 18) with a non-depressed peer (within 3 years of age of each other). Dyads were instructed to discuss two topic areas, “negative, sad experiences” and “positive, easy to discuss experiences.” Researchers found that the topics of conversation included friends positive, friends negative, family positive, family negative, hobbies, disease/sickness, death, sex, drugs/alcohol/cigarettes, physical/sexual abuse, school, future goals, and other. In a study of college undergraduates, Jacobson and Anderson (1982) investigated spontaneous self-disclosure and depression. Depressed and nondepressed undergraduates waited in a room with an unfamiliar peer (a confederate) while researchers audiotaped their interactions. Depressed undergraduates made more negative self-statements than nondepressed adolescents. Additionally, in response to neutral remarks by the confederate, depressed undergraduates were more likely to self-disclose.

In sum, more research is needed to determine topics that youth disclose with their best friends. The aforementioned studies suggest that there are gender differences, with girls discussing relationship problems and boys discussing activity-

related problems. However, it is quite common in these studies for investigators to direct youth to discuss problems—these conversations do not spontaneously occur. Possibly, the topics that youth disclose naturally may differ. Finally, more attention is needed in the study of emotionally distressed populations. The concerns that anxious and depressed youth have may differ greatly from those of typical youth.

Responses to Disclosure

There are various ways in which youth may respond to self-disclosures. Derlega and Grezelak (1979) posited that there are five functions of disclosure. They include 1) receiving social validation, 2) gaining social control (or managing others' impressions of the self), 3) achieving self-clarification, 4) exercising self-expression, and/or 5) enhancing relationship development. Considering these functions of disclosure as well as those identified by Rubin et al. (2005), it would seem that most individuals expect their friends to respond to a self-disclosure in a kind and helpful manner. However, youth may respond in a more negative fashion, perhaps becoming irritated if they find the disclosure to be inappropriate.

Positive responses. Social psychologists argue that there is a tendency for individuals to respond to disclosure with their own disclosure, known as reciprocity of self-disclosure (Jourad, 1959; Miller & Kenny, 1986; Worthy, Gary, & Kahn, 1969). Reciprocity is thought to demonstrate a mutual understanding, which is important to friendship at any age (Rotenberg & Sliz, 1998). Disclosure reciprocity is considered normative, especially in close relationships (Caltabiano & Smithson, 1983). In studies of disclosure reciprocity, researchers typically investigate whether individuals respond to a statement of self-disclosure with their own disclosure. In one

such study, Cohn and Strassberg (1983) played prerecorded disclosures that varied in intimacy to 3rd graders and 6th graders. Participants were asked to respond by disclosing on topics varying in intimacy. The researchers found that youth spent more time providing intimate disclosures when they heard a high-intimate disclosure than when they heard a low-intimate disclosure. No age differences were found in this study.

However, other studies of youth have found that disclosure reciprocity may be a developmental skill. For example, Rotenberg and Chase (1992) created videotapes of children providing statements of varying levels of intimate disclosure. The videotapes were shown to children and young adolescents (in kindergarten, second, fourth, and sixth grades) who were asked to respond to the statements with information about themselves. The statements they responded to were of high, medium, and low intimacy. Young children (those in kindergarten and 2nd grade) did not demonstrate reciprocity of self-disclosure. Pre-adolescents (4th graders) demonstrated reciprocity during the high and low intimacy conditions. Young adolescents (6th graders) demonstrated reciprocity in all three conditions- high, medium, and low intimate disclosures. It is important to note that in the aforementioned studies, youth disclosed to unfamiliar peers, not friends.

These findings may not apply to the friendships of distressed youth as several studies have demonstrated that both anxious and depressed youth do not display normative patterns of disclosure. Anxious individuals fail to reciprocate their partner's level of disclosure, spend less time talking, and select less intimate topics than do non-anxious individuals (Bruch et al., 1989; Cheek & Buss, 1981; Leary,

Knight, & Johnson, 1987; Meleshko & Alden, 1993). Depressed individuals, on the other hand, disclose at higher levels of intimacy, especially about negative topics (Blumberg & Hokanson, 1983; Jacobson & Anderson, 1982). Furthermore, that which determines reciprocity of disclosure may not be internalizing symptoms, but rather, the similarity of partners.

Papsdorf and Alden (1998) matched anxious undergraduate women with a confederate. Confederates were female research assistants, two of who were not anxious and two of who indicated moderate anxiety. Papsdorf and Alden (1998) found that confederates were not different from each other on any of the dependent variables; thus, all data were combined. The dyad was instructed to get to know each other using a list of provided topics. They found that anxiety did not predict self-disclosure; rather intimacy of disclosure predicted ratings of similarity, which impacted partners' liking of each other and desire for future contact. While these researchers did investigate potential partner differences on dependent variables, they did not assess the differences in dyads with two anxious females versus dyads with only one anxious female. It is also important to note that many of these studies relied on undergraduate samples (e.g., Meleshko & Alden, 1993; Papsdorf & Alden (1998); thus, further research is needed to explore whether these findings hold true for youth. The current study addressed both of these limitations.

Negative responses. There is reason to believe that depressed and anxious youth may evoke negative responses from others. Building upon Coyne's (1976) interactional theory, Joiner, Metalsky, and colleagues (Joiner, 1994; Joiner, Alfano, & Metalsky, 1992; Joiner & Metalsky, 2001) have suggested that depressed individuals

seek reassurance about significant others' feelings for them. However, when the other provides reassurance, the depressed person doubts the support and seeks further reassurance. The repeated demands for assurance frustrate the other and erode the relationship. Research has verified a link between excessive reassurance seeking and depressive symptoms, but many of these studies were conducted with adults (e.g., Gotlib & Beatty, 1985; Gotlib & Robinson, 1982; Strack & Coyne, 1983).

In recent years, there have been some studies conducted with children and adolescents. Studies of undergraduate samples have replicated these patterns, showing that depressed adolescents are more likely to exhibit an excessive reassurance seeking style and, thus, be more likely to be rejected by significant others (e.g., Joiner, 1994; Joiner et al., 1992; Joiner & Metalsky, 2001; Joiner, Metalsky, Katz, & Beach, 1999). In a study of psychiatric inpatients, ages 7 through 17, Joiner (1999) found that depressive symptoms were associated with self-reported interpersonal rejection, especially among those who indicated an excessive reassurance seeking style. Age differences were not found, but a limitation to this study is that the sample was rather small ($N= 68$) and may not have provided enough variability for developmental analyses. Another study of psychiatric inpatient males also found that depressive symptoms were associated with self-reported interpersonal rejection, especially among those who indicated an excessive reassurance seeking style (Joiner & Barnett, 1994).

In the only published study of non-clinical youth, Prinstein and colleagues (Prinstein, Borelli, Cheah, Simon, & Aikins, 2005) gathered information over the course of three years on peer acceptance, friendship quality and stability, and

depressive symptoms from youth in the 6th through 8th grades. They found that depressive symptoms were associated with less stability in friendships and with increases in perceptions of negative friendship quality. Girls and boys did not report significantly different levels of reassurance-seeking behaviors. However, it was only for girls that reassurance-seeking had a significant negative consequence on friendship, and this relation depended on the reporter. Adolescent girls reporting on their own behaviors did not perceive their own reassurance-seeking behaviors to be responsible for decreases in positive friendship quality. However, their friends' reports indicated such a relation. Furthermore, for girls, increasing levels of reassurance-seeking were predicted by depressive symptoms and peer rejection combined with perceptions of negative friendship quality. These findings highlight the importance of considering individuals' perceptions and the role perspective plays in interpersonal relationships.

It is important to note that these studies utilized self-report scales. The only observational study of excessive reassurance seeking was conducted with college undergraduate students (Joiner & Metalsky, 2001). Additionally, there have been few investigations of excessive reassurance seeking and anxiety (e.g., Burns, Brown, Plant, Sacs-Ericsson, & Joiner 2006; Joiner & Schmidt, 1998). Considering the comorbidity of depression and anxiety along with the similarity in behavioral manifestations, it seems quite likely that the current findings may apply to anxious individuals as well. Studies do suggest that negative reactions from others perpetuate the negative social expectations and avoidance found in anxious individuals (Alden & Bieling, 1997; Clark & Wells, 1995). However, studies assessing whether excessive

reassurance-seeking predicts anxiety have found no evidence for this relation (Burns et al., 2006; Joiner & Schmidt, 1998) and suggest that excessive reassurance-seeking is specific to depression. Both of these studies utilized college undergraduate samples; more work is needed with other age groups.

One may also view these negative responses as part of a “misery loves company” scenario, which has been suggested for shy, withdrawn children (Rubin et al., 2006). Rubin and colleagues found that shy/withdrawn children (in the 5th grade) were more likely to befriend other shy/withdrawn children and that these friendships tended to be lower in quality than those of typical children. They hypothesized that the coping of two shy/withdrawn children who have poor self-perceptions and trouble with peers may lead to internalizing problems. It seems reasonable to extend this line of thought to the friendships of anxious/depressed youth.

Ambiguous responses. Finally, youth may not respond in such clear-cut positive or negative ways to self-disclosure. Their responses may be more conversational. Co-rumination, a relatively new construct, refers to excessively discussing problems within a dyadic relationship (Rose, 2002; Rose, Carlson, & Waller 2007). It integrates the construct of intimate disclosure with a social, interactive form of rumination. Co-rumination includes frequently discussing problems, discussing the same problem repeatedly, *mutual* encouragement of discussing problems, speculating about problems, and focusing on negative feelings. In the context of co-rumination, this sharing of negative feelings is thought to be maladaptive (Rose, 2002; Rose, Carlson, & Waller, 2007). Since this construct is in its infancy, currently, there are only two published studies of co-rumination. It is

important to note, however, that this construct has received much attention in the peer relationships literature. A search in the database PsycINFO revealed that Rose's (2002) initial study has been cited 44 times in the past few years.

In the first study, Rose (2002) assessed co-rumination, friendship, and internalizing symptoms in children in grades three, five, seven, and nine. She found that co-rumination was related to high quality, close friendships, and internalizing symptoms of anxiety and depression. There also were age and gender "main effects," with girls reporting co-rumination more than boys, and adolescent girls co-ruminating more than any other group. These higher amounts of co-rumination helped to account for girls' higher friendship quality and greater internalizing symptoms. Thus, Rose (2002) suggests that higher quality friendships may provide an opportunity for co-rumination, which may lead to more emotional distress.

In a recent study, Rose, Carlson and Waller (2007) conducted a 6-month longitudinal study with children and adolescents examining whether co-rumination served as both a risk factor for internalizing symptoms and a protective factor for friendship problems. Youth in the 3rd, 5th, 7th and 9th grades completed self-report questionnaires on co-rumination, friendship quality, depression and anxiety. Significant gender differences emerged. Among girls, co-rumination predicted increases in self-report depressive and anxious symptoms along with increased positive friendship quality, which contributed to greater co-rumination. Among boys, co-rumination did not predict increases in depressive and anxious symptoms, only increased positive friendship quality. Interestingly, developmental differences did not emerge, which may reflect the young age of this sample. The results of this study

indicate that how boys and girls approach problems in their friendships may differ and, furthermore, that this difference may be linked with adjustment outcomes.

Both of these studies relied entirely on self-reports. To address this limitation, at a recent meeting of the *Society for Research on Child Development*, Rose and colleagues (Rose, Schwartz, & Carlson, 2005) presented findings from an observational study of co-rumination. Forty-eight 10th grade friend dyads completed questions and an observational segment. Upon arriving at the laboratory, participants completed the *FQQ*, *CDI*, *RCMAS*, and generated a problem that they were willing to discuss with their friend. Friends were brought together for a 16-minute period during which they were instructed to discuss their problems. Researchers used a Likert scale to rate the degree to which each dyad co-ruminated. Specifically, they assessed the extent to which each dyad rehashed problems, encouraged problem talk, speculated about problems, and dwelled on negative affect. The researchers found that females co-ruminated more than did boys. Observed co-rumination was positively related to both friendship quality and internalizing symptoms of anxiety and depression. Evidence from this work is preliminary, but may suggest why girls with strong friendships are *not* buffered against symptoms of anxiety and depression.

There are several key limitations to the study conducted by Rose and colleagues (Rose et al., 2005). First, the findings must be interpreted with caution due to the small sample size. Second, participants were instructed to discuss their problems, rather than allowing these conversations to occur naturally, which may suggest that the study simply analyzed how well participants followed directions, rather than the natural occurrence of co-rumination. Furthermore, participants were

only given 16 minutes of discussion time. Part of Rose's (2002) original definition of co-rumination was the term "excessive"; discussing a topic for 16 minutes hardly seems to be excessive. Observing problem talk that occurs spontaneously and over longer amounts of time may strengthen the ecological validity of the study of co-rumination.

Thus, there is evidence for a variety of ways youth may respond to disclosures within their best friendships. Youth may offer supportive responses, such as reciprocating a disclosure with their own. Or, they may offer negative responses, such as rejection. Finally, the response may be neither positive nor negative, but ambiguous as in the case of co-rumination. Many of the disclosure studies were conducted with normative youth samples or non-friend dyads (e.g., Cohn & Strassberg, 1983; Rotenberg & Chase, 1992). There is growing evidence to suggest that emotionally distressed youth may respond in ways that differ from normative patterns (Meleshko & Alden, 1993; Jacobson & Anderson, 1982), but additional research is needed, specifically in the context of a best friendship.

Need for Observational Studies

There is a pronounced need for observational studies directly examining natural interactions between distressed youth and their friends. In most of the aforementioned studies, youth were directed to act in a specific manner (e.g., discuss their day, Segrin & Flora, 1998). There have been few published studies in which researchers simply observe youth interacting; most of these studies have focused on observations of peers, not best friends. In one such study, Altmann and Gotlib (1988) investigated the psychosocial functioning of 4th and 5th grade children. Based on both

self-report and peer-reports of depressive symptomatology, twenty depressed and twenty nondepressed children were identified. Each child was observed at 6-second intervals for a 6-minute period on each of 2 days during recess. Each child was coded as either standing alone, playing alone, initiating interaction, being approached by another child to interact, in the process of interacting, in the process of interacting but alone, engaged in negative or aggressive interaction, or uncodable. Children also completed self-report measures on mood and self-perceptions. They found that compared to nondepressed children, depressed children spent more time alone and less time interacting with their peers. When depressed children were interacting with their peers, they demonstrated more negative or aggressive behaviors. Although they spent less time interacting with others, the depressed children did attempt to initiate more interactions and were approached by peers more frequently than nondepressed children. Furthermore, compared to nondepressed children, the depressed children rated themselves as less socially competent. While this study certainly sheds light on the social interactions of depressed children, it would be advantageous to study the interactions specifically between a distressed child and his/her best friend. The ways in which a child interacts with a best friend may be quite different from how he/she interacts with their general peer group.

In another study of youth ages 7 through 12, Rudolph, Hammen, and Burge (1994) explored the role of interpersonal functioning and symptoms of anxiety and depression. They collected self-reports of depression, anxiety, interpersonal problem-solving, and social behavior, along with teacher ratings of social competence and behavioral problems. Researchers identified a group of children who were low on

depressive symptomatology (*CDI* scores ≤ 4) and a group that was high on depressive symptomatology (*CDI* scores ≥ 9). These children were assigned same-age, same-gender partners who were unfamiliar to them and self-reported moderate distress. These 36 children (20 girls, 16 boys) subsequently visited the laboratory for an interaction task assessing conflict-negotiation skills. During the task, dyads were presented with two models build of colored blocks. Children were told to select a leader who would choose the model for them to recreate. They were told that whoever constructed an identical model would win a prize. The children were given blocks to share- enough to complete a single model or to partially build two separate models. After 10 minutes, the children were asked to decide on the distribution of two unequal prizes. After completing the task, the children participated in a short interview. Researchers coded this interaction using a Likert scale for ratings of conflict-negotiation competence, affect regulation, dyadic quality code of adaptive interactions, and a peer response code.

Rudolph et al. (1994) found that depressive symptoms were related to peer interaction difficulties. Specifically, they found that the high-*CDI* group of children reported fewer sociable and more hostile problem-solving strategies, and were described by teachers as being more rejected by peers compared to the low-*CDI* group. On the interaction task, high-*CDI* children displayed increased conflict along with decreased collaboration, joint problem-solving, and mutuality compared to their low-*CDI* peers. Furthermore, partners of high-*CDI* children reported that they liked playing with their peers less than those who interacted with low-*CDI* children. They also found that decreased sociability, increased hostility, and peer rejection seemed to

be specific to depressive symptoms, while decreased hostility was related specifically to anxiety.

In a third study, Baker, Milich, and Manolis (1996) found evidence for differences in self- and partner-perceptions on an interaction task among female adolescents. They paired dysphoric (*BDI* scores ≥ 10) and nondysphoric females (*BDI* scores ≤ 9) with a same-age non-dysphoric peer to complete a series of tasks, after which they completed several questionnaires. The tasks included a get-acquainted task and a problem-solving task. Researchers rated them on five bipolar, 6-point scales including Happy/Sad, Positive/Negative, Confident/Insecure, Friendly/Unfriendly, and Passive/Active both during the first and the last 3 minutes of the get-acquainted task. During the problem-solving task, adolescents were asked to imagine they had crash-landed on the moon and rank order the items that survived the crash by their usefulness in survival. Researchers rated each subject on two 6-point bipolar scales for this task: Happy/Sad and Involved/Uninvolved. After participants completed these two tasks, they completed a questionnaire assessing their present feelings (of hostility, anxiety, and depression) along with a questionnaire regarding their willingness to interact further with their partners, their acceptance of partners in various roles, and perceptions of self- and partner's behavior.

Baker et al. (1996) found that compared to nondysphoric females, dysphoric females evaluated their own performance less favorably, viewed their partners as making more critical comments toward them, and rated their partners as less positive and more negative overall. Most interestingly researchers did not find any differences between the observed emotional behavior of dysphoric and nondysphoric females.

However, the partners of dysphoric girls displayed more sadness and less positivity than did the partners of nondysphoric girls. These findings lend support to Coyne's (1987) interactional theory, suggesting that depressed individuals induce negative mood in their partners.

A limitation of these studies was that the partners were unfamiliar peers, rather than best friends. In one exception, Rockhill et al. (in press) observed best friend dyads of high- and low depressive symptom youth in the 3rd through 7th grades. Dyads were observed for thirty minutes while they played a cooperative and a competitive game. Observers coded the youth's positive and negative emotional expression. No significant differences were found in positive or negative emotional expression by high- or low depressive symptom youth. Significant differences were found, however, for their best friends. Best friends of high depressive symptom youth displayed more negative emotion during the cooperative task and less positive emotion during the competitive task compared with the best friends of low depressive symptom youth. Thus, it appears that depressive symptoms may elicit more negative emotion and less positive expression from best friends. It is important to note that the depressive symptom level of the friends was not reported in this study.

While these studies suggest that distressed youth have difficulty in their peer interactions, certainly additional work is needed. It is important to assess not only how youth interact with their peer group at large, but also with their best friends. Furthermore, few researchers have identified the emotional characteristics of the person(s) interacting with the targets. Thus, the results of their analyses depended on who was identified as the target- a distressed or typical individual. The current study

adds to the literature by providing an examination of best friendships, while paying attention to the characteristics of both the target and the friend. As noted earlier, best friendships offer a unique context for development and are particularly important to young adolescents (Berndt, 1999, 2004.) The formation of healthy friendships has been hypothesized as playing a preventive role against the development of psychopathology (Oland & Shaw, 2005). Thus, a study of how distressed and typical adolescents think about their friendships and observations of how they interact with their friends is extremely timely and significant.

Overview of Study

The current study utilized data from Dr. Kenneth H. Rubin's NIMH-funded project, "Friendship: The transitions to middle school and psychological adjustment" to examine the best friendships of anxious/depressed early adolescents. More specifically, the current study investigated whether youth befriend others of similar emotional distress, compared the friendship quality of distressed youth to typical (non-distressed) youth, and compared observations of self-disclosure in distressed and typical youth's friendships.

Data relevant to the current study were collected in a laboratory when youth were in the 5th and 6th grades. As part of this larger study, youth were invited to the laboratory with parents and a same-sex best friend (previously identified through mutual nominations). At the laboratory, the target youth, best friend, and mothers of both children completed a variety of questionnaires, including ratings of emotional distress (completed by mothers) and friendship quality (completed by the focal child and the best friend). In a large playroom, friendship dyads also participated in a

serious of videotaped tasks designed to be fun and enjoyable for the dyads. The tasks included free play, discussion of best times, co-solving moral dilemmas, recreating a model, and planning an imaginary weekend. Participants spent, on average, 1 hour completing all tasks.

The following hypotheses were tested:

- 1) *Similarity of friends*: Young adolescents were expected to be similar to their best friends in their levels of maternal-reported internalizing symptoms. No hypothesis was offered regarding developmental or gender differences.
- 2) *Quality of friendship*: Compared to typical youth, distressed youth were expected to rate their friendships lower in quality. Best friends of distressed youth also were expected to rate their friendships lower in quality compared to the best friends of typical youth. Sixth-grade dyads were expected to rate their friendship as higher in quality than 5th grade dyads, particularly regarding intimate disclosure. Girls were expected to rate their friendships as higher in quality than boys.
- 3) *Disclosure*: Compared to typical youth, distressed youth were expected to make more negative disclosures than typical youth, to initiate fewer disclosures, and to respond in more negative and co-ruminative ways. Sixth grade adolescents were expected to make more disclosures and to respond in more positive ways than 5th grade adolescents. Girls were expected to make more disclosures

about evaluative talk and peer talk, while boys were expected to make more disclosures about “other” talk.

Relations among reported friendship quality and observed disclosure were explored.

CHAPTER 3

Method

Participants

The current study utilized data from Dr. Kenneth H. Rubin's NIMH-funded project, "Friendship: The transitions to middle school and psychological adjustment." Participants were drawn from a large normative sample of fifth graders from eight public elementary schools and sixth graders from three public middle schools. In the Fall of the school year, youth completed a battery of questionnaires at their school including *friendship nominations* ($N= 826$ 5th graders; $N= 1398$ 6th graders); a sub-set of the sample was invited to the laboratory with a best friend and mothers for additional study ($N= 284$ 5th graders; $N= 382$ 6th graders). The mean age of the sample was 10.38 years ($SD= 0.53$) for the fifth graders, and 11.42 years ($SD= .51$) for the sixth graders. All of the participants who visited the laboratory had parental consent (consent rate= 100%). Although demographic information was not collected from participants at the school assessment, available demographic school information indicated similar county-wide ethnic and racial compositions of the elementary (40% Caucasian, 22% Hispanic/Latino, 22% African American, 15% Asian) and middle schools (43% Caucasian, 19% Hispanic/Latino, 23% African American, 15% Asian). A description of the sample for the current study appears below.

Procedure

Data collection for the fifth and sixth grades was conducted in a similar fashion. There were two phases of data collection: (1) assessments in the schools and (2) an assessment in the university laboratory. Participants were assessed in the

schools at the beginning of the school year and approximately seven months later near the end of the school year. During school data collection, friendship nominations (Bukowski et al., 1994) and peer nominations of social-behavioral characteristics were collected. Research assistants administered the questionnaires in group format in classrooms or larger schoolrooms (e.g., cafeterias). Participants were informed that their answers were confidential and were instructed not to discuss their responses with classmates. Each session lasted approximately one hour.

At the university laboratory, mutuality of friendship nominations was assessed. Only same-sex nominations were considered. Participants, their best friends, and their parents were invited to the laboratory to complete a series of questionnaires. Participants were paid (approximately \$100.00) for completing the laboratory assessment. Of interest to the current study are maternal ratings of emotional distress (*Child Behavior Checklist*; Achenbach, 1991), youth self-reports of self-worth (*What I'm Like: Self-Perception Profile for Children*; Harter, 1985), an item assessing friendship duration, and a youth self-report pertaining to friendship quality (*Friendship Quality Questionnaire- Revised*; Parker & Asher, 1993). Participants also participated in videotaped friendship tasks that took place in a laboratory playroom. These tasks included free play, a discussion of best times with the friend, co-solving moral dilemmas, recreating a knot (5th grade) or an origami model (6th grade), and planning an imaginary weekend. On average, participants spent a total of one hour completing all tasks, giving them ample time to become comfortable in the playroom. These sessions were subsequently coded for observed

disclosure using a coding taxonomy developed specifically for this dissertation (*Negative Self Speech and Problem Talk Scale*).

Measures

Friendship nominations (Bukowski, Hoza, & Boivin, 1994). Participants were asked to write the names of their “very best friend” and their “second best friend” and their “third best friend” at their school. Children were only allowed to name same-sex best friends, and only *mutual* (reciprocated) best friendships were subsequently considered. Children were considered to have a mutual best friendship if their first best friend choice reciprocated the nomination as one of their three best friends. This procedure is similar to the one used to identify best friendships specified by other friendship researchers (e.g. Hodges, Boivin, Vitaro, & Bukowski, 1999). Questions regarding gender, date of birth, household composition, and ethnicity were also included in this measure.

Extended Class Play (ECP): Wojslawowicz Bowker, Rubin, Burgess, Rose-Krasnor, & Booth-LaForce, 2006). Participants completed an extended version of the *Revised Class Play (RCP)*; Masten, Morison, & Pellegrini, 1985). The children were instructed to pretend to be the directors of an imaginary class play and to nominate their classmates for positive and negative roles. In both grades, only nominations for participating children were considered, and to eliminate possible sex-stereotyping, only same-sex nominations were utilized (Zeller, Vannatta, Schafer & Noll, 2003). Exploratory factor analyses using principal components method with varimax rotation and confirmatory factor analyses supported an identical five-factor model in both the 5th and 6th grades: Aggression, Shyness/Withdrawal, Victimization/Exclusion,

Prosocial Behavior, and Sociability. For the current study, only the prosocial behaviors and sociability factors were used. The alpha for the prosocial behaviors factor (5 items) was .82 and the alpha for the sociability factor (5 items) was .87.

Child Behavior Checklist (CBCL; Achenbach 1991) The CBCL is a 118-item standardized checklist designed to assess behavior and social competence problems in children. The *CBCL* yields syndrome scores, including Withdrawal, Somatic Complaints, Anxiety/Depression, Social Problems, Thought Problems, Attention Problems, Delinquent Behavior, and Aggressive Behavior, as well as two broadband groupings of Internalizing symptoms and Externalizing symptoms. Participants were drawn from a community sample; thus, to avoid truncation of data that occurs when using *T* scores of the Anxious/Depressed syndrome scale, the internalizing broadband score was used to identify youth as distressed or typical in this study. The Internalizing grouping comprises the Withdrawn, Somatic Complaints, and Anxious/Depressed subscales. Sample items include rating how often the child is sad, complains of being tired, and feels worthless. The alpha for this subscale is (31 items) .84. Most often mothers completed the *CBCL*; however, when maternal ratings were not available, fathers completed this questionnaire ($N= 3$ adolescents: 1 female distressed; 2 female typical). In the event that a youth participated in this study in both 5th and 6th grades, the most recent data available (i.e., sixth grade) were used.

What I'm Like: Self-Perception Profile for Children (SPPC; Harter, 1985) The Self-Perception Profile for Children (*SPPC*) is a 36-item self-reporting scale designed to assess children's domain-specific judgments of their competence, as well as a global perception of their worth or esteem as a person. The *SPPC* is a 36-item scale

that consists of five domain specific sub-scales (scholastic competence, social acceptance, athletic competence, physical appearance, behavioral conduct) and one global measure of self-worth. Each subscale is measured by six items. For the current study, only the global measure of self-worth was used. The alpha for this subscale (5 items) was .71.

Friendship duration. Participants were asked to respond to a single item assessing the duration of their friendship, “How long have you been friends?” Participants’ responses were recorded in months.

Friendship Quality Questionnaire- Revised (FQQ; Parker & Asher, 1993). The *FQQ* is a 40-item Likert questionnaire that assesses the youth’s self-perceived quality of friendship with his/her best friend. The *FQQ* yields six subscales: companionship/recreation, validation/caring, help/guidance, intimate disclosure, conflict/betrayal, and conflict resolution. The conflict/betrayal factor is reverse-scored so that higher scores indicate greater perceived friendship quality. A total friendship quality score is computed by adding the mean scores of the other subscales (with the exception of the conflict/betrayal subscale). Only the validation/caring, help/guidance, intimate disclosure, and total positive friendship quality subscales were used for analyses in the current study. Their alphas were validation/caring subscale (10 items): .81, help/guidance subscale (9 items): .87, intimate disclosure subscale (6 items): .76, and total positive friendship quality subscale (33 items): .93. Correlations among these subscales ranged from .61 to .83, $p < .01$.

Observed disclosure (Negative Self Speech and Problem Talk Scale). In accordance with Rotenberg’s (1995) definition, disclosure talk included discussion of

daily thoughts and concerns or more serious problems. Thus, negative self-speech and problem talk were indicative of disclosure. Each time an individual made a statement of disclosure, the start time, the individual's ID and the topic were noted. When that individual stopped speaking, the stop time was noted. Then, the friend's ID and response were noted along with the corresponding start and stop time of speech. Coding continued in this manner until the dyad stopped disclosing. Analyses on total seconds, total number of instances and topics of disclosure were conducted at the dyadic level, while analyses on disclosure initiations and responses were conducted at the individual level. Total seconds were calculated by summing all seconds devoted to disclosure by the dyad. Then, the total number of instances of disclosure was summed for the dyad. A list of examples of all topics and all types of responses is provided in Appendix E.

The topic of disclosure was identified using a checklist based on work by Carlson and colleagues (Carlson, Schwartz, Luebke, & Rose, 2006) who classified the problem talk of 10th grade friendship dyads into the categories of close friends, romantic partners, peers in general, parents, other family members, academics, and extra-curricular activities. This list was adapted for use with young adolescents. The topic choices included negative self-speech, negative dyad speech, general peer problems, friend (in dyad) problems, other peer (not in dyad) problems, family problems, academic problems, romantic problems, and other problems (not specified). These topics were classified using three categories: (1) *Evaluative Talk*, which included negative self speech and negative dyad speech, (2) *Peer Talk*, which included general peer problems, friend (in dyad) problems and other peer (not in

dyad) problems, and (3) *Other Talk*, which included family problems, academic problems, romantic problems and other problems (not specified). Total instances of conversation about each topic were calculated so that each dyad had a score for *Evaluative Talk*, *Peer Talk* and *Other Talk*. It is important to note that positive statements were not included in this coding scheme.

The friend's response to the disclosure also was noted, using a checklist of responses derived from work on negative talk and problem talk between friends (Joiner & Metalsky, 2001), conversation analysis (Segrin & Flora, 1998), and co-rumination work by Rose, Schwartz, and Carlson (2005). The first category was *Positive Responses*, which included imitative (reciprocated statement), sympathetic responses, negating, and offering help. The second category was *Negative Responses*, which consisted of ignoring, laughing, negative reinforcement, positive comparison and acknowledgement. The final category was *Co-Ruminative Responses*, which included rehashing the details of the problem, dwelling on negative affect, speculating about the causes of the problem, and encouraging the problem talk.

College undergraduate students were trained to use this taxonomy using randomly chosen videotapes. Training in the use of the coding system was continued until the level of agreement between each of two coders (both unfamiliar with the target status of the children) reached 80% for 20% of the tapes. Inter-observer agreement was obtained by calculating Cohen's kappa (Bakeman & Gottman, 1986).

Study Sample Characteristics.

The sample for the current study included 262 adolescents (142 females, 120 males). Of these adolescents, 70 were in the 5th grade (34 females; 36 males) and 192 were in the 6th grade (108 females; 84 males). The sample selected for the current study was much smaller than the original pool for the following reasons: Participants whose mothers or fathers failed to complete the CBCL and did not have a measure of emotional distress and participants whose best friends' parents failed to complete the *CBCL* and did not have a measure of emotional distress. Thus, only participants with indices of internalizing symptoms were eligible for the current study. The demographics of the study sample are highly comparable with those of the original participant pool. The overall mean age of the sample was 11.17 ($SD= 0.69$); the mean for the 5th graders was 10.30 years ($SD= 0.50$) and the mean for the 6th graders was 11.41 years ($SD= .51$). All of the participants who visited the laboratory had parental consent (consent rate= 100%).

The sample for the current study was diverse. Approximately 60% of the young adolescents were European American, 10% African American, 15% Asian American, and 7% Latino. The majority of mothers (85.5%) had completed at least some college at the time their children participated in this study: 16.8% reported having completed some college, 27.9% reported having a university degree, 8.4% reported having completing some graduate school, and 32.4% reported having a graduate degree. The majority of fathers (77.1%) had completed at least some college at the time their children participated in this study: 11.1% reported having completed

some college, 26.7% reported having a university degree, 4.2% reported having completing some graduate school, and 35.1% reported having a graduate degree.

Identification of distressed and typical youth. To identify distressed and typical adolescents, the internalizing symptoms subscale of the *CBCL* was used. *Distressed* youth were those participants with Internalizing symptoms *T* scores greater or equal to 60, while participants with Internalizing symptoms *T* scores less than 60 were classified as *Typical*. This cut-off was selected in accord with procedures described by Achenbach (1991) to identify those at the borderline level of distress. Using this identification procedure, 59 adolescents (28 females; 31 males) were identified as *Distressed* and 203 adolescents (113 females; 89 males) were identified as *Typical*. *Distressed* adolescents had a mean Internalizing symptoms *T* score of 64.88 (SD= 3.82); *Typical* adolescents had a mean Internalizing symptoms *T* score of 46.65 (SD= 7.81).

Because the analyses involved friendship dyads, one adolescent was considered the “target” and the other adolescent was placed in the “best friend” group for analyses. If two distressed adolescents shared a best friendship, the adolescent with the higher internalizing symptoms score was selected as the “target” and the other adolescent was placed in the “best friend of distressed adolescents” group. If two typical adolescents shared a best friendship, the adolescent with the lower internalizing symptoms score was selected as the “target” and the other adolescent was placed in the “best friend of typical adolescents” group. In the case that scores were identical, the target was randomly selected. Thus, analyses will focus on how the presence of a distressed friend may affect the friendship experience. Similar

analyses have been conducted to assess individual differences in friendship (e.g., Rubin et al., 2006).

Thus, there were 131 friendship dyads available for analyses. Of these, 48 were considered Distressed Dyads (24 female dyads; 24 male dyads) and 83 were considered Typical Dyads (47 female dyads; 36 male dyads). The mean score of *targets* in Distressed Dyads was 65.48 ($SD = 3.91$) with a minimum score of 61 and a maximum score of 81. The mean score of *friends* in Distressed Dyads was 50.13 ($SD = 9.84$) with a minimum score of 33 and a maximum score of 65. The mean score of *targets* in Typical Dyads was 42.58 ($SD = 6.84$) with a minimum score of 33 and a maximum score of 56. The mean score of *friends* in Typical Dyads was 50.69 ($SD = 6.38$) with a minimum score of 39 and a maximum score of 59.

CHAPTER 4

Results

Preliminary Analyses

Prior to examining the best friendships of young adolescents identified as *Distressed* and *Typical*, preliminary analyses were performed to obtain descriptive information on the sample. This descriptive information is contained in Table 1. First, to validate maternal ratings of distress, a *t*-test was performed comparing *Distressed* adolescents to *Typical* adolescents on global self-worth. (One *Distressed* adolescent did not have data on this measure.) As expected, *Distressed* adolescents ($M = 3.27$, $SD = .63$) reported lower global self-worth than did *Typical* adolescents ($M = 3.47$, $SD = .48$), $t(77) = -2.26$, $p < .05$. Global self-worth was significantly related to internalizing symptoms, $r = -.23$, $p < .001$.

Second, to ensure that the friendships of *Distressed* and *Typical* adolescents did not differ from each other in terms of relationship context, the duration of friendship was compared. For this set of analyses, the target's report of friendship duration was used (43 *Distressed* adolescents; 83 *Typical* adolescents). Five *Distressed* adolescents had missing data. As expected, *Distressed* adolescents (M length of friendship = 43.52 months; $SD = 29.15$) did not report having friendships that were significantly different in months than those of *Typical* adolescents (M length of friendship = 45.22 months; $SD = 28.86$), $t(124) = -.31$, *ns*.

Lastly, to assess whether the *Typical* adolescents in the current study differed from adolescents in the original sample, *t*-tests were conducted on the peer nominations of prosocial behaviors and sociability. To investigate these possible

differences, *Typical* adolescents ($N = 202$) in the current study were compared to participants from the original sample pool who had participated in the school assessment but not the laboratory assessment ($N = 1053$). Results indicated that *Typical* adolescents were higher on peer ratings of prosocial behaviors ($M = .37, SD = .85$) than original participants who never visited the laboratory ($M = -.15, SD = .70$), $t(1253) = 8.20, p < .001$. *Typical* adolescents also were higher on peer ratings of sociability ($M = .30, SD = 1.00$) than original participants who never visited the laboratory ($M = -.12, SD = .77$), $t(1253) = 5.62, p < .001$.

Similarity of Friends

To investigate similarity of levels of maternal-rated distress, intraclass correlations were performed for *Distressed Dyads* ($N = 48$) and *Typical Dyads* ($N = 83$). Significant correlations were viewed as indicative of similarity, a procedure consistent with previous research (e.g., Haselager et al., 1998; Rubin et al., 2006). Contrary to expectations, *Distressed Dyads* were *not* similar in levels of maternal-rated distress ($r = .21, ns$). On the other hand, *Typical Dyads* were similar in levels of distress ($r = .53, p < .001$). An analysis involving Fisher's r to z transformation revealed that the difference between these correlations (similarities between distressed targets and their best friends and typical targets and their best friends) were significant ($z = -2.02, p < .05$).

The same patterns emerged when analyses were performed separately by grade. Among 5th grade youth, *Distressed Dyads* ($N = 11$) were *not* similar in levels of distress ($r = .35, ns$) while *Typical Dyads* ($N = 24$) were similar in levels of distress ($r = .51, p < .01$). Among 6th grade youth, *Distressed Dyads* ($N = 36$) were *not* similar

in levels of distress ($r = .18, ns$) while *Typical Dyads* ($N = 59$) were similar in levels of distress ($r = .53, p < .001$). An analysis involving Fisher's r to z transformation revealed that the difference between these correlations was not significant for 6th grade youth ($z = -1.86, ns$). Sample sizes for 5th grade youth were too small to conduct Fisher's r to z transformation.

Lastly, analyses conducted separately by gender indicated similar findings. Among boys, *Distressed Dyads* ($N = 24$) were *not* similar in levels of distress ($r = .28, ns$) while *Typical Dyads* ($N = 37$) were similar in levels of distress ($r = .38, p < .01$). Among girls, *Distressed Dyads* ($N = 23$) were *not* similar in levels of distress ($r = .07, ns$) while *Typical Dyads* ($N = 46$) were similar in levels of distress ($r = .66, p < .001$).¹ An analysis involving Fisher's r to z transformation revealed that the difference between these correlations was not significant for boys ($z = -.40, ns$). However, an analysis involving Fisher's r to z transformation revealed that the difference between these correlations was significant for girls ($z = -2.67, p < .01$).

Quality of Friendship

Relation between Internalizing Symptoms and Quality of Friendship

Prior to examining differences in ratings of friendship quality, correlations were conducted to assess the relation between internalizing symptoms and the subscales of friendship quality. For the entire sample ($N = 260$), internalizing symptoms were negatively related to validation/caring ($r = -.16, p < .01$), help/guidance ($r = -.16, p <$

¹ To consider the individual's self-perceptions, intraclass correlations were conducted on target's self-reported global self worth and friend's self-reported global self worth. Significant findings did not emerge for distressed dyads ($r = .22, ns$) or typical dyads ($r = .02, ns$). However, when males and females were analyzed separately, a significant finding did emerge. Among males, distressed dyads were similar on global self worth ($r = .39, p < .05$). Typical male dyads ($r = -.07, ns$), distressed female dyads ($r = .04, ns$) and typical female dyads ($r = .07, ns$) were not similar on global self-worth.

.01), intimate disclosure ($r = -.12, p < .05$), and total positive friendship quality ($r = -.15, p < .01$).

Target's Perspective

To compare differences in ratings of friendship quality, this first set of analyses focuses on the target's perspective of the friendship. For each of the subscales of friendship quality, a 2 (Target: Distressed, Typical) x 2 (Gender) x 2 (Grade) ANOVA was performed. All ANOVAS utilize Type III Sum of Squares to adjust for unequal cell size. One *Distressed* adolescent was missing data. All means and standard deviations are reported in Table 2.

Validation/Caring. Distressed targets rated their best friendships as lower in validation and caring ($M = 4.03, SD = .68$) than did Typical targets ($M = 4.43, SD = .46$), $F(1, 129) = 8.53, p < .02, n_p^2$ (partial eta squared) = .07. There were no significant main effects for gender or grade, and there were no significant interactions.

Help/Guidance. Distressed targets rated their best friendships as lower in help and guidance ($M = 3.70, SD = .72$) than did Typical targets ($M = 4.02, SD = .63$), $F(1, 129) = 8.16, p < .01, n_p^2 = .06$. There were no significant main effects for gender or grade, and there were no significant interactions.

Intimate disclosure. Male targets rated their best friendships as lower in intimate disclosure ($M = 3.40, SD = .90$) than did female targets ($M = 4.10, SD = .67$), $F(1, 129) = 13.13, p < .001, n^2 = .10$. There were no significant main effects for either target status or grade, and there were no significant interactions.

Total positive friendship quality. Distressed targets rated their best friendships as lower in total positive friendship quality ($M = 3.86$, $SD = .64$) than did Typical targets ($M = 4.13$, $SD = .48$), $F(1, 129) = 8.22$, $p < .01$, $n_p^2 = .06$. There were no significant main effects for gender or grade, and there were no significant interactions.

Best Friend's Perspective

This second set of analyses focuses on the best friend's perspective of the friendship to compare differences in ratings of friendship quality. For each of the subscales of friendship quality, a 2 (Best Friend: Friend of distressed target, Friend of typical target) x 2 (Gender) x 2 (Grade) ANOVA was performed. All ANOVAS utilize Type III Sum of Squares to adjust for unequal cell size. The friend of one *Distressed* adolescent was missing data. All means and standard deviations are presented in Table 3.

Validation/Caring. Male friends rated their best friendships as lower in validation and caring ($M = 3.97$, $SD = .72$) than did female friends ($M = 4.29$, $SD = .65$), $F(1, 129) = 4.00$, $p < .05$, $n_p^2 = .03$. There were no significant main effects for friend status or grade, and there were no significant interactions.

Help/Guidance. There were no significant main effects for friend status, gender or grade, and there were no significant interactions.

Intimate disclosure. Male targets rated their best friendships as lower in intimate disclosure ($M = 3.34$, $SD = .93$) than did female targets ($M = 3.87$, $SD = .88$), $F(1, 129) = 6.45$, $p < .01$, $n_p^2 = .05$. There were no significant main effects for friend status or grade, and there were no significant interactions.

Total positive friendship quality. There were no significant main effects for friend status, gender or grade, and there were no significant interactions.

Distressed Dyads

The *Distressed Dyads* consisted of both Distressed-Distressed friend dyads ($N = 11$) and Distressed-Typical friend dyads ($N = 36$). These two subgroups were combined in previous analyses to maximize cell size; however, doing so may have masked important differences between them. Therefore, additional analyses (t - tests) were conducted on these two subgroups examining both the targets' and friends' perspectives. Analyses also were conducted examining the difference in perspective of the target and friend within the Distressed-Typical friend dyads.

Validation/Caring. When comparing the Distressed-Distressed dyads and the Distressed-Typical dyads, there was no significant difference on friendship ratings of validation/caring from the perspectives of targets or friends. Within the Distressed-Typical dyads, there also was no significant difference on friendship ratings of validation/caring between targets and friends.

Help/Guidance. There were no significant differences on any of the analyses concerning friendship ratings of help/guidance for the *Distressed Dyads*.

Intimate disclosure. There were no significant differences on any of the analyses concerning friendship ratings of intimate disclosure for the *Distressed Dyads*.

Total positive friendship quality. There were no significant differences on any of the analyses concerning friendship ratings of total positive friendship quality for the *Distressed Dyads*.

Dyadic Comparisons

Although *t*-tests did not distinguish between friends of Distressed and Typical young adolescents, it is important to note that for each index of friendship, the score was lower for friends of distressed youth. Given this observation, a dyadic score was computed by multiplying the target child's scores by the target child's friend's score². For each of the subscales of friendship quality, a 2 (Distressed dyad, Typical target) x 2 (Gender) x 2 (Grade) ANOVA was performed. All ANOVAS utilize Type III Sum of Squares to adjust for unequal cell size. Means and standard deviations for all dependent variables are presented in Table 4. Scores could not be calculated for two Distressed dyads. In one dyad, the target did not complete the FQQ; in the other dyad, the friend did not complete the FQQ.

Validation/Caring. Male dyads rated their best friendships as lower in validation and caring ($M = 16.48, SD = 4.04$) than did female dyads ($M = 18.62, SD = 4.13$), $F(1, 128) = 3.92, p < .05, \eta_p^2 = .03$. There were no significant main effects for dyad status or grade, and there were no significant interactions.

Help/Guidance. Distressed dyads rated their best friendships as lower in help and guidance ($M = 13.53, SD = 4.64$) than did Typical dyads ($M = 15.53, SD = 4.51$), $F(1, 128) = 4.83, p < .05, \eta_p^2 = .04$. There were no significant main effects for gender or grade, and there were no significant interactions.

Intimate disclosure. Distressed dyads rated their best friendships as lower in intimate disclosure ($M = 12.32, SD = 5.37$) than did Typical dyads ($M = 14.94, SD = 5.40$), $F(1, 128) = 4.98, p < .03, \eta_p^2 = .04$. Also, male dyads rated their best

² A product score was used to capture Hinde's (1987) notion that a relationship is more than the sum of its parts.

friendships as lower in intimate disclosure ($M = 11.58, SD = 5.10$) than did female dyads ($M = 16.12, SD = 4.99$), $F(1, 128) = 14.09, p < .001, n_p^2 = .10$. There were no significant main effects for grade and there were no significant interactions.

Total positive friendship quality. Distressed dyads rated their best friendships as lower in total positive friendship quality ($M = 14.56, SD = 4.19$) than did Typical dyads ($M = 16.65, SD = 3.76$), $F(1, 128) = 7.03, p < .01, n_p^2 = .06$. Also, male dyads rated their best friendships as lower in total positive friendship quality ($M = 14.75, SD = 4.05$) than did female dyads ($M = 16.91, SD = 3.76$), $F(1, 128) = 3.80, p < .05, n_p^2 = .03$. There were no significant main effects for grade and there were no significant interactions.

Similarities in the Ways that Friends View Quality

To compare similarities in ratings of friendship quality, a series of intraclass correlations was performed for *Distressed Dyads* ($N = 48$) and *Typical Dyads* ($N = 83$). *Distressed* targets and friends rated their friendships similarly on validation/caring ($r = .38, p < .01$), help/guidance ($r = .35, p < .01$), intimate disclosure ($r = .35, p < .01$) and total positive friendship quality ($r = .47, p < .001$). *Typical* targets and friends rated their friendships similarly on validation/caring ($r = .31, p < .01$), help/guidance ($r = .39, p < .001$), intimate disclosure ($r = .41, p < .001$) and total positive friendship quality ($r = .43, p < .001$). According to Cohen (1988), all of these correlations are moderate. To compare similarities in the way *Distressed* dyads versus *Typical* dyads rated their friendship quality, a series of r to z transformation was performed. These transformation revealed that there were no significant differences in the ways that *Distressed* dyads versus *Typical* dyads viewed

their friendship quality on validation/caring (z difference = .43, *ns*), help/guidance (z difference = -.25, *ns*), intimate disclosure (z difference = -.38, *ns*) and total positive friendship quality (z difference = .27, *ns*).

Observed Disclosure

Dyadic Analyses

Of 131 dyads, 65 dyads were observed engaging in disclosure. Of dyad type, 24 Distressed dyads (50%) and 41 Typical dyads (49.4%) engaged in disclosure talk. Twenty-two 5th grade dyads (62.86%) and 43 6th grade dyads (44.79%) engaged in disclosure talk. Twenty-eight male dyads (45.9%) engaged in disclosure talk and 37 female dyads (52.86%) engaged in disclosure talk. Chi-square analyses indicated that Distressed dyads were not more likely than Typical dyads to engage in disclosure talk, $\chi^2(1) = .00$, *ns*. Fifth-graders were not more likely than 6th graders to engage in disclosure talk, $\chi^2(1) = 3.35$, *ns*. Boys were not more likely than girls to engage in disclosure talk, $\chi^2(1) = .63$, *ns*. Results are displayed in Table 5-7.

ANOVAs then were conducted examining total seconds devoted to disclosure talk, total number of instances (or conversations) of disclosure talk and topics of disclosure talk. (A Type III Sum of Squares ANOVA to adjust for unequal cell size.) Means and standard deviations are presented in Table 8 and Table 9.

Total seconds of disclosure. Regarding total seconds devoted to disclosure talk, the mean was 5.79 ($SD = 13.78$) for all dyads, including those who engaged in zero seconds of talk. A 2 (Dyad: Distressed, Typical) x 2 (Grade) x 2 (Gender) ANOVA on all dyads revealed a main effect for gender, $F(1, 130) = 4.75$, $p < .05$, $\eta_p^2 = .04$. Female dyads engaged in more seconds of disclosure ($M = 7.66$, $SD =$

17.56) than did male dyads ($M = 3.64$, $SD = 6.93$). There were no significant main effects for dyad or grade, and there were no significant interactions.

Excluding dyads with zero seconds of talk, the mean was 11.66 ($SD = 3.83$). A 2 (Dyad: Distressed, Typical) x 2 (Grade) x 2 (Gender) ANOVA revealed a trend suggesting a main effect for gender, $F(1, 64) = 3.83$, $p < .06$, $n_p^2 = .06$. Female dyads engaged in more seconds of disclosure ($M = 14.49$, $SD = 22.12$) than did male dyads ($M = 7.93$, $SD = 8.45$). There were no significant main effects for dyad or grade, and there were no significant interactions.

Total instance of disclosure. The mean number of instances of disclosure was 1.04 ($SD = 1.60$). A 2 (Dyad: Distressed, Typical) x 2 (Grade) x 2 (Gender) ANOVA on all dyads revealed a main effect for grade, $F(1, 130) = 7.87$, $p < .01$, $n_p^2 = .06$. Fifth grade dyads engaged in more instances of disclosure ($M = 1.69$, $SD = 2.31$) than did 6th grade dyads ($M = .80$, $SD = 1.18$). A main effect for gender also was found, $F(1, 130) = 4.68$, $p < .05$, $n^2 = .04$. Female dyads engaged in more instances of disclosure ($M = 1.27$, $SD = 1.93$) than did male dyads ($M = .77$, $SD = 1.06$). There was no significant main effect for dyad and there were no significant interactions.

Excluding dyads with zero instances of talk, the mean was 2.09 ($SD = 1.72$). A 2 (Dyad: Distressed, Typical) x 2 (Grade) x 2 (Gender) ANOVA revealed a 3-way interaction, $F(1, 64) = 6.31$, $p < .02$, $n_p^2 = .20$. Because cell sizes were so small, the grade variable was dropped. A *t*-test confirmed that 5th grade youth did not differ significantly from 6th grade youth on instances of disclosure, $t(63) = 1.64$, *ns*. A 2 (Dyad) x 2 (Gender) ANOVA was conducted. A main effect for gender approached significant at $p < .07$, suggesting that females engaged in more instances of disclosure

talk ($M = 2.41$, $SD = 2.09$) than did males ($M = 1.68$, $SD = .94$). There was no significant main effect for dyad and there were no significant interactions.

Topics of disclosure. Of 136 instances of disclosure, 109 were conversations about Evaluative Talk (80.15%), 21 were Peer Talk conversations (15.44%) and 6 were Other Talk conversations (4.41%). ANOVAs on Peer Talk and Other Talk did not reveal any significant findings, most likely due to the small number of instances observed. A 2 (Dyad: Distressed, Typical) x 2 (Grade) x 2 (Gender) ANOVA on all dyads for Evaluative Talk revealed a main effect for grade, $F(1, 130) = 8.55$, $p < .01$, $n^2 = .07$. Fifth grade dyads engaged in more instances of evaluative talk ($M = 1.29$, $SD = 1.45$) than did 6th grade dyads ($M = .67$, $SD = 1.00$). There also was a main effect for gender, $F(1, 130) = 3.99$, $p < .05$, $n_p^2 = .03$. Female dyads engaged in more instances of evaluative talk ($M = .97$, $SD = 1.27$) than did male dyads ($M = .67$, $SD = 1.01$). There was no significant main effect for dyad, and there were no significant interactions.

Analyses also were conducted on Evaluative Talk only among dyads that engaged in disclosure talk. (ANOVAs were not conducted on Peer Talk and Other Talk because of the small number of instances observed.) A 2 (Dyad: Distressed, Typical) x 2 (Grade) x 2 (Gender) ANOVA for Evaluative Talk revealed a 3-way interaction, $F(1, 64) = 5.45$, $p < .03$, $n_p^2 = .09$. Because cell sizes were so small, it was necessary to drop a variable. Results had indicated that dyad status was not significant and a t-test confirmed that Distressed dyads did not differ from Typical dyads on evaluative talk, $t(63) = .80$, ns , so dyad status was dropped. A 2 (Grade) x 2 (Gender) ANOVA then was conducted on Evaluative Talk. A main effect for grade

was revealed. Fifth grade dyads engaged in more evaluative talk ($M = 2.05$, $SD = 1.33$) than did 6th grade dyads ($M = 1.49$, $SD = 1.01$), $F(1, 64) = 3.90$, $p < .05$, $n_p^2 = .06$.

Individual Analyses

For all ANOVAs, Type III Sum of Squares was used to adjust for unequal cell size.

Initiations of disclosure. Among *all targets*, a 2 (Target: Distressed, Typical) x 2 (Gender) x 2 (Grade) ANOVA was performed on total initiations of disclosure talk. Results revealed a main effect for grade, $F(1, 130) = 6.89$, $p < .01$, $n_p^2 = .05$. Fifth grade targets initiated more instances of disclosure talk ($M = .94$, $SD = 1.66$) than did 6th grade targets ($M = .35$, $SD = .66$). There were no significant main effects for target status or gender, and there were no significant interactions.

Among *all friends*, a 2 (Friend: Friend of Distressed, Friend of Typical) x 2 (Gender) x 2 (Grade) ANOVA was performed on total initiations of disclosure talk. Results revealed a main effect for grade, $F(1, 130) = 5.46$, $p < .02$, $n_p^2 = .04$. Fifth grade friends initiated more instances of disclosure talk ($M = .77$, $SD = 1.06$) than did 6th grade friends ($M = .39$, $SD = .83$). There also was a main effect for gender, $F(1, 130) = 4.63$, $p < .05$, $n_p^2 = .04$. Female friends initiated more instances of disclosure talk ($M = .61$, $SD = 1.05$) than did male friends ($M = .34$, $SD = .68$). There was no significant main effect for target status and there were no significant interactions.

Responses to disclosure. To analyze responses to disclosure, each participant received a proportion score for each type of response. For example, a participant's Positive Response score was equal to the number of positive responses divided by the total number of responses that participant made. Negative responses were the most

common; *ignoring* comprising the most common type of negative response. Of all *targets* who had an opportunity to respond to a disclosure, a 2 (Target: Distressed, Typical) x 2 (Gender) x 2 (Grade) ANOVA was performed on Positive Responses, Negative Responses, and Co-ruminative Responses. No significant main effects or interactions were found for any of the response types.

Of all *friends* who had an opportunity to respond to a disclosure, a 2 (Target: Distressed, Typical) x 2 (Gender) x 2 (Grade) ANOVA was performed on Positive Responses, Negative Responses, and Co-ruminative Responses. For Positive Responses, a main effect for gender was found, $F(1, 41) = 6.48, p < .02, \eta_p^2 = .16$. Female friends responded in more positive ways ($M = .22, SD = .33$) than did male friends ($M = .05, SD = .14$). There were no significant main effects for target status or grade, and there were no significant interactions.

The ANOVA on Negative Responses revealed a Grade x Gender interaction, $F(1, 41) = 5.16, p < .05, \eta_p^2 = .13$. Among *male* friends, 5th grade adolescents responded in negative ways ($M = 1.00, SD = .00$) more than did 6th grade adolescents ($M = .86, SD = .24$), but this difference was not significant. Among *female* friends, 5th grade adolescents responded in negative ways ($M = .48, SD = .40$) less than did 6th grade adolescents ($M = .80, SD = .30$), $t(22) = -2.22, p < .05$.

The ANOVA on Co-ruminative Responses revealed no significant main effects or interactions.

Relation between Global Self-worth and Observed Disclosure

The relation between global self-worth and observed disclosure was explored. First, all participants were classified into one of three possible groups: high self-worth

(score equal or greater to 3.8), medium self-worth (score less than 3.8 but greater than 3.2), or low self-worth (score equal to or less than 3.2). An ANOVA was conducted to assess how these three groups differed on total seconds of disclosure talk and total instances of disclosure talk. Using all targets' reports of global self-worth, no significant differences were found on either total seconds or total instances. Using all friends' reports of global self-worth, no significant differences were found on either total seconds or total instances.

Relation between Reported Friendship Quality and Observed Disclosure

Lastly, to explore the relation between reported friendship quality and observed disclosure, a series of correlations were conducted. Correlations for all analyses are presented in Tables 12-17. First, correlations were conducted (separately for Distressed dyads and Typical dyads) on the *dyad's* reported friendship quality (validation/caring, help/guidance, intimate disclosure and total positive friendship quality) and the *dyad's* observed disclosure (total instances, total seconds, evaluative talk, peer talk and other talk). Then, correlations were conducted on the *target's* reported friendship quality (validation/caring, help/guidance, intimate disclosure and total positive friendship quality) and the *target's* observed disclosure (initiations, positive responses, negative responses and co-ruminative responses). Finally, correlations were conducted on the *friend's* reported friendship quality (validation/caring, help/guidance, intimate disclosure and total positive friendship quality) and the *friend's* observed disclosure (initiations, positive responses, negative responses and co-ruminative responses).

No significant correlations emerged between reported friendship quality and observed disclosure for *Distressed dyads* or for *Typical dyads*. No significant correlations emerged between reported friendship quality and observed disclosure for *Distressed targets*. However, for *Typical targets*, targets' reported validation/caring were correlated with the target's observed positive responses to disclosure ($r = -.43, p < .05$). Help/guidance was correlated with observed initiations of disclosure ($r = -.41, p < .05$). Lastly, no significant correlations emerged between reported friendship quality and observed disclosure for *friends of Distressed targets* or for *friends of Typical targets*.

CHAPTER 5

Discussion

The overall purpose of this study was to investigate the best friendships of youth with internalizing problems. Few studies have included the viewpoints of both members of the friendship dyad, and only two have focused on how the negative bias associated with depression (but not anxiety) may affect discrepancies in perception of friendship quality (Brendgen et al., 2002; Daley & Hammen, 2002). Additionally, this study was the first to consider perceptions of friendship quality among distressed and typical adolescents from the perspectives of both the target and the friend. The current study also was distinctive in that it included an in-depth analysis of one important feature of friendship- disclosure. In the current study, spontaneous disclosure was coded for total time spent disclosing, topics of disclosure and responses to disclosure. The results of the current study confirm that friendships of emotionally distressed youth differ from those of typical youth, and that considering perspective is necessary to understand the friendship experience.

The first specific aim of this study was to ascertain whether youth befriend others' of similar emotional distress. Theories (i.e., similarity-attraction hypothesis, homophily hypothesis, social influence theory and socialization theory) and empirical evidence (e.g., Hogue & Steinberg, 1995; Kandel, Davies, & Baydar, 1990; Mariano & Harton, 2005; Stevens & Prinstein, 2005) suggest that individuals do befriend others like themselves. Thus, similarity among best friends on internalizing symptoms was expected. My hypothesis was partially supported. Findings demonstrated

similarity among best friends of *typical* youth, but not best friends of *distressed* youth.

Importantly, much of previous work on similarity of internalizing symptoms compared friends with non-friends (e.g., Haselager et al., 1998; Mariano & Harton, 2005) or friends with groups of friends (e.g., Hogue & Steinberg, 1995). These studies have demonstrated that compared to nonfriends, friends are more similar on internalizing symptoms (Mariano & Harton, 2005; Haselager et al., 1998). Research indicates that *best* friendships influence children's adjustment more than other good friends or the general peer group (Berndt, 1999); thus, an examination of similarities between best friends is important. In one study comparing best friends, Rockhill (2000) did not find evidence for similarity of depressive symptoms among best friends. The results of the current study extend Rockhill's (2000) findings to youth with internalizing problems, not only depressed youth. Findings from the current study demonstrate that distressed youth are not similar to their best friends in levels of emotional distress. However, it bears noting that when intraclass correlations between targets and friends were analyzed for self-reported global self-worth, significant findings did not emerge for distressed dyads or typical dyads. When males and females were analyzed separately, though, male distressed dyads were found to be significantly similar on global self-worth. Taken together, these findings suggest that the notion that "misery loves company" needs further exploration among distressed youth.

The second specific aim of the current study was to compare the friendship quality of distressed youth and typical youth based on both target- and friend-reports.

Distressed targets were expected to rate their friendships lower in quality than typical targets. Results supported this hypothesis for the majority of the friendship dimensions analyzed. Compared to typical targets, distressed targets rated their best friendship lower in quality on validation/caring, help/guidance and total positive friendship quality. Dyadic analyses resulted in similar findings. Compared to typical dyads, distressed dyads rated their friendships lower in quality on help/guidance, intimate disclosure and total positive friendship quality. These results suggest that internalizing symptoms do affect perceptions of friendship quality in a negative way. In conjunction with the individual ratings of targets and friends, these findings support the results of previous studies suggesting that anxious/depressed youth have trouble with high quality friendships (e.g., Connolly et al., 1992; La Greca & Lopez, 1998; Vernberg et al., 1992). Research has shown that best friendships contribute to adolescents' adjustment (Buhrmester, 1990; Compas et al., 1986; Furman & Buhrmester, 1992); thus, having low-quality friendships may be detrimental to youth suffering from internalizing problems. Future research may address whether differences in friendship quality are related to friendship maintenance.

Different findings emerged when the perspective of the best friend was considered. The best friends of distressed adolescents did not rate their friendships differently than the best friends of typical adolescents. This lack of significant findings highlights the importance of considering perspective. Research has shown that members of a dyad often disagree on their ratings of friendship quality (e.g. Berndt & McCandless, in press; Simpkins et al., 2006). Researchers have suggested that depressed youth rate their friendships negatively whereas their friendship

partners do not (Brendgen et al., 2002; Daley & Hammen, 2002). It has been posited that the negative bias associated with depression prevents depressed individuals from perceiving the positive elements of their friendships (Brendgen, et al., 2002). Alden and Wallace's (1995) work suggests that anxious individuals demonstrate a negative bias as well. Also important to consider is the possibility that distressed youth are not negatively biased, but are more accurate than typical youth in their perceptions. Work by Taylor and Brown (1988, 1994), for example, indicates that healthy individuals display a positive bias in their appraisals. Furthermore, while some researchers do find that depressed individuals display a negative bias, others find that depressed people report accurate perceptions, referred to as “depressive realism” (for a review, see Ackerman & DeRubeis, 1991). Regardless, while the perceptions of a target and friend may differ, each person’s perception may be valid to his/her own experience.

The findings from the current study integrate previous work, providing evidence that whereas adolescents with internalizing problems view their friendships as being lower in quality than typical adolescents, their friends do not perceive this difference. Notably, within dyads, targets and friends did view their friendships similarly. Intraclass correlations demonstrated that targets and friends of both distressed dyads and typical dyads shared similar ratings on all indices of friendship quality. Interestingly, comparisons between Distressed-Distressed friendship dyads and Distressed-Typical friendship dyads did not yield significant results. However, when these two subgroups were combined and compared with Typical-Typical friendship dyads, differences did emerge. Thus, while it seems that distressed youth may differ from typical youth on their ratings of friendship quality, certainly further

in-depth analysis is warranted to disentangle these complex relations. Future research should focus on similarities and differences in perspectives of friendship quality.

Gender differences emerged in comparisons of friendship quality for targets, friends and dyads. In all analyses, females rated their friendships higher on intimate disclosure than did males. Previous research indicates that females' friendships tend to involve intimate disclosure more than males' friendships (Berndt, 1992; Buhrmester & Prager, 1995; Cohen & Strassberg, 1983; Cooper & Ayers-Lopez, 1985; McNelles & Connolly, 1999). Analyses on friends' ratings of friendship quality and the dyadic score of friendship quality provided another significant gender difference. Compared to males, females rated their friendships as higher on validation/caring. Researchers have indicated that adolescent females are more concerned with trust and emotional closeness in their friendships than boys (Berndt, 1982; McNelles & Connolly, 1999). In the dyadic analyses, females also rated their friendships as higher on total positive friendship quality than did males. It is noteworthy that findings differed according the targets, friends and dyads. Again, the importance of perspective is emphasized.

Contrary to hypotheses, no developmental differences emerged in comparisons of friendship quality. Regardless of whether analyses were conducted at the level of the target, friend or dyad, no significant findings for grade emerged. While the year of difference between 5th and 6th grade participants in this study may be important when considering school context, it may not pertain to dramatic developmental differences. All participants in this study were young adolescents. Perhaps comparisons between young adolescents and older, high school attending

adolescents would have resulted in developmental differences. It also is possible that the lack of developmental differences was due to small sample sizes. Future research comparing larger groups of youth in the different substages of adolescence may better disentangle potential development differences for this age group.

Finally, it is important to recognize that lower ratings in friendship quality do not necessarily signify a “poor friendship.” In fact, the lowest mean friendship quality rating was 3.34 ($SD = .95$) for distressed friends’ rating of intimate disclosure. Considering that the Likert rating scale ranged from 1 to 5, with lower numbers indicating perceptions of lower quality, a mean of 3.34 represents an average rating, not a poor one. The range in scores reported in the current study is similar to that of previous studies (e.g., Rubin et al., 2006). Thus, while the results do demonstrate differences in perceptions of friendship quality, they should be interpreted with caution. It appears that while some individuals do not rate their friendship as highly as their partners, they do not feel that their friendships are poor.

The third specific aim of the current study was to observe instances of disclosure in the best friendships of distressed and typical youth. Overall, only half of the dyads (49.62%) engaged in disclosure talk. This number may reflect that the intent of the original study was to create a fun and enjoyable experience for best friend dyads. Contrary to expectations, distressed dyads did not differ from typical dyads on total seconds or total instances of disclosures. Previous research has shown that depressed and anxious individuals spend less time disclosing than non-distressed individuals (e.g., Bruch et al., 1989; Cheek & Buss, 1981; Jones & Carpenter, 1986;

Meleshko & Alden, 1993). However, in these studies, participants were instructed to engage in conversations of disclosure.

The current study was unique in that spontaneous disclosure was assessed, increasing the ecological validity. However, the environment of the study (e.g., participants were instructed to engage in friendship tasks) may have prevented participants from feeling comfortable disclosing. In the future, researchers may choose to include a "free talk" session in which participants are instructed to discuss whatever they choose for a period of time, similar to procedures utilized by Segrin and Flora (1998). This methodology would be less structured and directive than that employed by Rose and colleagues (2005), while providing a more natural environment for disclosure to occur. It is also possible that the tasks assigned during the observational component were more difficult for 5th grade youth compared to 6th grade youth or for females compared to males. Specifically, recreating a knot may have been more difficult for 5th grade youth than the origami model for 6th grade youth. Model recreation may have been more problematic for girls than boys, as well. Another benefit to using a "free talk" session in future research would be that task difficulty would not interfere with analyses. Finally, it is also important to note that the coding scheme did not address the notion of positive disclosure. The coding scheme relied on Rotenberg's (1995) definition of disclosure, which focuses on problem talk and negative speech. Future research may address the role of positivity in friendship. Possibly, the friendships of distressed youth are characterized not by negativity, but by a lack of positivity.

Gender differences also emerged in analyses for both seconds and instances of disclosure. When considering all dyads, females devoted more time (total seconds) to disclosure and had more instances of disclosure than males, which is consistent with previous research (e.g., Baxter & Wilmot, 1983; Burhmester & Prager, 1995; Cohn & Strassberg, 1983). When dyads with zero seconds/instances of disclosure were omitted from analyses, the results were slightly different. When only considering dyads that engaged in disclosure talk, females still devoted more time (total seconds) to disclosure than males, but the number of instances of disclosure did not differ between the genders. However, no gender differences emerged for total instances when only considering dyads who engaged in disclosure talk.

Developmental differences only emerged when considering total instances of disclosure for all dyads. Contrary to expectations, fifth-grade youth had more total instances of disclosure than did 6th grade youth. There were no developmental differences for total seconds of disclosure, suggesting that 5th grade youth engaged in short bursts of disclosure rather than lengthy conversations. Also, it is important to note that no developmental differences emerged data for dyads with zero seconds/instances were omitted.

Regarding topics of disclosure, the majority of conversations involved negative speech about the self or the dyad. When considering data of all dyads, females engaged in more evaluative talk than males. Also, more 5th graders than 6th graders engaged in evaluative talk. Surprisingly, contrary to hypotheses, distressed youth did not engage in more negative disclosures than typical youth.

When dyads with no disclosure talk were omitted from analyses, an interaction emerged for distress and gender. Distressed girls engaged in more evaluative talk than distressed boys. Typical girls did not differ from typical boys in instances of evaluative talk. Thus, it appears that distress impacts the negative speech of girls more than it does boys. Previous research has suggested that females are more vulnerable to stress, particularly interpersonal stress (e.g. Friedrich, Reams, & Jacobs, 1988; Moran & Eckenrode, 1991; Rudolph, 2000) and, therefore, they may have more negative topics to discuss than boys. Hypotheses regarding peer talk and other talk were not supported, largely because such few instances of these topics occurred. These findings may reflect the tasks utilized in the current study. Participants were directly to solve various friendship tasks; such activities may have promoted evaluative talk.

Analyses on initiations of disclosure supported developmental differences among both targets and friends, and gender differences among friends only. For both targets and friends, 5th grade young adolescents initiated disclosure talk more than 6th grade youth. Contrary to hypotheses, distressed targets did not initiate disclosure more than typical targets. Gender differences only emerged when analyzing the friends' initiations. Female friends initiated disclosure more than male friends. It is unclear why these findings emerged, but they may relate to adolescents feelings of self-consciousness. Perhaps 5th grade participants felt less self-conscious about sharing their feelings than did 6th grade participants. The same may be true for females versus males. Female friends may have felt less inhibited regarding

initiations of disclosure talk. Why the same gender results did not appear among targets is unclear, but may be related to distress.

Adolescents' responses to disclosure were quite different from what was expected. The majority of responses were negative, and the most common type of negative response was *ignoring*. Research on excessive reassurance seeking posits that depressed and anxious youth evoke negative responses from others (Coyne, 1976; Joiner, 1994; Joiner et al., 1992; Joiner & Metalsky, 2001). Thus, distressed youth were expected to respond to disclosures in more negative and co-ruminative ways compared to typical youth. Contrary to these expectations, for both targets and friends, there was no difference between distressed and typical youth. It is important to note that the majority of the prior studies of excessive reassurance seeking utilized self-report scales, not observational methods.

Hypotheses regarding gender and developmental differences were partially supported. Female friends responded in more positive ways than male friends, but did not differ on negative or co-ruminative responses from male friends. Female targets did not differ from male targets on positive, negative or co-ruminative responses. A gender-x-grade interaction was found for friends. Male 5th grade friends responded more negatively to disclosure than male 6th grade friends. In contrast, female 5th grade friends responded less negatively than female 6th grade friends. No differences emerged for co-ruminative responses. Perhaps these results may be best understood in the context of *appropriateness* of disclosure. Participants in this study may have believed disclosure to be inappropriate (because the dyads were instructed to

complete friendship tasks that did not involve disclosure conversations.) Negative responses may have been an attempt to socialize friends to return to the task at hand.

Finally, exploratory analyses on relations between reported friendship quality and observed disclosure revealed a lack of significant findings. In general, it seems that thoughts about friendship quality and interactions did not translate to behaviors, at least not observable disclosure behavior. There were several noteworthy exceptions. Among typical targets, validation/caring was negatively related to positive responses and help/guidance was negatively related to initiations. These results were surprising, especially considering their negative direction. Considering the literature on excessive reassurance seeking (Joiner, 1994; Joiner, Alfano & Metalsky, 1992; Joiner & Metalsky, 2001), it may be that typical youth do not want to encourage disclosure talk, particularly within a laboratory setting. Research on normative processes of disclosure (e.g., Jourad, 1959; Segrin and Flora, 1998) suggests that when considering how to respond to disclosure, individuals often consider the *appropriateness* of the disclosure. For example research by Brody, Stoneman, and Wheatley (1984) demonstrated that the presence of an observer was related to decreases in children's negative verbalizations, directives, social conversation, nonsense verbalizations, task-related verbalizations, and on-task play. The knowledge that researchers were observing their interactions may have influenced typical youth's behavior.

Among friends of typical targets, help/guidance was negatively related to positive responses and positively related to negative responses. Again, in keeping with previous work on normative disclosure processes, it may be that because

disclosure is unusual and considered inappropriate in this setting, friends may respond in ways that discourage problem discussion. It may be that the lack of problem discussion contributes to the overall positivity of high-quality friendships. These relations did not hold for distressed targets or for friends of distressed targets. These results appear contradictory, but it may be helpful again to consider the context of disclosure in this study. Since disclosure was unusual in this study, high quality friendships may prevent disclosure talk from occurring for typical adolescents. When disclosure talk did occur, perhaps typical adolescents provided less positive responses and more negative responses to persuade friends to return to their instructed task.

Whereas the findings of the current study advance the literature, several limitations must be noted. First, the assignment of adolescents to the distressed or typical group depended on maternal ratings of anxiety and depression. Although mothers may be cognizant of the internalizing difficulties their children experience, reports from the adolescents themselves, or clinicians would provide a more complete picture of youth's emotional experiences. A self-report measure did demonstrate that distressed adolescents rated themselves lower on global self-worth than did typical adolescents. However, while self-worth may be a proxy to internalizing symptoms (e.g., McCarty & McCaule, 2007; Ohannessian, Lerner, & Lerner, 1999), it is not a substitute measure. In the future, researchers would do well to heed Bell-Dolan and Brazeal's (1993) suggestion to include multiple informants and methods when assessing distress.

A second limitation of this study is that the sample may be rather unique. Preliminary analyses indicated that adolescents identified as *Typical* in the current

study were higher on prosocial behaviors and sociability (as rated by their peers) than were the original study participants. Furthermore, only youth with reciprocated friends were included as participants in the current study. Questionnaires assessing mood were included in the laboratory assessment, and only youth with reciprocated best friendships were invited to the laboratory. It is possible that a large number of distressed adolescents were excluded from this study. Prior research suggests that while distressed youth do have less close friendships than nondistressed youth (e.g., Rockhill et al., in press; Stevens & Prinstein, 2005), they are not friendless. Future studies may include youth with “newer” friendships to assess whether distress affects them.

Considering the average length of friendship for participants in this study, participants should be considered a highly functional group- at least in the friendship realm. Average friendship length was just less than four years, which was somewhat surprising in that the 6th grade participants had just completed their transition to middle school and that a school transition may result in friendship disruption. Thus, the participants in the current study may represent a rather unique group. It is important to note that the preliminary analysis on friendship duration demonstrated that groups did not differ significantly from each other in terms of the length of their friendships. However, it is possible that friendship duration may impact differences in ratings of friendship quality. Due to small sample sizes, conducting this type of analysis was not possible in the current study; future researchers may choose to address it.

Nonetheless, findings from the current study contribute to the literature on the friendships of distressed young adolescents. Most significantly, the analyses demonstrated that whereas distressed adolescents may view their friendships in a negative light, their friends did not. Moreover, impartial observers did not note differences in the production of negative speech or responses to disclosure talk. Previous studies have indicated that while self-report ratings differ between depressed individuals and nondepressed individuals, observations of behavior do not differ (e.g., Baker et al., 1996). The current study adds support to this notion of the negative bias of distressed adolescents, particularly in the context of a best friendship. Considering that perceptions of social support may be more significant than actual received support in predicting adjustment (e.g., Wethington & Kessler, 1986), these findings are worrisome. Distressed adolescents may not benefit from their friendships because they do not perceive what is offered to them. Future research may address whether these discrepancies in perceived friendship quality are related to adjustment. If so, helping distressed individuals with cognitive restructuring may allow them to view their friendships in the same favorable light as do their friends and observers.

Table 1.

Descriptive information for global self-worth and length of friendship

		Distressed	Typical	5 th Grade	6 th Grade	Male	Female
Global self-worth	<i>M</i>	3.27*	3.47*	3.46	3.41	3.50*	3.37*
	<i>SD</i>	0.63	0.48	0.58	0.49	0.52	0.51
Friendship duration	<i>M</i>	43.52	45.22	42.53	45.42	47.49	42.21
	<i>SD</i>	29.15	28.86	14.00	30.54	28.06	29.50

*Note: * $p < .05$; ** $p < .01$; *** $p < .001$*

Table 2.

Target adolescents' friendship quality ratings

Target		Distressed	Typical	5 th Grade	6 th Grade	Male	Female
Validation/Caring	<i>M</i>	4.03*	4.33*	4.31	4.19	4.14	4.29
	<i>SD</i>	0.68	0.46	0.53	0.57	0.57	0.55
Help/Guidance	<i>M</i>	3.70**	4.02**	3.86	3.93	3.81	3.99
	<i>SD</i>	0.72	0.63	0.71	0.67	0.63	0.71
Intimate Disclosure	<i>M</i>	3.62	3.87	3.81	3.77	3.40***	4.10***
	<i>SD</i>	0.91	0.81	0.87	0.85	0.90	0.67
Total Positive Friendship Quality	<i>M</i>	3.86**	4.13**	4.08	4.02	3.91	4.14
	<i>SD</i>	0.64	0.48	0.54	0.56	0.56	0.53

*Note: * p < .05; ** p < .01; *** p < .001*

Table 3.

Friends' friendship quality ratings

Friend		Distressed	Typical	5 th Grade	6 th Grade	Male	Female
Validation/Caring	<i>M</i>	4.04	4.20	4.27	4.09	3.97*	4.29*
	<i>SD</i>	0.74	0.68	0.70	0.70	0.72	0.65
Help/Guidance	<i>M</i>	3.60	3.81	3.84	3.69	3.59	3.86
	<i>SD</i>	0.85	0.76	0.77	0.81	0.77	0.81
Intimate Disclosure	<i>M</i>	3.34	3.78	3.77	3.56	3.34**	3.87**
	<i>SD</i>	0.95	0.89	0.93	0.94	0.93	0.88
Total Positive Friendship Quality	<i>M</i>	3.72	4.00	4.03	3.85	3.74	4.03
	<i>SD</i>	0.70	0.62	0.63	0.67	0.69	0.61

*Note: * p < .05; ** p < .01; *** p < .001*

Table 4.

Dyads' friendship quality ratings

Dyad		Distressed	Typical	5 th Grade	6 th Grade	Male	Female
Validation/Caring	<i>M</i>	16.46	18.27	18.52	17.29	16.48*	18.62*
	<i>SD</i>	4.51	3.91	4.21	4.18	4.04	4.13
Help/Guidance	<i>M</i>	13.53*	15.53*	15.04	14.73	13.84	15.66
	<i>SD</i>	4.64	4.51	4.67	4.65	4.43	4.68
Intimate Disclosure	<i>M</i>	12.32*	14.94*	14.57	13.80	1.58***	16.12***
	<i>SD</i>	5.37	5.40	5.45	5.55	5.10	4.99
Total Positive Friendship Quality	<i>M</i>	14.56**	16.65**	16.59	15.65	14.75*	16.91*
	<i>SD</i>	4.19	3.76	3.89	4.07	4.05	3.76

*Note: * p < .05; ** p < .01; *** p < .001*

Table 5.

Chi-square results for Distressed and Typical dyads

Dyad	Did Not Engage in Disclosure Talk	Engaged in Disclosure Talk	Totals
Distressed	24	24	48
Typical	42	41	83
Totals	66	65	131

Table 6.

Chi-square results for 5th and 6th grade dyads

Dyad	Did Not Engage in Disclosure Talk	Engaged in Disclosure Talk	Totals
5 th Grade	13	22	35
6 th Grade	53	43	96
Totals	66	65	131

Table 7.

Chi-square results for male and female dyads

Dyad	Did Not Engage in Disclosure Talk	Engaged in Disclosure Talk	Totals
Male	33	28	61
Female	33	37	70
Totals	66	65	131

Table 8.

Observed disclosure for all dyads

Dyad		Distressed	Typical	5 th Grade	6 th Grade	Male	Female
Total seconds	<i>M</i>	4.71	6.41	9.83	4.31	3.64*	7.66*
	<i>SD</i>	7.72	16.30	21.55	9.24	6.93	17.56
Total instances	<i>M</i>	1.02	1.05	1.69**	0.80**	0.77*	1.27*
	<i>SD</i>	1.38	1.72	2.31	1.18	1.06	1.93
Evaluative talk	<i>M</i>	0.88	0.81	1.29**	0.67**	0.67*	0.97*
	<i>SD</i>	1.21	1.14	1.45	1.00	1.01	1.27
Peer talk	<i>M</i>	0.13	0.18	0.29	0.11	0.08	0.23
	<i>SD</i>	0.44	0.67	0.93	0.41	0.38	0.73
Other talk	<i>M</i>	0.02	0.06	0.11	0.02	0.02	0.07
	<i>SD</i>	0.14	0.29	0.40	0.14	0.13	0.31

Note: * $p < .05$; ** $p < .01$; *** $p < .001$

Table 9.

Observed disclosure only for dyads who engaged in disclosure

Dyad		Distressed	Typical	5 th Grade	6 th Grade	Male	Female
Total seconds	<i>M</i>	9.42	12.98	15.64	9.63	7.93	14.49
	<i>SD</i>	8.69	21.39	25.62	11.86	8.44	22.12
Total instances	<i>M</i>	2.04	2.12	2.68	1.79	1.68*	2.41*
	<i>SD</i>	1.30	1.94	2.42	1.15	0.94	2.09
Evaluative talk	<i>M</i>	1.75	1.63	2.05	1.49	1.46	1.84
	<i>SD</i>	1.19	1.13	1.33	1.01	1.04	1.21
Peer talk	<i>M</i>	0.25	0.37	0.45	0.26	0.18	0.4
	<i>SD</i>	0.61	0.92	1.14	0.58	0.55	0.96
Other talk	<i>M</i>	0.04	0.12	0.18	0.05	0.05	0.14
	<i>SD</i>	0.20	0.40	0.50	0.21	0.21	0.42

Note: * $p < .05$; ** $p < .01$; *** $p < .001$

Table 10.

Target's initiations of and responses to disclosure

Dyad		Distressed	Typical	5 th Grade	6 th Grade	Male	Female
Initiations	<i>M</i>	0.54	0.49	0.94**	0.35**	0.43	0.59
	<i>SD</i>	0.87	1.15	1.66	0.66	0.72	1.28
Positive responses	<i>M</i>	0.09	0.16	0.13	0.14	0.14	0.14
	<i>SD</i>	0.19	0.33	0.23	0.33	0.29	0.30
Negative responses	<i>M</i>	0.85	0.74	0.81	0.75	0.79	0.76
	<i>SD</i>	0.21	0.37	0.24	0.38	0.31	0.35
Co-ruminative responses	<i>M</i>	0.04	0.10	0.06	0.09	0.07	0.08
	<i>SD</i>	0.10	0.25	0.15	0.24	0.18	0.23

*Note: * p < .05; ** p < .01; *** p < .001*

Table 11.

Friend's initiations of and responses to disclosure

Dyad		Distressed	Typical	5 th Grade	6 th Grade	Male	Female
Initiations	<i>M</i>	0.46	0.51	0.77*	0.39*	0.34*	0.61*
	<i>SD</i>	0.97	0.87	1.06	0.83	0.68	1.05
Positive responses	<i>M</i>	0.17	0.13	0.17	0.13	0.05*	0.22*
	<i>SD</i>	0.30	0.26	0.32	0.25	0.14	0.33
Negative responses	<i>M</i>	0.70	0.85	0.74	0.82*	0.92*	0.70*
	<i>SD</i>	0.38	0.27	0.38	0.27	0.19	0.36
Co-ruminative responses	<i>M</i>	0.10	0.02	0.06	0.04	0.03	0.06
	<i>SD</i>	0.22	0.09	0.18	0.14	0.14	0.16

Note: * $p < .05$; ** $p < .01$; *** $p < .001$

Table 12.

Correlations of distressed dyad's FQQ scores and observed disclosure

	Val/Caring	Help/Guid	Int Discl	Total Pos	Seconds	Instances	Neg Talk	Peer Talk	Other Talk
Val/Caring	1								
Help/Guid	0.76***	1							
Int Discl	0.60***	0.65***	1						
Total Pos	0.85***	0.92***	0.78***	1					
Seconds	-0.11	-0.04	0.00	-0.07	1				
Instances	-0.06	-0.02	-0.13	-0.10	0.62***	1			
Neg Talk	-0.15	-0.03	-0.08	-0.09	0.67***	0.73***	1		
Peer Talk	-0.13	-0.16	-0.06	-0.13	0.69***	0.29*	0.03	1	
Other Talk	0.04	0.20	-0.05	0.10	0.64***	0.15	0.38*	0.29*	1

Note: * $p < .05$; ** $p < .01$; *** $p < .001$; Val/Caring = validation/caring; Help/Guid = help/guidance; Int Discl = intimate disclosure; Total Pos = total positive friendship quality; Seconds = total seconds of disclosure; Instances = total instances of disclosure; Neg Talk = disclosures about evaluative talk; Peer Talk = disclosures about peer talk; Other Talk = disclosures about other talk

Table 13.

Correlations of typical dyad's FQQ scores and observed disclosure

	Val/Caring	Help/Guid	Int Discl	Total Pos	Seconds	Instances	Neg Talk	Peer Talk	Other Talk
Val/Caring	1								
Help/Guid	0.73***	1							
Int Discl	0.70***	0.72***	1						
Total Pos	0.86***	0.89***	0.85***	1					
Seconds	0.00	-0.14	0.11	-0.07	1				
Instances	0.15	0.08	0.22	0.16	0.40***	1			
Neg Talk	0.02	-0.07	0.10	-0.01	0.60***	0.72***	1		
Peer Talk	0.03	-0.08	0.09	-0.06	0.90***	0.28**	0.38***	1	
Other Talk	-0.13	-0.21	0.05	-0.16	0.80***	0.22	0.48***	0.65***	1

Note: * $p < .05$; ** $p < .01$; *** $p < .001$; Val/Caring = validation/caring; Help/Guid = help/guidance; Int Discl = intimate disclosure;

Total Pos = total positive friendship quality; Seconds = total seconds of disclosure; Instances = total instances of disclosure; Neg Talk

= disclosures about evaluative talk; Peer Talk = disclosures about peer talk; Other Talk = disclosures about other talk

Table 14.

Correlations of distressed target's FQQ scores and observed disclosure

	Val/Caring	Help/Guid	Int Discl	Total Pos	Initiations	Pos Resp	Neg Resp	Co-rum
Val/Caring	1							
Help/Guid	0.69***	1						
Int Discl	0.69***	0.69***	1					
Total Pos	0.88***	0.87***	0.82***	1				
Initiations	-0.30	-0.43	-0.41	-0.40	1			
Pos Resp	-0.10	-0.20	0.26	0.02	-0.09	1		
Neg Resp	-0.01	0.21	-0.37	-0.06	0.16	-0.80***	1	
Co-rum	0.24	-0.14	0.19	0.03	0.04	-0.10	-0.33	1

Note: * $p < .05$; ** $p < .01$; *** $p < .001$; Val/Caring = validation/caring; Help/Guid = help/guidance; Int Discl = intimate disclosure;

Total Pos = total positive friendship quality; Seconds = total seconds of disclosure; Instances = total instances of disclosure; Neg Talk

= disclosures about evaluative talk; Peer Talk = disclosures about peer talk; Other Talk = disclosures about other talk

Table 15.

Correlations of typical target's FQQ scores and observed disclosure

	Val/Caring	Help/Guid	Int Discl	Total Pos	Initiations	Pos Resp	Neg Resp	Co-rum
Val/Caring	1							
Help/Guid	0/60***	1						
Int Discl	0.62***	0.53***	1					
Total Pos	0.78***	0.79***	0.81***	1				
Initiations	-0.16	-0.41*	-0.05	-0.34	1			
Pos Resp	-0.43*	-0.07	-0.34	-0.27	0.16	1		
Neg Resp	0.37	0.19	0.15	0.17	-0.25	-0.76***	1	
Co-rum	0.12	-0.20	0.22	0.12	0.15	-0.20	-0.49**	1

Note: * $p < .05$; ** $p < .01$; *** $p < .001$; Val/Caring = validation/caring; Help/Guid = help/guidance; Int Discl = intimate disclosure;

Total Pos = total positive friendship quality; Seconds = total seconds of disclosure; Instances = total instances of disclosure; Neg Talk

= disclosures about evaluative talk; Peer Talk = disclosures about peer talk; Other Talk = disclosures about other talk

Table 16.

Correlations of friend of distressed target's FQQ scores and observed disclosure

	Val/Caring	Help/Guid	Int Discl	Total Pos	Initiations	Pos Resp	Neg Resp	Co-rum
Val/Caring	1							
Help/Guid	0.76***	1						
Int Discl	0.64***	0.21***	1					
Total Pos	0.84***	0.92***	0.83***	1				
Initiations	0.02	0.32	0.26	0.33	1			
Pos Resp	-0.22	0.03	-0.14	-0.06	0.76***	1		
Neg Resp	0.30	0.12	0.12	0.10	-0.73***	-0.77***	1	
Co-rum	-0.10	-0.10	0.17	0.02	0.07	-0.20	-0.39	1

Note: * $p < .05$; ** $p < .01$; *** $p < .001$; Val/Caring = validation/caring; Help/Guid = help/guidance; Int Discl = intimate disclosure;

Total Pos = total positive friendship quality; Seconds = total seconds of disclosure; Instances = total instances of disclosure; Neg Talk

= disclosures about evaluative talk; Peer Talk = disclosures about peer talk; Other Talk = disclosures about other talk

Table 17.

Correlations of friend of typical target's FQQ scores and observed disclosure

	Val/Caring	Help/Guid	Int Discl	Total Pos	Initiations	Pos Resp	Neg Resp	Co-rum
Val/Caring	1							
Help/Guid	0.73***	1						
Int Discl	0.67***	0.71***	1					
Total Pos	0.97***	0.89***	0.86***	1				
Initiations	-0.05	-0.15	-0.01	-0.08	1			
Pos Resp	-0.01	-0.43*	-0.02	-0.09	0.04*	1		
Neg Resp	0.06	0.45*	0.07	0.17	-0.52**	-0.95***	1	
Co-rum	-0.16	-0.07	-0.16	-0.25	0.41*	-0.14	-0.18	1

Note: * $p < .05$; ** $p < .01$; *** $p < .001$; Val/Caring = validation/caring; Help/Guid = help/guidance; Int Discl = intimate disclosure;

Total Pos = total positive friendship quality; Seconds = total seconds of disclosure; Instances = total instances of disclosure; Neg Talk

= disclosures about evaluative talk; Peer Talk = disclosures about peer talk; Other Talk = disclosures about other talk

APPENDIX A

Friendship Nominations

NAME _____ BOY or GIRL GRADE _____

TASK #1

Instructions: In the first space below, write the name of your very best friend who is in grade 5 at your school. Please write their first name and last name.

Very Best Friend: _____ (If you're a girl, name a girl.)
(If you're a boy, name a boy.)

Next, write the name of your second best friend in grade 5 at your school. Write their first and last name.

Second Best Friend: _____ (If you're a girl, name a girl.)
(If you're a boy, name a boy.)

TASK #2

Instructions: In the spaces below, write the names of three of your other good friends in fifth grade at your school. For this part, you can name boys or girls. Remember to write out their full names.

1. _____
2. _____
3. _____

APPENDIX B

Extended Class Play

Grade _____ Age _____ Boy _____ Girl _____

Date _____

CLASS PLAY EXAMPLE:

A person who is very tall.

Name up to 6 people who would be best to play this role.

a) Write up to 3 boys' names (first & last name).

BOYS

b) Write up to 3 girls' names (first & last name)

GIRLS

Name up to 6 people who would be best to play this role.

First, write up to 3 boys' names (first & last name).

Second, write up to 3 girls' names (first & last name).

1. A person who is a good leader.

BOYS

GIRLS

2. A person who interrupts when other children are speaking.

BOYS

GIRLS

3. Somebody who is very shy.

BOYS

GIRLS

4. A person with good ideas for things to do.

BOYS

GIRLS

5. Someone who has mean things said to them.

BOYS

GIRLS

6. Somebody who has many friends.

BOYS

GIRLS

7. A person who loses his / her temper easily.

BOYS

GIRLS

8. A person who doesn't talk much or who talks quietly.

BOYS

GIRLS

9. Someone who shows off a lot.

BOYS

GIRLS

10. Someone you can trust.

BOYS

GIRLS

11. A person who gets into a lot of fights.

BOYS

GIRLS

12. Someone who will wait his / her turn.

BOYS

GIRLS

13. Someone whose feelings get hurt easily.

BOYS

GIRLS

14. Someone who has trouble making friends.

BOYS

GIRLS

15. Someone who plays fair.

BOYS

GIRLS

16. A person who hardly ever starts up a conversation.

BOYS

GIRLS

17. A person who everyone listens to.

BOYS

GIRLS

18. Someone who spreads rumors about other kids so that people won't like them anymore.

BOYS

GIRLS

19. A person who can't get others to listen.

BOYS

GIRLS

20. A person who likes spending time alone (doing computer work, reading, or drawing) more than being with other people.

BOYS

GIRLS

21. Someone who gets picked on by other kids.

BOYS

GIRLS

22. Somebody who makes new friends easily.

BOYS

GIRLS

23. A person who is too bossy.

BOYS

GIRLS

24. Someone who is often left out.

BOYS

GIRLS

25. Someone who helps other people when they need it.

BOYS

GIRLS

26. Someone who is usually sad.

BOYS

GIRLS

27. A person everyone likes to be with.

BOYS

GIRLS

28. Someone who thinks that he or she is great.

BOYS

GIRLS

29. Somebody who teases other children too much.

BOYS

GIRLS

30. A person who stays by himself / herself more often than being with other people.

BOYS

GIRLS

31. Someone who is hit or kicked by other kids.

BOYS

GIRLS

32. Someone who likes to play with others more than being alone.

BOYS

GIRLS

33. Someone who you would rather not be with.

BOYS

GIRLS

34. Someone who gets nervous about participating in group discussions.

BOYS

GIRLS

35. Someone you like to be with the most.

BOYS

GIRLS

36. Somebody who picks on other kids.

BOYS

GIRLS

37. Somebody who is polite.

BOYS

GIRLS

APPENDIX C

Child Behavior Checklist

Below is a list of items that describe children. For each item that describes your child **now or within the past 6 months**, please circle the **2** if the item is **very true or often true** of your child. Circle the **1** if the item is **somewhat true or sometimes true** of your child. If the item is **not true** of your child, circle the **0**. Please answer all items as well as you can, even if some do not seem to apply to your child.

0 = Not True (as far as you know) **1 = Somewhat or Sometimes True** **2 = Very True or Often True**

- | | | | | |
|-----|--|---|---|---|
| 1. | Acts too young for his/her age | 0 | 1 | 2 |
| 2. | Allergy (describe): _____
_____ | 0 | 1 | 2 |
| 3. | Argues a lot | 0 | 1 | 2 |
| 4. | Asthma | 0 | 1 | 2 |
| 5. | Behaves like opposite sex | 0 | 1 | 2 |
| 6. | Braggs, boasts | 0 | 1 | 2 |
| 7. | Can't concentrate, can't pay attention for long | 0 | 1 | 2 |
| 8. | Can't get his/her mind off certain thoughts; obsessions (describe): _____
_____ | 0 | 1 | 2 |
| 9. | Can't sit still, restless, or hyperactive | 0 | 1 | 2 |
| 10. | Clings to adults or too dependent | 0 | 1 | 2 |
| 11. | Complains of loneliness | 0 | 1 | 2 |
| 12. | Confused or seems to be in a fog | 0 | 1 | 2 |
| 13. | Cries a lot | 0 | 1 | 2 |
| 14. | Cruel to animals | 0 | 1 | 2 |
| 15. | Cruelty, bullying, or meanness to others | 0 | 1 | 2 |
| 16. | Day-dreams or gets lost in his/her thoughts | 0 | 1 | 2 |

17.	Demands a lot of attention	0	1	2
18.	Destroys his/her own things	0	1	2
19.	Destroys things belonging to his/her family or other children	0	1	2
20.	Disobedient at home	0	1	2
21.	Disobedient at school	0	1	2
22.	Doesn't eat well	0	1	2
23.	Doesn't get along with other children	0	1	2
24.	Doesn't seem to feel guilty after misbehaving	0	1	2
25.	Easily jealous	0	1	2
26.	Eats or drinks things that are not food - don't include sweets (describe): _____ _____	0	1	2
27.	Fears certain animals, situations, or places other than school (describe): _____ _____	0	1	2
28.	Fears going to school	0	1	2
29.	Fears he/she might think or do something bad	0	1	2
30.	Feels he/she has to be perfect	0	1	2
31.	Feels or complains that no one loves him/her	0	1	2
32.	Feels others are out to get him/her	0	1	2
33.	Feels worthless or inferior	0	1	2
34.	Gets hurt a lot, accident-prone	0	1	2
35.	Gets in many fights	0	1	2
36.	Gets teased a lot	0	1	2
37.	Gets upset easily -	0	1	2
38.	Hangs around with children who get in trouble	0	1	2
39.	Hears sounds or voices that aren't there (describe):	0	1	2

40.	Impulsive or acts without thinking	0	1	2
41.	Likes to be alone	0	1	2
42.	Lying or cheating	0	1	2
43.	Bites fingernails	0	1	2
44.	Nervous, high strung, or tense	0	1	2
45.	Nervous movements or twitching (describe): _____	0	1	2

46.	Nightmares	0	1	2
47.	Not liked by other children	0	1	2
48.	Too fearful or anxious	0	1	2
49.	Feels dizzy	0	1	2
50.	Feels too guilty	0	1	2
51.	Overeating	0	1	2
52.	Overtired	0	1	2
53.	Overweight	0	1	2
54.	Physical problems without known medical cause:			
	a. Aches or pains	0	1	2
	b. Headaches	0	1	2
	c. Nausea, feels sick	0	1	2
	d. Problems with eyes (describe): _____	0	1	2
	e. Rashes or other skin problems	0	1	2
	f. Stomach-aches or cramps	0	1	2
	g. Vomiting, throwing up	0	1	2
	h. Other (describe): _____	0	1	2
55.	Physically attacks people	0	1	2
56.	Picks nose, skin, or other parts of body (describe): _____	0	1	2

57.	Poor school work	0	1	2
58.	Poorly coordinated or clumsy	0	1	2
59.	Prefers playing with older children	0	1	2
60.	Prefers playing with younger children	0	1	2
61.	Reacts intensely when upset -	0	1	2
62.	Refuses to talk	0	1	2
63.	Repeats certain acts over and over; compulsions (describe):	0	1	2

64.	Runs away from home	0	1	2
65.	Screams a lot	0	1	2
66.	Secretive, keeps things to self	0	1	2
67.	Sees things that aren't there (describe): _____	0	1	2

68.	Self-conscious or easily embarrassed	0	1	2
69.	Sets fires	0	1	2
70.	Showing off or clowning	0	1	2
71.	Shy or timid	0	1	2
72.	Sleeps less than most children	0	1	2
73.	Sleeps more than most children during day and/or night (describe): _____	0	1	2
74.	Speech problem (describe): _____	0	1	2
75.	Stares blankly	0	1	2
76.	Steals at home	0	1	2
77.	Steals outside the home	0	1	2
78.	Stores up things he/she doesn't need (describe): _____	0	1	2

79.	Strange behavior (describe): _____	0	1	2
80.	Strange ideas (describe): _____	0	1	2
81.	Stubborn, sullen, or irritable	0	1	2
82.	Sudden changes in mood or feelings	0	1	2
83.	Sulks a lot	0	1	2
84.	Suspicious	0	1	2
85.	Swearing or obscene language	0	1	2
86.	Talks or walks in sleep (describe): _____	0	1	2
87.	Talks too much	0	1	2
88.	Teases a lot	0	1	2
89.	Temper tantrums or hot temper	0	1	2
90.	Tends to be emotional -	0	1	2
91.	Threatens people	0	1	2
92.	Thumb-sucking	0	1	2
93.	Too concerned with neatness or cleanliness	0	1	2
94.	Trouble sleeping (describe): _____	0	1	2
<hr/>				
95.	Truancy, skips school	0	1	2
96.	Underactive, slow moving, or lacks energy	0	1	2
97.	Unhappy, sad, or depressed	0	1	2
98.	Unusually loud	0	1	2
99.	Uses alcohol or drugs for nonmedical purposes (describe): _____	0	1	2
<hr/>				
100.	Vandalism	0	1	2
101.	Whining	0	1	2
102.	Wishes to be of opposite sex	0	1	2
103.	Withdrawn, doesn't get involved with others	0	1	2

104.	Worrying	0	1	2
105.	Please write in any problems your child has that were not listed above: _____	0	1	2
	_____	0	1	2
	_____	0	1	2
106.	When upset, calms down when talked to -	0	1	2
107.	Is very sociable -	0	1	2

APPENDIX D

What I'm Like

Directions for the "What I'm Like" Questionnaire

On this questionnaire, we are going to ask you to mark the box which describes you the best. The following are step-by-step instructions for how to answer every question.

1. Look at the two statements in the example:

"Some kids would rather play outdoors in their spare time." or "Other kids would rather watch TV."

2. Decide which statement is more like you.

Are you the type of person who would rather play outside, **OR** do you prefer watching TV?

3. After you choose one of the two statements (either the one on the left side or the one on the right side), you decide how true the statement is for you.

Is the statement "Sort of True" for you or "Really True" for you.

4. Mark the box which you think best fits you.

Only select ONE answer. You should have only ONE box checked for each number.

Remember this is not a test; just choose which statement is like you most of the time.

Example

Really True for me	Sort of True for me			Sort of True for me	Really True for me
<input type="checkbox"/>	<input type="checkbox"/>	Some kids would rather play outdoors in their spare time.	BUT	Other kids would rather watch T.V	<input type="checkbox"/>

1. **Really True for me** **Sort of True for me** Some kids wish they could be a lot better at sports. **BUT** Other kids feel they are good enough at sports. **Sort of True for me** **Really True for me**

2. **Really True for me** **Sort of True for me** Some kids find it hard to make friends. **BUT** Other kids find it's pretty easy to make friends. **Sort of True for me** **Really True for me**

3. **Really True for me** **Sort of True for me** Some kids are happy with the way they look. **BUT** Other kids are not happy with the way they look. **Sort of True for me** **Really True for me**

4. **Really True for me** **Sort of True for me** Some kids often do not like the way they behave. **BUT** Other kids usually like the way they behave. **Sort of True for me** **Really True for me**

5. **Really True for me** **Sort of True for me** Some kids are happy with themselves as a person. **BUT** Other kids are often not happy with themselves. **Sort of True for me** **Really True for me**
6. **Really True for me** **Sort of True for me** Some kids feel that they are just as smart as other kids their age. **BUT** Other kids aren't so sure and wonder if they are as smart. **Sort of True for me** **Really True for me**
7. **Really True for me** **Sort of True for me** Some kids have a lot of friends. **BUT** Other kids don't have a lot of friends. **Sort of True for me** **Really True for me**
8. **Really True for me** **Sort of True for me** Some kids find it easy to ask other children for help. **BUT** Other kids find it hard asking other kids for help. **Sort of True for me** **Really True for me**

9. **Really True for me** **Sort of True for me** Some kids are happy with their height and weight. **BUT** Other kids with their height or weight were different. **Sort of True for me** **Really True for me**

10. **Really True for me** **Sort of True for me** Some children have problems getting other kids to play with them. **BUT** Other kids find it pretty easy. **Sort of True for me** **Really True for me**

11. **Really True for me** **Sort of True for me** Some kids usually do the right thing. **BUT** Other kids often don't do the right thing. **Sort of True for me** **Really True for me**

12. **Really True for me** **Sort of True for me** Some kids don't like the way they are leading their life. **BUT** Other kids do like the way they are leading their life. **Sort of True for me** **Really True for me**

13. **Really True for me** **Sort of True for me** Some kids are pretty slow in finishing their school work. **BUT** Other kids can do their school work quickly. **Sort of True for me** **Really True for me**
14. **Really True for me** **Sort of True for me** Some kids would like to have a lot more friends. **BUT** Other kids have as many friends as they want. **Sort of True for me** **Really True for me**
15. **Really True for me** **Sort of True for me** Some kids think they could do well at just about any new sports activity they haven't tried before. **BUT** Other kids are afraid they might not do well at sports they haven't ever tried. **Sort of True for me** **Really True for me**
16. **Really True for me** **Sort of True for me** Some kids wish their body was different. **BUT** Other kids like their body the way it is. **Sort of True for me** **Really True for me**

17. **Really True for me** **Sort of True for me** Some kids usually act the way they know they are supposed to. **BUT** Other kids often don't act the way they are supposed to. **Sort of True for me** **Really True for me**
18. **Really True for me** **Sort of True for me** Some kids do very well at all kinds of sports. **BUT** Other kids don't feel that they are very good at sports. **Sort of True for me** **Really True for me**
19. **Really True for me** **Sort of True for me** Some kids find it easy to talk to other kids. **BUT** Some kids find it hard talking to other kids. **Sort of True for me** **Really True for me**
20. **Really True for me** **Sort of True for me** Some kids are always doing things with a lot of kids. **BUT** Other kids usually do things by themselves. **Sort of True for me** **Really True for me**

21. **Really True for me** **Sort of True for me** Some kids feel that they are better than others their age at sports. **BUT** Other kids don't feel they can play sports as well. **Sort of True for me** **Really True for me**
22. **Really True for me** **Sort of True for me** Some kids wish their physical appearance (how they look) was different. **BUT** Other kids like their physical appearance the way it is. **Sort of True for me** **Really True for me**
23. **Really True for me** **Sort of True for me** Some kids usually get in trouble because of the things they do. **BUT** Other kids usually don't do things that get them in trouble. **Sort of True for me** **Really True for me**
24. **Really True for me** **Sort of True for me** Some kids don't think that having a lot of friends is important. **BUT** Other kids think that having a lot of friends is important. **Sort of True for me** **Really True for me**

25. **Really True for me** **Sort of True for me** Some kids like the kind of person they are. **BUT** Other kids often wish they were someone else. **Sort of True for me** **Really True for me**
26. **Really True for me** **Sort of True for me** Some kids find it quite hard to join in when other kids are playing together. **BUT** For other kids joining in is quite easy. **Sort of True for me** **Really True for me**
27. **Really True for me** **Sort of True for me** Some kids wish that more people their age liked them. **BUT** Other kids feel that most people their age do like them. **Sort of True for me** **Really True for me**
28. **Really True for me** **Sort of True for me** In games and sports some kids usually watch instead of play. **BUT** Other kids usually play rather than watch. **Sort of True for me** **Really True for me**

- 29.
- | | | | | | |
|---------------------------|----------------------------|---|------------|---|---------------------------|
| Really True for me | Sort of True for me | | | Sort of True for me | Really True for me |
| <input type="checkbox"/> | <input type="checkbox"/> | Some kids wish something about their face or hair looked different. | BUT | Other kids like their face and hair the way they are. | <input type="checkbox"/> |
-
- 30.
- | | | | | | |
|---------------------------|----------------------------|--|------------|---|---------------------------|
| Really True for me | Sort of True for me | | | Sort of True for me | Really True for me |
| <input type="checkbox"/> | <input type="checkbox"/> | Some kids do things they know they shouldn't do. | BUT | Other kids hardly ever do things they know they shouldn't do. | <input type="checkbox"/> |
-
- 31.
- | | | | | | |
|---------------------------|----------------------------|--|------------|--------------------------------------|---------------------------|
| Really True for me | Sort of True for me | | | Sort of True for me | Really True for me |
| <input type="checkbox"/> | <input type="checkbox"/> | Some kids are very happy being the way they are. | BUT | Other kids wish they were different. | <input type="checkbox"/> |
-
- 32.
- | | | | | | |
|---------------------------|----------------------------|--|------------|-----------------------------------|---------------------------|
| Really True for me | Sort of True for me | | | Sort of True for me | Really True for me |
| <input type="checkbox"/> | <input type="checkbox"/> | Some kids find it hard to get other kids to like them. | BUT | For other kids it is pretty easy. | <input type="checkbox"/> |

33. **Really True for me** **Sort of True for me** Some kids are popular with others their age. **BUT** Other kids are not very popular. **Sort of True for me** **Really True for me**

34. **Really True for me** **Sort of True for me** Some kids don't do well at new outdoor games. **BUT** Other kids are good at new games right away. **Sort of True for me** **Really True for me**

35. **Really True for me** **Sort of True for me** Some kids think that they are good looking. **BUT** Other kids think that they are not very good looking. **Sort of True for me** **Really True for me**

36. **Really True for me** **Sort of True for me** Some kids behave themselves very well. **BUT** Other kids often find it hard to behave themselves. **Sort of True for me** **Really True for me**

37.

Really True for me	Sort of True for me			Sort of True for me	Really True for me
<input type="checkbox"/>	<input type="checkbox"/>	Some kids think it's important to be popular.	BUT	Other kids <u>don't</u> think that being popular is important.	<input type="checkbox"/>

38.

Really True for me	Sort of True for me			Sort of True for me	Really True for me
<input type="checkbox"/>	<input type="checkbox"/>	Some kids are not happy with the way they do a lot of things.	BUT	Other kids think the way they do things is fine.	<input type="checkbox"/>

HOW IMPORTANT ARE THESE THINGS TO HOW YOU FEEL ABOUT YOURSELF AS A PERSON?

1.

Really True for me	Sort of True for me			Sort of True for me	Really True for me
<input type="checkbox"/>	<input type="checkbox"/>	Some kids think it is important to do well at schoolwork in order to feel good as a person.	BUT	Other kids don't think how well they do at schoolwork is that important.	<input type="checkbox"/>

2.

Really True for me	Sort of True for me			Sort of True for me	Really True for me
<input type="checkbox"/>	<input type="checkbox"/>	Some kids don't think that having a lot of friends is all that important.	BUT	Other kids think that having a lot of friends is important.	<input type="checkbox"/>

- 3.
- | | | | | | |
|---------------------------|----------------------------|---|------------|--|---------------------------|
| Really True for me | Sort of True for me | | | Sort of True for me | Really True for me |
| <input type="checkbox"/> | <input type="checkbox"/> | Some kids think it's important to be good at sports in order to feel good about themselves. | BUT | Other kids don't think how good you are at sports is that important. | <input type="checkbox"/> |
-
- 4.
- | | | | | | |
|---------------------------|----------------------------|--|------------|--|---------------------------|
| Really True for me | Sort of True for me | | | Sort of True for me | Really True for me |
| <input type="checkbox"/> | <input type="checkbox"/> | Some kids think it's important to be good-looking. | BUT | Other kids don't think that's very important at all. | <input type="checkbox"/> |
-
- 5.
- | | | | | | |
|---------------------------|----------------------------|--|------------|--|---------------------------|
| Really True for me | Sort of True for me | | | Sort of True for me | Really True for me |
| <input type="checkbox"/> | <input type="checkbox"/> | Some kids think that it's important to behave the way they should. | BUT | Other kids don't think that how they behave is that important. | <input type="checkbox"/> |

6.

Really True for me	Sort of True for me	<input type="checkbox"/>	<input type="checkbox"/>	Some kids don't think that getting good grades is all that important to how they feel about themselves.	BUT	Other kids think that getting good grades is important to how they feel as a person.	Sort of True for me	Really True for me
		<input type="checkbox"/>	<input type="checkbox"/>				<input type="checkbox"/>	<input type="checkbox"/>

7.

Really True for me	Sort of True for me	<input type="checkbox"/>	<input type="checkbox"/>	Some kids think it's important to be popular.	BUT	Other kids don't think that being popular is all that important.	Sort of True for me	Really True for me
		<input type="checkbox"/>	<input type="checkbox"/>				<input type="checkbox"/>	<input type="checkbox"/>

8.

Really True for me	Sort of True for me	<input type="checkbox"/>	<input type="checkbox"/>	Some kids don't think doing well at athletics is that important.	BUT	Other kids feel that doing well at athletics is important.	Sort of True for me	Really True for me
		<input type="checkbox"/>	<input type="checkbox"/>				<input type="checkbox"/>	<input type="checkbox"/>

9.

**Really
True
for
me**

**Sort
of
True
for
me**

Some kids don't think that how they look is important.

BUT

Other kids think that how they look is important.

**Sort
of
True
for
me**

**Really
True
for me**

10.

**Really
True
for
me**

**Sort
of
True
for
me**

Some kids don't think that how they act is all that important.

BUT

Other kids think it's important to act the way you are supposed to.

**Sort
of
True
for
me**

**Really
True
for me**

APPENDIX E

Friendship Quality Questionnaire- Revised

Directions for the Friendship Questionnaire

With this questionnaire, we are going to ask you to circle the choice which describes you best. These questions are about you and your friend. Please write in your friend's name for every numbered sentence. Let's look at the example.

Example A: " _____ and I are the same height."

If this statement is "Not at all true **for you**," then mark "Not at all True"

If this statement is "A little true **for you**," then mark "A little True"

If this statement is "Somewhat true **for you**," then mark "Somewhat True"

If this statement is "Pretty true **for you**," then mark "Pretty true"

If this statement is " Really true **for you**," then mark "Really true"

** Please mark only ONE answer per question.

A. _____ and I are the same height.

Not at all true	A little true	Somewhat true	Pretty true	Really true
1	2	3	4	5

Think about your relationship with _____ . Please answer all of these questions about you and _____ .

1. _____ and I live really close to each other.

Not at all true	A little true	Somewhat true	Pretty true	Really true
1	2	3	4	5

2. _____ and I always sit together at lunch.

Not at all true A little true Somewhat true Pretty true Really true

1 2 3 4 5

3. _____ and I get mad at each other a lot.

Not at all true A little true Somewhat true Pretty true Really true

1 2 3 4 5

4. _____ tells me I'm good at things.

Not at all true A little true Somewhat true Pretty true Really true

1 2 3 4 5

5. If the other kids were talking behind my back, _____ would always stick up for me.

Not at all true A little true Somewhat true Pretty true Really true

1 2 3 4 5

6. _____ and I make each other feel important and special.

Not at all true A little true Somewhat true Pretty true Really true

1 2 3 4 5

7. _____ and I always pick each other as partners.

Not at all true A little true Somewhat true Pretty true Really true

1 2 3 4 5

8. If _____ hurts my feelings, _____ says "I'm sorry."

Not at all true A little true Somewhat true Pretty true Really true

1 2 3 4 5

9. I can think of some times when _____ has said mean things about me to other kids.

Not at all true A little true Somewhat true Pretty true Really true

1 2 3 4 5

10. I can always count on _____ for good ideas about games to play.

Not at all true A little true Somewhat true Pretty true Really true

1 2 3 4 5

11. If _____ and I get mad at each other, we always talk about how to get over it.

Not at all true A little true Somewhat true Pretty true Really true

1 2 3 4 5

12. _____ would still like me even if all the other kids didn't like me.

Not at all true A little true Somewhat true Pretty true Really true

1 2 3 4 5

13. _____ tells me I'm pretty smart.

Not at all true A little true Somewhat true Pretty true Really true

1 2 3 4 5

14. _____ and I are always telling each other about our problems.

Not at all true A little true Somewhat true Pretty true Really true

1 2 3 4 5

15. _____ makes me feel good about my ideas.

Not at all true A little true Somewhat true Pretty true Really true

1 2 3 4 5

16. When I'm mad about something that happened to me, I can always talk to _____ about it.

Not at all true A little true Somewhat true Pretty true Really true

1 2 3 4 5

17. _____ and I help each other with chores or other things a lot.

Not at all true A little true Somewhat true Pretty true Really true

1 2 3 4 5

18. _____ and I do special favors for each other.

Not at all true A little true Somewhat true Pretty true Really true

1 2 3 4 5

19. _____ and I do fun things together a lot.

Not at all true A little true Somewhat true Pretty true Really true

1 2 3 4 5

20. _____ and I argue a lot.

Not at all true A little true Somewhat true Pretty true Really true

1 2 3 4 5

21. I can always count on _____ to keep promises.

Not at all true A little true Somewhat true Pretty true Really true

1 2 3 4 5

22. _____ and I go to each other's homes after school and on weekends.

Not at all true A little true Somewhat true Pretty true Really true

1 2 3 4 5

23. _____ and I always play together at recess.

Not at all true A little true Somewhat true Pretty true Really true

1 2 3 4 5

24. When I'm having trouble figuring out something, I usually ask _____ for help and advice.

Not at all true A little true Somewhat true Pretty true Really true

1 2 3 4 5

25. _____ and I talk about the things that make us sad.

Not at all true A little true Somewhat true Pretty true Really true

1 2 3 4 5

26. _____ and I always make up easily when we have a fight.

Not at all true A little true Somewhat true Pretty true Really true

1 2 3 4 5

27. _____ and I fight.

Not at all true A little true Somewhat true Pretty true Really true

1 2 3 4 5

28. _____ and I always share things like stickers, toys, and games with each other.

Not at all true A little true Somewhat true Pretty true Really true

1 2 3 4 5

29. If _____ and I are mad at each other, we always talk about what would help to make us feel better.

Not at all true A little true Somewhat true Pretty true Really true

1 2 3 4 5

30. If I told _____ a secret, I could trust _____ not to tell anyone else.

Not at all true A little true Somewhat true Pretty true Really true

1 2 3 4 5

31. _____ and I bug each other.

Not at all true A little true Somewhat true Pretty true Really true

1 2 3 4 5

32. _____ and I always come up with good ideas on ways to do things.

Not at all true A little true Somewhat true Pretty true Really true

1 2 3 4 5

33. _____ and I loan each other things all the time.

Not at all true A little true Somewhat true Pretty true Really true

1 2 3 4 5

34. _____ often helps me with things so I can get done quicker.

Not at all true A little true Somewhat true Pretty true Really true

1 2 3 4 5

35. _____ and I always get over our arguments really quickly.

Not at all true A little true Somewhat true Pretty true Really true

1 2 3 4 5

36. _____ and I always count on each other for ideas on how to get things done.

Not at all true A little true Somewhat true Pretty true Really true

1 2 3 4 5

37. _____ doesn't listen to me.

Not at all true A little true Somewhat true Pretty true Really true

1 2 3 4 5

38. _____ and I tell each other private thoughts a lot.

Not at all true A little true Somewhat true Pretty true Really true

1 2 3 4 5

39. _____ and I help each other with schoolwork a lot.

Not at all true A little true Somewhat true Pretty true Really true

1 2 3 4 5

40. I can think of lots of secrets _____ and I have told each other.

Not at all true A little true Somewhat true Pretty true Really true

1 2 3 4 5

41. _____ cares about my feelings.

Not at all true A little true Somewhat true Pretty true Really true

1 2 3 4 5

APPENDIX F

Coding Scheme for Observed Disclosure

Instructions: Observe the interaction of friends and look for instances of disclosure. In Using Rotenberg's (1995) definition, disclosure talk includes discussion of daily thoughts and concerns or more serious problems. Disclosure talk may be in the form of direct statements about the self (e.g., "I'm really bad at math. I think I'm going to fail.") or indirect statements about problems (e.g., "Jen is really mean and doesn't let anyone use her stuff."). Coding begins when a statement of disclosure is made.

Identify the time the statement is made, the ID number of the initiator, the topic of disclosure, and the end time of that person's speech. Also, note the start time of the friend's response, the responder's ID number, the type of response, and the end time. Start and stop times are defined either by a change in topic or a significant period of silence/ pause (more than 2 seconds).

Speech Topic: The list of topics was generated from work by Carlson and colleagues (Carlson, Schwartz, Luebbe, & Rose, 2006). They classified the problem talk of 10th grade friendship dyads into the categories of close friends, romantic partners, peers in general, parents, other family members, academics, and extra-curricular activities. This list was adapted for use with 5th and 6th grade youth. For data analytic purposes, these topics are combined into 3 categories: 1) Evaluative Talk, which consists of negative self speech and negative dyad speech, 2) Peer Talk, which consists of general peer problems and specific friend problems, and 3) Other Talk, which consists of family problems, academic problems, romantic problems, and discussion of other topics. Definitions and examples of each topic are:

1) Evaluative Talk

- Negative self: negative statements about the self, such as “I suck at this.”
- Negative dyad: negative statements about the dyad, such as “We suck at drawing.”

2) Peer Talk

- General peer: statements about classmates, teammates, etc., such as “The girls in my class always leave me out.”
- Friend: statements about person(s) identified as friend(s), such as “You’re supposed to be my friend and you’ve been really mean lately.”
- Other child: statements about other youth not identified as friend(s), such as “That new kid has been giving me weird looks and making me uncomfortable.”

3) Other Talk

- Romantic: statements about issues involving actual or potential boy/girlfriend(s), such as “I think Mike is going to break-up with me.”
- Academic: statements about school-related topics, including teachers, homework, grades, etc., such as “I’m afraid I’m going to fail science.”
- Family: statements about parents, siblings, home-life, etc., such as “My mom never gives me any privacy.”
- Extra-curricular: statements about activities outside school, including basketball, choir, etc., such as “I’m nervous about trying-out for drama club.”
- Other: statements that cannot be classified into one of the other categories

Friend's response: The list of responses was created based on work on negative talk and problem talk between friends (Joiner & Metalsky, 2001), conversation analysis (Segrin & Flora, 1998), and co-rumination work by Rose and colleagues (Rose, Schwartz, & Carlson, 2005). For data analytic purposes, these responses are combined into 3 categories: 1) Positive Responses, which consist of imitative statements, sympathetic responses, negating statements, and statements offering help, 2) Negative Responses, which consist of ignoring, laughing, negative reinforcement, positive comparison, and acknowledgement, and 3) Co-ruminative Responses, which consist of rehashing details of problem, dwelling on negative affect, speculating about the causes of the problem, and encouraging problem talk. Definitions and examples of each topic are:

1) Positive Responses

- Imitative statements: response in which friend offers similar or reciprocated disclosure, such as “I have trouble with that too.”
- Sympathetic responses: response in which friend expresses sympathy or compassion, such as “I’m sorry that you’ve having problems.”
- Negating statements: response in which friend negates original negative statement, such as “You don’t suck.”
- Statements offering help: response in which friend offers instrumental aid, such as “I’ll tutor you.”

2) Negative Responses

- Ignoring: friend does not make audible response to disclosure, and often changes subject without commenting on disclosure

- Laughing: friend responds to disclosure by laughing
- Negative reinforcement: response in which friend agrees with original negative disclosure, such as “You do suck.”
- Positive comparison: response in which friend makes positive comment about self, such as “Well, I’m really good at that.”
- Acknowledgement: response in which friend acknowledges disclosure, such as “Uh-huh.”

3) Co-ruminative Responses

- Rehashing details of problem: responding by rephrasing details of problem, such as “So, you think you won’t make the basketball team and you’re really upset?”
- Dwelling on negative affect: responding by bringing focus to negative feelings associated with disclosure, such as “That sounds really upsetting.”
- Speculating about the causes of the problem: responses that invoke speculation about causes of problem, such as “Why do you think that happened?”
- Encouraging problem talk: responses that evoke more discussion of problem/disclosure, such as “Tell me more about exactly what happened.”

ID of child talking									
Start time									
Stop time									
Total seconds									

Topic

Negative self									
Negative dyad									
General peer									
Friend									
Other child									
Romantic									
Academic									
Family									
Extra-curricular									
Other									

Response

Offer help									
Imitative									
Negating									
Sympathetic									
Comparative									
Laugh									
Irritated									
Ignore									
Negative reinforcement									
Acknowledge									
Rehash									
Speculate									
Dwell on negative affect									
Encourage problem talk									
Other									

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