

"My Parent is so Stubborn!"—Perceptions of Aging Parents' Persistence, Insistence, and Resistance

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Objective. Aging parents may respond to advice or help with daily problems from their grown children by insisting, resisting, or persisting in their ways or opinions, behaviors which are commonly viewed as *stubbornness*. Research has not examined how frequently such behaviors occur and what factors are associated with these behaviors.

Methods. Middle-aged adults and parents ($N = 189$ dyads) reported the prevalence of parental behaviors attributed to stubbornness. Utilizing hierarchical linear regression and multilevel modeling this exploratory study examined the association of parent stubbornness with individual and relationship-based characteristics and concordance in reports within dyads.

Results. Over 77% of children and 66% of parents reported parents acting in ways attributed to stubbornness at least sometimes. Children reported higher levels of parental stubbornness than parents self-reported. Children's perceptions of occurrence were related to parent disability and relationship characteristics, while parents' self-reports were associated with their own personalities. Discrepancies in reports between parents and children were associated with child and parent characteristics.

Discussion. This novel exploration demonstrated that individual and relationship-based factors are linked to the perceived expression of stubbornness by parents and that there is discordance in perceptions within families. Findings suggest a need for intervention to increase understanding within families.

Key Words: Family support—Intergenerational relations—Stubbornness.

AS people age, they are increasingly presented with challenges in their daily lives that they can no longer manage (Lawton & Nahemow, 1973) due to limitations in functional and cognitive abilities (Baltes, 1997). In response to these changes, older adults often turn to adult offspring for support with daily decision making and care (Pescosolido, 1992). However, as children become more involved, they may make suggestions for things that older adults might do to maintain their safety and well-being, only to find out that older adults see things differently. A child may, for example, hope to offer support in accomplishing a task (i.e., take the older adult to the store), yet, the older adult may not share this goal and prefer to accomplish this task in another way (i.e., walking the three blocks to the store by him or herself). Although children may have increasing power in the relationship due to parents' declining ability and functioning (Pyke, 1999), parents may repeatedly reject the advice or support of their children, and as a result, be perceived by their children as insisting, resisting, or persisting in their ways or opinions—acting in ways commonly attributed to *stubbornness*. Popular media discussions (Mayo Clinic, 2014) and clinical evidence (Zarit & Zarit, 2007) suggest that these kinds of behaviors are particularly upsetting to family members providing support to older adults. However, research has yet to examine if, or how frequently,

such behaviors are perceived to occur and what factors are associated with their occurrence within families.

PERSISTENCE, INSISTENCE, AND RESISTANCE

Research highlights that older adults persist in pursuit of goals (Freund, 2006). Such persistence may in some cases be positive, termed *tenacity*, whereby one is continuing to work toward a goal in the face of challenges or setbacks (Ford & Smith, 2007), but persistence also may be negative and less effective for older adults than younger adults in accomplishing a goal in an interpersonal context. As found by Wrosch and colleagues (2000); older adults exerting more persistence reported lower levels of subjective well-being compared with younger adults. The perception of such persistence, however, has not been systematically studied.

Persistence in pursuing goals, often labeled as "stubbornness," has generally been conceptualized as an individual characteristic of a person (Vignoles, Regalia, Manzi, Golledge, & Scabini, 2006) of being "fixed or set in purpose or opinion" (Stubbornness, 2011). Stubbornness is treated as synonymous with rigidity, obstinacy, persistence, and resistance, or in childhood, as active disobedience, defiance, or failure to follow instructions (Burket et al., 2006). Stubbornness has been discussed as a negative dimension

of agreeableness (e.g., disagreeableness) or a singular word describing a personality type of “demanding or strong-willed” (Buchanan & Holmbeck, 1998; Chen, 2010; Davey, Eaker, & Walters, 2003; Demiris et al., 2008; Dong et al., 2011; Holland & Roisman, 2008; McCrae & Costa, 1987). However, in each instance stubbornness has been studied as a personality trait measured by only one survey item. Yet, discussions of persistence such as those presented in relation to control efforts (Wrosch et al., 2000) and goal pursuit (Ford & Smith, 2007), describe an interpersonal sequence of behaviors. An understanding of the occurrence of such behaviors and how they are associated with individual and relationship characteristics is critical for understanding how to address perceptions of stubbornness in families.

It is likely that perceptions of parental stubbornness by adult children or parents themselves are linked to a series of factors: (a) individual characteristics of the parent or child (i.e., personality), (b) parental factors (i.e., disability), (c) relationship factors (i.e., relationship quality), and/or (c) grown children’s experiences in assisting their parents (i.e., child coping strategies). If individuals are less agreeable overall or older adults self-perceive themselves as having a “stubborn” personality, families may be less willing to compromise in times of conflict. Individuals who are higher in neuroticism may see more negative characteristics in everyday encounters (Costa, McCrae, & Norris, 1981) such as the occurrence of stubbornness. Further, given the difficulty in balancing dependency with independence for older adults, more disability and poorer health may be associated with perceptions of parents’ behaviors as stubborn (Baltes, 1996).

Perceptions of stubbornness may also be associated with relationship quality (Birditt, Rott, & Fingerman, 2009) or stress when helping an aging parent. When relationship quality is poorer or assisting a parent is particularly challenging, family members may be more likely to attribute difficulties in providing help to parent stubbornness. Furthermore, perceptions of stubbornness may be associated with how adult children generally respond to relationship conflict. For example, being more avoidant when there is conflict may open a door that allows a parent to resist more readily. Such behaviors may also be linked to demographic variables such as health or geographic distance due to their associations with relationship functioning (Birditt, Miller, Fingerman, & Lefkowitz, 2009) and support provided (Fingerman et al., 2011).

Additionally, parents and adult offspring may differ in how frequently they think the parent acts “stubbornly”. Prior research shows that parents and family members differ in their perceptions of older adults’ values and preferences in daily care (Reamy, Kim, Zarit, & Whitlatch, 2011) with caregivers underestimating the importance of values that older adults self-report. There may be a similar pattern of discrepancy in perceptions of parental stubbornness whereby children perceive parents’ behaviors as more frequent than the parent, which may carry implications

for relationship functioning and the provision of support to older adults. Given the scant research on this topic an exploratory approach to teasing out such associations is needed.

CURRENT STUDY

This exploratory study examines how frequently adult offspring and aging parents perceive aging parents to insist, persist, or resist in actions, or act in ways commonly attributed to “stubbornness”. The goal is not to identify whether individuals are “stubborn” (i.e., possess a trait), but rather to understand perceptions of older parents and their adult children of a parent behaving in a stubborn manner. The study addresses three primary questions:

1. To what extent do adult children perceive their parents as acting in a way commonly attributed to stubbornness and to what extent do aging parents’ self-perceive themselves as acting in this way? Given the discussion of such behaviors in clinical settings (Zarit & Zarit, 2007) and the documentation that older adults persist in their goals (Freund, 2006), we hypothesized that the majority of middle-aged adult children and aging parents would report perceiving their parents (or themselves) as presenting at least one behavior commonly described as stubbornness during the past few months.
2. What individual and relationship-based factors are associated with perceptions of parent stubbornness? We hypothesized that parents and grown children would be more likely to perceive the parent as stubborn based on: (a) individual characteristics of both parties (e.g., lower agreeableness, higher neuroticism), (b) parental factors (e.g., greater parent disability, parents’ self-perception as stubborn), (c) relationship factors (e.g., poorer quality relationship, less support), and (d) the grown child’s experiences in assisting the parent (e.g., more stress in helping the parent, greater use of avoidant coping strategies).
3. Do adult children perceive more occurrences of stubbornness by parents than parents self-report? And, if so, what individual or relationship characteristics are associated with such discrepancies? We hypothesized that adult children would report more occurrences of parental stubbornness and that this discrepancy would be negatively associated with relationship quality (i.e., lower positive or higher negative relationship quality, more discrepancy) and parent health (i.e., lower health, more discrepancy), but positively associated with parent disability (i.e., greater disability, more discrepancy).

METHOD

Participants and Procedures

This sample included 189 aging parents out of a possible pool of 241 parents who participated in a second wave of the “Family Exchanges Study” (FES2; participation rates for parents who participated in FES1 were 77%). The sample

was limited only to those parents that also had an adult child participate. In addition a small number ($n = 32$) of families had both parents participate in the survey. To remove this dependency of multiple reports within one family, one parent was randomly selected from each of these families. The parents who participated in this study ($N = 189$) differed from the remaining parents ($N = 52$) only with regard to gender with a greater proportion of women in this sample compared to the full sample ($\chi^2(1, N = 241) = 4.89, p = .04$).

Grown children who were also interviewed in FES2 were then included in the sample based on their parents' participation. The final sample included 189 dyads of a middle-aged adult (aged 45–65) and his/her parent (aged 63–95; see Fingerma et al., 2011 initial sample details and Table 1 for sample descriptives). The grown children included in this study were similar to other grown children in the larger FES2 sample with regard to gender, age, education, income, and race. All participants completed a telephone, web-based, or paper and pencil interview answering questions about a range of behaviors, thoughts, and beliefs.

MEASURES

Outcome Measure

Parent stubbornness.—An independent sample of middle-aged adults ($N = 88$) completed a pilot study of parental insistence, persistence, and resistance, i.e., “stubbornness”, including fixed-choice and open-ended questions. Based on frequency of responses and reliability estimates, the

measure was pared down to four items (answered separately for mothers and fathers). Participants rated the prevalence of parental stubbornness on a Likert scale of 0 (*never*), 1 (*rarely*), 2 (*sometimes*), 3 (*often*), or 4 (*always*) referencing “the past few months”. The items ask “To what extent does your mother/father ever...” for the following behaviors: (a) ignore suggestions or advice from you that would make his/her life better safer or easier, (b) ignore or refuse to do what his/her doctor tells him/her to do, (c) insist on doing things his/her own way even if it makes his/her life more difficult or unsafe, and (d) insist on doing things his/her own way even if it makes someone else's life more difficult, inconvenienced, or unsafe. Parallel questions were prepared for parents to report on their own behaviors. Total scores were created to capture frequency of perceived parental stubbornness (parent self-report $\alpha = 0.54$; child report $\alpha = 0.84$) and could range from 0 (no stubbornness perceived) to 16 (all four stubbornness behaviors perceived to occur always).

Independent Measures

Demographics.—Middle-aged adults and their parents provided information about their background characteristics: age, race, gender, education, marital status, income, physical health, living arrangements, and geographic distance. Race was coded as 0 (*minority*) and 1 (*white*). Gender was coded as 0 (*female*) and 1 (*male*). Education was coded as 1 (*no High School*) to 5 (*Post Graduate*). Marital status was coded as 0 (*not currently married*) and 1 (*married*). Income was on a scale of 1 (*less than \$10,000*) to 12

Table 1. Sample Demographics, Descriptives, and Correlations With Perceptions of Parent Stubbornness

	Parent characteristics			Child characteristics		
	% (n)/M (SD)	Correlation with parent report	Correlation with child report	% (n)/M (SD)	Correlation with parent report	Correlation with child report
Demographics						
Gender (male)	27% (50)	-0.09	0.11	40% (75)	0.05	-0.14†
Race (non-Hispanic White)	68% (128)	0.04	0.01	68% (128)	-0.04	-0.05
Marital Status (married)	32% (61)	0.03	-0.01	66% (124)	0.02	-0.04
Adult children in the home (yes)	—	—	—	49% (93)	-0.00	0.05
Parent and child live together (yes)	—	—	—	9% (16)	0.15*	0.10
Both parents living (yes)	—	—	—	34% (64)	0.03	0.16*
Age	80.21 (5.94)	-0.15*	0.01	54.66 (4.55)	-0.11	0.04
Education	2.60 (1.09)	0.02	0.00	3.36 (1.06)	-0.05	0.02
Income	3.17 (1.69)	-0.02	-0.00	6.49 (2.83)	0.00	0.03
Physical health	2.94 (1.10)	-0.20***	-0.24***	3.35 (0.95)	0.01	-0.07
Distance	—	—	—	1.27 (1.07)	-0.07	0.04
Predictors						
Positive relationship quality	4.25 (0.68)	-0.23**	-0.36***	4.19 (0.72)	-0.17*	-0.53***
Negative relationship quality	1.82 (0.68)	0.22**	0.38***	1.97 (0.78)	0.09	0.37***
Neuroticism	2.31 (0.71)	0.33***	0.18*	2.57 (0.75)	0.06	0.19**
Agreeableness	3.90 (0.64)	-0.20**	-0.15*	3.97 (0.56)	0.00	0.04
Support provided	3.89 (1.36)	0.05	-0.01	4.35 (1.37)	-0.01	0.03
Avoidant coping responses	—	—	—	2.43 (0.97)	0.07	0.47***
Stressfulness of helping parent	—	—	—	2.14 (1.20)	0.16*	0.58***
Parent disability (reported by child)	0.92 (1.13)	0.05	0.37***	—	—	—
Parent “Stubborn” personality	-0.02 (2.28)	0.29***	0.15*	—	—	—

Notes. $N = 189$ dyads.

† $p < .10$. * $p < .05$. ** $p < .01$. *** $p < .001$.

(\$250,001 or more). Physical health was coded 1 (*poor*) to 5 (*excellent*). Living arrangements were coded with two variables (1) 0 (*dyad did not live together*) or 1 (*dyad lived together*) and (2) 0 (middle-aged adult did not have adult children in the home) and 1 (had adult children in the home). Distance was recorded in number of miles and log-linear transformed due to positive skew (reported by children; Fingerman et al., 2011). In addition, a variable was created to denote if the middle-aged adult had only one parent living (0) or both (1). See Table 1 for descriptive statistics.

Personality: neuroticism and agreeableness.—Middle-aged adults and their parents rated how well nine personality items described themselves on a scale of 1 (*a lot*) to 4 (*not at all*). Four items assessed neuroticism (i.e., moody, worrying, nervous, calm—reverse coded) and five items assessed agreeableness (i.e., helpful, warm, caring, soft-hearted, sympathetic; used in the Midlife in the United States (MIDUS) study; Lachman & Weaver, 1997). Two mean-item subscales were created for parents (neuroticism $\alpha = 0.61$; agreeableness $\alpha = 0.65$) and adult children (neuroticism $\alpha = 0.72$; agreeableness $\alpha = 0.67$).

Parent's self-report of "stubborn" personality.—In addition to assessing stubborn behaviors, we asked parents to complete a three-item measure rating themselves as having the personality trait of "stubbornness". Informed by prior literature (Eckstein, 2011; Finney, 1961; McCrae & Costa, 1987), we selected two items I have a stubborn streak in me on certain things and People can push me just so far and then I have to take a stand, which were rated on a scale of 0 (*never*) to 4 (*always*) and one item that asked parents to rate themselves on a scale of 1 (*flexible*) to 10 (*stubborn*). The items were z-scored and summed ($\alpha = 0.58$).

Parent disability.—Middle-aged adults and parents rated parents' abilities regarding four activities of daily living (e.g., Does s/he need help with personal care such as bathing and dressing?). Items were coded as 0 (*No*) or 1 (*Yes*) and totaled; higher values indicate greater disability ($\alpha = 0.72$; Bassett & Folstein, 1991; Rovner, Zisselman, & Shmuelly-Dulitzku, 1996).

Positive relationship quality.—Middle-aged adults and their parents answered two questions about positive relationship quality on a scale of 1 (*not at all*) to 5 (*a great deal*) of how much does your father/mother/child (1) understand you and (2) love and care for you (Fingerman, Chen, Hay, Cichy, & Lefkowitz, 2006). A mean-item score of positive relationship quality was created (parents perception: $\alpha = 0.48$; child perception: $\alpha = 0.69$).

Negative relationship quality.—Middle-aged adults and their parents also answered four questions about negative relationship qualities on a scale of 1 (*not at all*) to 5 (*a great*

deal) of how much does your father/mother/child (1) criticize you, (2) make demands on you, (3) give you unwanted advice, and (4) talk on the phone, text, or engage in other distractions when you are together (Fingerman et al., 2006). A mean-item score of negative relationship quality was created (parent perception: $\alpha = 0.33$; child perception: $\alpha = 0.70$).

Support provided.—Middle-aged adults completed the Intergenerational Support Scale (Fingerman et al., 2011) regarding the frequency of support they provide their parents. Parents completed the same scale for support provided to offspring. The scale consists of the mean item score of six items (i.e., emotional support, practical support) rated on a scale of 1 (*less than once a year or not at all*) to 8 (*daily*; parent reports $\alpha = 0.78$; child report $\alpha = 0.83$).

Avoidant coping behaviors.—Two-items rated 1 (*not at all*) to 5 (*a great deal*) assessed children's avoidant behavioral reactions when encountering interpersonal problems with their parents: "I accept that there is nothing I can do about the problem" and "I avoid talking about the problem with my father/mother/child" (Birditt et al., 2009; Miller, Charles, & Fingerman, 2009). A mean item score was calculated ($\alpha = 0.56$).

Feelings of stressfulness.—Middle-aged participants answered one item indicating how stressful they find helping their parents from 1 (*not at all*) to 5 (*a great deal*; Fingerman, Cheng, Tighe, Birditt, & Zarit, 2012).

ANALYSES

We first examined descriptive statistics for the frequency of parents' stubbornness as indicated by parents and children. Given the exploratory nature of the study, data were examined to see the proportion of the sample that perceived at least one stubborn behavior to occur *rarely*, *sometimes*, or *often* within the past few months to understand their occurrence. Second, total reports of stubbornness were included as outcome variables in two sets of hierarchical linear regression models to understand what factors were associated with (a) middle-aged adults' reports of their parents' stubbornness and (b) parent self-reports of such behaviors. A parsimonious approach to model building was taken. Only variables that showed at least a trending zero order correlation with the outcome variable ($p < .10$; Rovine, von Eye, & Wood, 1988) and were not highly intercorrelated were entered into each model (i.e., $r < 0.50$; parent and child race and parent and child report of parent disability were not simultaneously examined). Models were built in four steps. We first accounted for the individual characteristics of both parties (i.e., demographics and personality). Second, we added in parental factors (i.e., disability and self-perception as stubborn). Third, we accounted for the effects of relationship factors (i.e., relationship quality and support). Last, we entered factors related to grown

children's experiences in assisting their parents (i.e., stress and coping strategies). Nonsignificant effects were trimmed at each step.

Third, multilevel modeling (MLM) was used to investigate the concordance in reports of parents' stubbornness by adult children and aging parents (SAS PROC MIXED) which enables prediction at both the level of the outcome and direction of differences in reports of the outcome within pairs (Maguire, 1999). MLM accounts for the interdependence of individuals within each dyad. In this case, individual reports by parents and children (Level 1) are nested within the dyad (Level 2). At Level 1, we used observations from each individual reporter to fit a regression with two parameters—slope and intercept—on the indicator variable Generation (*child or parent*). The intercept represents the mean level of perceived stubbornness reported by each dyad. The slope captures the degree of discrepancy in the level of reported stubbornness between the dyad members. A negative coefficient for discrepancy indicates that parents reported a higher level of stubbornness than children; a positive coefficient for discrepancy indicates that children reported a higher level of stubbornness than parents.

At Level 2 (between-dyads), the intercept and slope were treated as outcome variables, which can vary across dyads. We included the individual and relationship-based characteristics that showed a significant zero-ordered association with the difference in reports of parents and children on parent stubbornness in four groups: individual characteristics of both parties, parental factors, relationship factors, and then grown children's experiences in assisting their parents. Models were trimmed at each step to only retain significant variables.

RESULTS

Question 1: Frequency of Persistent Behaviors by Parents?

The majority of middle-aged adult children and aging parents reported perceiving their parents (or themselves) as presenting at least one behavior commonly described as stubbornness at least *rarely* in the past few months (92%, $n = 174$ of adult children; 94%, $n = 177$ of older parents). In addition, 77% ($n = 146$) of children and 66% ($n = 124$) of parents reported at least one of the four behaviors occurring *sometimes*, and 43% ($n = 82$) of children and 20% ($n = 37$) of parents reported at least one of the behaviors occurring *often* within the past few months. Total stubbornness scores ranged from 0 to 15 ($M = 6.27$, $SD = 3.63$) for children and 0 to 12 for parents ($M = 4.12$, $SD = 2.41$). The scale and responses on the individual items were normally distributed (skew < 1; kurtosis < 1), indicating a range of occurrences across families.

Question 2: What Factors are Associated with Parents' Behaviors to Persist?

We next examined children's reports of parental stubbornness. Regression results confirmed that if parents had

higher levels of disability children reported higher levels of perceived parent stubbornness ($\beta = 0.61$). Reports were also significantly negatively related to child reported positive relationship quality ($\beta = -1.13$) and positively related to parents' reports of negative relationship quality ($\beta = 1.04$). Additionally, greater use of avoidant coping strategies by children and experience of more stress when helping a parent were positively associated with perceived parent stubbornness ($\beta = 1.00$ and $\beta = 0.73$, respectively). Reports of parent stubbornness by children were not independently associated with demographic characteristics of the parent or child (race, age, education, income, gender, physical health, geographic distance, if both parents living), personality (agreeableness, neuroticism, parent 'stubborn' personality), or support provided after accounting for these associations. (See Table 2)

Parents' self-reports of their stubbornness were associated with a different set of characteristics. Parents who self-reported greater neuroticism ($\beta = 0.94$), less agreeableness ($\beta = -0.64$), and having a 'stubborn personality' ($\beta = 0.29$) reported higher levels of self-perceived behaviors attributed to stubbornness. In addition, stubbornness reports were greater for parents who reported living with their adult child ($\beta = 1.38$). Parent self-perceptions were not independently associated with demographic characteristics of either family member (race, age, gender, income, education, physical health, geographic distance, if both parents living), child personality (agreeableness, neuroticism), parent disability, or relationship factors (relationship quality, support). Furthermore, parent self-perceptions were also not independently associated with child beliefs in helping (avoidant coping responses, child experience of stress). (See Table 3)

Question 3: Discrepancies in Perceptions of Stubbornness?

There was a significant difference in parents' and children's reports of parental stubbornness with children reporting greater parental stubbornness than parents-self reported (see Table 4, Model 0). This discrepancy was associated with parent gender, parent disability, and children's beliefs around assisting their parents. Children over-reported fathers as more stubborn than mothers ($\beta = 1.91$) and higher parental disability was associated with adult children reporting more stubbornness than their parent self-reported ($\beta = 0.66$). Results also indicated that greater child use of avoidant coping strategies ($\beta = 0.90$) and greater reports of children's experience of stressfulness in providing support to parents ($\beta = 0.58$) were related to children reporting more parent stubbornness than their parents self-reported (See Table 4, Model 4). Post hoc examination of the raw difference score of parent report minus child report provides additional insight into the magnitude of discrepancy at the interdyad level. The mean level difference was -2.15 ($SD = 3.90$) with a range of -13.00 to 7.00 .

Table 2. Effect of Individual and Relationship-Based Characteristics on Child-Reported Parent Stubbornness

Variables	Model 1			Model 2			Model 3			Model 4		
	<i>B</i>	<i>SE_B</i>	β	<i>B</i>	<i>SE_B</i>	β	<i>B</i>	<i>SE_B</i>	β	<i>B</i>	<i>SE_B</i>	β
Intercept	6.60***	1.20	—	5.02***	1.20	—	11.26***	1.90	—	4.54*	2.06	—
Step 1												
Both parents living	-1.06†	0.54	-0.14	-0.80	0.52	-0.11	-0.24	0.44	-0.03	-0.15	0.40	-0.02
Child neuroticism	0.86*	0.34	0.18	0.79*	0.32	0.16	0.32	0.27	0.07	0.06	0.26	0.01
Parent health	-0.72**	0.23	-0.22	-0.45†	0.23	-0.14	-0.31	0.19	-0.09	-0.15	0.18	-0.04
Step 2												
Parent disability	—	—	—	0.97***	0.22	0.30	0.84***	0.19	0.26	0.61***	0.18	0.19
Step 3												
Child reported positive RQ	—	—	—	—	—	—	-2.01***	0.30	-0.40	-1.13***	0.32	-0.22
Child reported negative RQ	—	—	—	—	—	—	0.64*	0.29	0.14	0.18	0.28	0.04
Parent reported negative RQ	—	—	—	—	—	—	0.881**	0.32	0.17	1.04***	0.30	0.20
Step 4												
Child use of avoidant coping	—	—	—	—	—	—	—	—	—	1.00***	0.22	0.26
Child stress of helping parent	—	—	—	—	—	—	—	—	—	0.73***	0.20	0.24
<i>R</i> ²		0.11			0.19			0.46			0.55	
ΔR^2		—			0.08			0.27			0.11	
<i>F</i>		7.23***			10.60***			21.22***			23.89***	

Note. Models were run on *N* = 189 who had complete data on all variables of interest. Variables at each of the remaining steps were trimmed along the way when not significant, to result in the final model presented here. RQ = relationship quality.
 †*p* < .10. **p* < .05. ***p* < .01. ****p* < .001.

Table 3. Effect of Individual and Relationship-Based Characteristics on Parent Self-Reported Stubbornness

Variables	Model 1			Model 2			Model 3		
	<i>B</i>	<i>SE_B</i>	<i>B</i>	<i>B</i>	<i>SE_B</i>	<i>B</i>	<i>B</i>	<i>SE_B</i>	<i>B</i>
Intercept	3.97***	1.20	—	4.40***	1.15	—	6.08***	1.45	—
Step 1									
Parent and child live together	1.27*	0.59	0.15	1.39*	0.57	0.16	1.38*	0.56	0.16
Parent neuroticism	1.11***	0.24	0.32	0.96***	0.23	0.28	0.94***	0.23	0.27
Parent agreeableness	-0.64*	0.26	-0.17	-0.66**	0.25	-0.17	-0.64*	0.25	-0.17
Step 2									
Parent stubborn personality	—	—	—	0.30***	0.07	0.28	0.29***	0.07	0.27
Step 3									
Child reported positive RQ	—	—	—	—	—	—	-0.41†	0.22	-0.12
<i>R</i> ²		0.16			0.24			0.25	
ΔR^2		—			0.08			0.01	
<i>F</i>		11.57***			13.83***			11.92***	

Note. Models were run on *N* = 189 who had complete data on all variables of interest. Child demographics and characteristics were also tried in the model, but were all nonsignificant (*p* > .10) and were dropped from the model. Additional variables at each of the remaining steps were trimmed along the way when not significant, to result in the final model presented here.
 †*p* < .10. **p* < .05. ***p* < .01. ****p* < .001.

DISCUSSION

The results of this study demonstrated that adult children perceive aging parents as acting in ways commonly attributed to *stubbornness* (i.e., insisting, persisting, or resisting assistance or advice). Furthermore, aging parents also self-perceived themselves as acting in this way. Perceptions of parents and children of parent stubbornness were linked to individual and relationship-based factors. However, there were differential characteristics associated with children’s perceptions as compared to parents’ perceptions and systematic discrepancies in parents’ and adult children’s perceptions of parental stubbornness.

These findings carry several implications. Adult children and aging parents both perceived older adults acting

in ways commonly attributed to stubbornness, and these behaviors were unique from a trait-based classification of stubbornness. While it is unclear how the perceptions of stubbornness correspond directly with actual behaviors, the frequency with which perceptions were reported suggests that families are likely encountering conflicts in relationship-based goals that result in perceptions that the parent is responding with stubbornness. Future research is needed focusing on how often these behaviors happen within a specified time frame, the specific contexts within which they occur, and how families navigate goal differences in relationships as parents begin to age. These studies should also identify how children offer suggestions or help to parents. Children may behave in ways that parents

Table 4. The Association of Individual and Relationship-Based Characteristics with Discrepancy in Reports of Parents' Stubbornness

	Model 0		Model 1		Model 2		Model 3		Model 4	
	<i>B</i>	<i>SE</i>	<i>B</i>	<i>SE</i>	<i>B</i>	<i>SE</i>	<i>B</i>	<i>SE</i>	<i>B</i>	<i>SE</i>
Fixed effect										
Intercept (mean)	5.20***	0.17	3.94***	0.63	3.50***	0.61	8.95***	1.39	5.43***	1.51
Slope (discrepancy) ^a	2.15***	0.28	0.77	1.01	0.04	0.98	4.73†	2.47	-0.76	2.71
Predictors of the mean										
<i>Parent characteristics</i>										
Parent gender (<i>I = male</i>)	—	—	0.23	0.40	0.22	0.39	0.45	0.33	0.36	0.31
Both parents living (<i>1 = yes</i>)	—	—	-0.56	0.37	-0.37	0.36	-0.11	0.30	-0.03	0.29
Parent disability	—	—	—	—	0.61***	0.15	0.42***	0.13	0.27*	0.12
Parent-reported positive RQ	—	—	—	—	—	—	-0.56***	0.23	-0.53*	0.22
Parent-reported negative RQ	—	—	—	—	—	—	0.76***	0.22	0.80***	0.21
<i>Child characteristics</i>										
Child neuroticism	—	—	0.53*	0.23	0.47*	0.22	0.16	0.19	0.02	0.19
Child-reported positive RQ	—	—	—	—	—	—	-1.04***	0.22	-0.54*	0.24
Child-reported negative RQ	—	—	—	—	—	—	0.36†	0.20	0.11	0.20
Child avoidant coping response	—	—	—	—	—	—	—	—	0.53***	0.15
Child stress in helping parent	—	—	—	—	—	—	—	—	0.43**	0.14
Predictors of the discrepancy										
<i>Parent characteristics</i>										
Parent gender (<i>I = male</i>)	—	—	1.69**	0.65	1.67**	0.62	1.99***	0.58	1.91***	0.56
Both parents living (<i>1 = yes</i>)	—	—	-1.74**	0.60	-1.45*	0.58	-0.95†	0.54	-0.90†	0.52
Parent disability	—	—	—	—	0.99***	0.24	0.88***	0.22	0.66**	0.22
Parent-reported positive RQ	—	—	—	—	—	—	0.11	0.40	0.09	0.39
Parent-reported negative RQ	—	—	—	—	—	—	0.37	0.39	0.46	0.38
<i>Child characteristics</i>										
Child neuroticism	—	—	0.60	0.37	0.49	0.36	0.11	0.34	-0.11	0.33
Child-reported positive RQ	—	—	—	—	—	—	-1.58***	0.40	-0.77†	0.43
Child-reported negative RQ	—	—	—	—	—	—	0.82*	0.36	0.48	0.35
Child avoidant coping response	—	—	—	—	—	—	—	—	0.90***	0.27
Child stress in helping parent	—	—	—	—	—	—	—	—	0.58*	0.25
Random effect										
Variance (mean)	1.88**	0.71	2.02**	0.69	1.87**	0.64	0.73†	0.47	0.61†	0.43
Residual	7.62***	0.79	7.12***	0.74	6.52***	0.68	5.52***	0.58	5.06***	0.54
-2 Log likelihood	1,916.8		1,883.5		1,853.3		1,750.2		1,698.8	
AIC	1,920.8		1,887.5		1,857.3		1,754.2		1,702.8	

Note. Results represent findings from using multilevel modeling to investigate the concordance in reports of parents' stubbornness by adult children and aging parents. Child demographics were also tried, but dropped for nonsignificance. Dyad $N = 189$. AIC = Akaike Information Criterion; RQ = relationship quality.

^aNegative coefficients = parent is self-reporting more stubborn behaviors than child; positive coefficients = adult child is reporting more stubborn behaviors than parent self-reports.

† $p < .10$, * $p < .05$, ** $p < .01$, *** $p < .001$.

perceive as demeaning or intrusive, which may affect relationship quality (Birditt et al., 2009; Fingerma, 2001) and trigger stubborn responses. These patterns of behavior may in turn carry negative implications for health of older adults (Kjølseth, Ekeberg, & Steihaug, 2009; Kulla, Sarvimäki, & Fagerström, 2006). The fact that stubborn behaviors were not fully explained by personality measures suggests that situational and relationship issues may drive these behaviors.

Consistent with theories of disability (Verbrugge & Jette, 1994), control (Heckhausen & Schulz, 1995), and dependency (Baltes, 1996), children perceived more stubbornness when parents had greater disability. Parents may be trying to carry out activities that they may no longer have the physical ability to accomplish or put themselves at risk of a fall or other negative outcome. From the parents' perspective,

insisting on carrying out an activity may be a way of trying to maintain self-direction in the face of growing limitations (Baltes, 1996), but children may view these behaviors only as a threat to parents' safety. Stubbornness in this context might offer the opportunity for clinical interventions that explore each person's appraisals of risk and identify strategies that address these differences in goals.

Beyond disability, relationship-based characteristics and children's beliefs about assisting their parents were linked to children's perceptions of parents' stubbornness and the discrepancy in reports of stubbornness. How parents and children interact in other ways or how children see other interactions may influence the exposure to or perception of situations of goal differences where older adults persist in their ways or opinions. For example, when a relationship is functioning better overall, parents may be more amenable

to their children's suggestions, and children may be more sensitive to parents' needs and goals. Consistent with our findings this process may be stronger within families where the child and parent live together due to the increased likelihood of interaction, regardless of the presence of other adults in the home (i.e., spouses or adult (grand)children). Further, tensions experienced within families such as those likely evoked by stubborn behaviors, are linked to relationship solidarity and ambivalence (Birditt, Miller, et al., 2009). The findings in our study that children who generally avoid conflict also report more stubbornness by parents is also indicative of relationship tensions (Birditt & Fingerman, 2005). It may be that the use of avoidant coping response increases when stubbornness is present or the perception of such by children. Additionally children who reported more stress when helping their parent also reported more parental stubbornness. The very act of hoping a parent will act a given way and perceiving a parent as resisting is likely stressful (Birditt, Cichy, & Almeida, 2011). More pointed examination of the time-ordered and causal effects of these relationships with daily-dairy studies or reports over time would build our understanding of the implications of children's beliefs and relationship functioning on the occurrence of stubbornness.

In addition to relationship processes, perceptions of parent stubbornness were also linked to parent personality characteristics. However this was only evident in predicting parent self-reports of behavior (i.e., parent stubborn personality and parent self-reports of behaviors correlated 0.29). Children appear to see parent stubbornness as a relationship embedded process while parents see their behaviors as linked to who they are as people (i.e., traits they possess). Personality may act as a predisposing catalyst to the expression of "stubbornness" because he/she is characteristically less open or agreeable. For example, higher levels of neuroticism in a parent may contribute to the development of conflict in relationship goals (Costa et al., 1981) and thereby more "stubborn" responses. Further investigation around personality attributes, including additional traits not examined here such as conscientiousness, would clarify the amenability of stubbornness to change.

Finally, despite the self-awareness by parents of their stubbornness, there is discordance between parents and adult children in how frequently they perceive parents displaying such behaviors. Children report higher levels of parent stubbornness than parents self-report. Such discordance in perceptions around goals and values is consistent with other findings in the literature (Reamy et al., 2011). These discrepancies were also found to be associated with individual and relationship-based characteristics of parents and adult children. Additional research should examine the perceived rationale for acting "stubbornly" and the implications of such differential perceptions on coping responses and care.

Overall, the results presented here are strengthened by the novelty of this investigation and the use of dyadic data in examining family perceptions. However, they are not without limitation. Though the initial sample was drawn from a randomized probability pool of individuals, the subset of families used for these analyses represent families with a middle-aged adult who has a parent still living and where both the child and parent were willing to participate in a longitudinal investigation regarding support exchanges within families. As a result, generalizability of the findings is limited and results should be considered exploratory. Second, within family differences (i.e., how a child perceives mothers versus fathers) could not be examined here; additional data could support use of multilevel models of estimation to examine between and within family differences in perceptions of stubbornness. Third, we took a parsimonious strategy in building models; however, the size of the sample may have limited the power to detect additional associations among variables measured. Furthermore, lower reliability estimates on some of the constructs tested (<0.70) may have reduced the power to detect effects; further testing of these constructs with more comprehensive batteries would substantiate findings presented here. Fourth, the behaviors tested here were generated from a pilot study with middle-aged adults and may primarily reflect the children's voice. Additional behaviors as defined by older adults may also exist that are commonly attributed to stubbornness whose inclusion may more fully capture the range of this construct and improve internal consistency estimates. For example, parents may perceive other actions that maintain independence as an expression of "stubbornness" (i.e., not 'ignoring' advice but 'choosing' to do something different for oneself). Completion of work such as a content analysis of an open-ended question would allow for further examination of the nature of these behaviors, of possible missed constructs that could be more salient, and even the valence of this construct as a positive or negative attribute, which was not addressed here. Fifth, the perceptions examined here are retrospective, not asked of both respondents (i.e., child's stubbornness), and only asked about general behaviors; more could be learned from studying behaviors over time, from both reporters, and in specific situational contexts. Last, the constructs examined here are not exhaustive; more could be learned by examining the association of stubbornness with additional constructs and reports by different respondents (i.e., parent report of child avoidance or self-avoidance).

In conclusion, we find that middle-aged adults and their aging parents perceive parents as acting in ways that are commonly attributed to stubbornness. However, children perceive higher levels than parents self-report. These behaviors are situated within the larger framework of individual and relationship-based characteristics. Individual characteristics may act as predisposing factors to the occurrence of stubbornness while the links to relationship-based processes indicate that these behaviors may be amenable

to change and affect relationship functioning on the whole. Further work is needed to tease out the time-ordered effects of stubbornness on individual and relationship-based outcomes to ultimately delineate what forms of support and/or intervention strategies would be most useful to families encountering such responses in care. Given the associations found here, it may be that by furthering our understanding of the occurrence of such behaviors and addressing stubbornness in families, support-based outcomes will be improved.

FUNDING

This work was supported by National Institute on Aging (R01AG027769), The Family Exchanges Study II (Karen Fingerman, principal investigator), and MacArthur Foundation Research Network on an Aging Society (Jack Rowe, Network Director). The content is solely the responsibility of the authors and does not necessarily represent the official views of the National Institutes Health or MacArthur Foundation.

ACKNOWLEDGMENTS

The authors would like to thank the research team members who worked diligently to collect these data and the families who participated in the project.

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