

Parenting style and mental health in Iranian adolescents

Fatemeh Zare^{1*}, Babollah Bakhshipour² and Ramezan Hassanzadeh³

1- Department of Psychology, Science and Research Branch, Islamic Azad University, Mazandaran, Iran

2- Department of Psychology, Payam-e-Noor University, Tehran, Iran

3- Department of Psychology, Islamic Azad University-Sari Branch, Sari, Mazandaran, Iran

Corresponding author: Fatemeh Zare

ABSTRACT: This study aims to determine the relationship between parenting styles and mental health of children. According to the methodology applied the descriptive nature of the correlation method. Sample includes all five areas of the city high school students and their parents from 2012 to 2013 academic year, the number was 12,852 students. To select the sample of Krejcie and Morgan table lookup based on sample size of 375 subjects was calculated. Also refer to units of multi-stage cluster sampling method was used. Measuring instrument was a questionnaire that was given to students and their parents. This parenting style questionnaire (PAQ) and General Health Questionnaire (GHQ-28), respectively. SPSS 19 statistical software used for data analysis and descriptive statistics and statistical (Pearson correlation test) was used. Results showed a significant positive relationship between three subscale of parenting style and general health.

Keywords: Parenting Styles, Mental Health, Students.

INTRODUCTION

Nearly every psychological theory gives significant weight to the parent-child relationship in generating psychological disorders such as anxiety, depression, identity, and conduct disorders. Generally, authoritarian and permissive parenting are associated with mental health problems in adolescents (Baumrind, 1991; Bigner, 1994; Forward, 1989; Wenar, 1994; Whitfield, 1987), whereas authoritative parenting is associated with their improved mental health and well-being (Buri et al., 1988; Lamborn, 1991; Wenar, 1994). Some researchers have associated authoritative parenting with noncoercive and democratic parenting, which encourages the child to express individuality within the family. In contrast, authoritarian parenting is associated with harsh, restrictive, and psychological methods of control that do not foster psychological autonomy (Barber, 1996, 1997; Steinberg, 1991), and parental control was associated with children having an external locus of control (Rohner, 1980). Vygotsky (1978) and Bronfenbrenner (1979) emphasized the role of culture in the child's development. For them, parenting is only one factor among many that influence the child's mental health and well-being; extra familial factors such as school, media, society, and culture influence the child as well. These theories lead us to rethink the effect of parenting styles on the child, putting it in a cultural context and assuming that the influence of parenting style may differ across cultural groups (Hill, 1995). Indeed, contrary to reports that indicated that authoritarian parenting has a negative influence, some researchers found that the authoritarian parenting style among African Americans is associated with assertiveness and independence among girls (Baumrind, 1972) and with high-level competency in a high-risk environment (Baldwin, 1990). Like adolescence, parenting is both a biological and a social process (Tobach and Schneirla, 1968). Parenting is a complex process, involving much more than a mother or father providing food, safety, and succour to an infant or child. Parenting involves bidirectional relationships between members of two (or more) generations; can extend through all or major parts of the respective life spans of these groups; may engage all institutions within a culture (including educational, economic, political, and social ones); and is embedded in the history of a people--as that history occurs within the natural and designed settings within

which the group lives (Ford and Lerner, 1992). The key function of a child's family is to raise the young person in as healthy a manner as possible (e.g., see Bornstein, 1995). The parents' role is to provide the child with a safe, secure, nurturing, loving, and supportive environment, one that allows the offspring to have a happy and healthy youth; this sort of experience allows the youth to develop the knowledge, values, attitudes, and behaviours necessary to become an adult making a productive contribution to self, family, community, and society (Lerner, 1995). What a parent does to fulfil these "duties" of his or her role is termed parenting; in other words, parenting is a term that summarizes behaviour shown by a person--usually, but, of course, not exclusively, the mother or father--to raise a child. Parenting effectively during the teen years, as in any developmental period, requires a thorough understanding of the normative developmental changes the adolescent is going through. The classic research of Baumrind (1971) resulted in the identification of three major types of child rearing styles: Authoritative, authoritarian, and permissive. The first style of rearing is marked by parental warmth, the use of rules and reasoning (induction) to promote obedience and keep discipline, non-punitive punishment (e.g., using "time out" or "grounding" instead of physical punishment), and consistency between statements and actions and across time (Baumrind, 1971). Authoritarian parents are not warm, stress rigid adherence to the rules they set (obey--just because we, the parents, are setting the rules), emphasize the power of their role, and use physical punishment for transgressions (Baumrind, 1971). There are a range of behaviours and associated emotions exchanged between parents and their adolescent offspring. Some of these exchanges involve positive and healthy behaviours and others involve the opposite; some of the outcomes for adolescent development of these exchanges reflect good adjustment and individual and social success, whereas other outcomes reflect poor adjustment and problems of development. As is true for all facets of human development, there is then diversity in the nature and implications of parent-child relations in adolescence. Whatever style parents use to rear their adolescents, the goal of parenting is to raise a child who is healthy and successful in life, who can contribute to self and to society, who accepts and works to further the social order. In essence, parenting and socialization endures towards individuals with sound mental health. Mental health of adolescents is affected by individual factors and experiences, social interactions, societal structures and cultural values. It is influenced by experiences in everyday life, in families and schools, on streets, and at work. Mental health problems can develop at any point in life and may be influenced by a variety of factors, including genetics or family history of a disorder, chemical imbalances in the brain, or stressors in the environment. Adolescence is a time of great change and transition, when youth are starting to make decisions about career paths, further schooling, and living on their own. These stressors, coupled with changing peer and family interactions, may lead in some cases to mental health problems, such as depression, suicidal thoughts, and anxiety disorders, particularly if the adolescent has a family history of mental illness. Children at every stage particularly adolescence are greatly influenced by their parents' rearing styles. Generally, authoritarian and permissive parenting is associated with mental health problems in adolescents (Baumrind, 1991), whereas authoritative parenting is associated with their improved mental health (Lamborn, 1991). Tozandehjani, Tavakolizadeh and Lagzian (2011) did a research on 'The Effect of Parenting Styles on Self-efficacy and Mental Health of Students'. This descriptive-analytical research was done on 210 students (105 males and 105 females) among 3757 humanity students of Payam-e-Noor and Azad Universities in Neyshabour who were selected by multilayer cluster sampling method. The subjects were tested using the child rearing self-efficacy and GHQ-28 questionnaires. The data were analysed using one-way ANOVA, two-factor (F), and Tukey's test. The results indicated that parenting styles had a significant influence on self-efficacy of students ($p= 0.0064$). There was a significant effect on increasing self-efficacy in authoritative style compared with permissive style ($p=0.0001$) and the authoritarian style ($p=0.01$). Also, parenting styles had a significant effect on mental health condition ($p=0.027$). Parenting styles had different significant effects on mental health of students. Authoritative style had an effect more than that of the permissive style. They concluded that the effect of parenting styles on self-efficacy and mental health is of great importance in students and recommended teaching programs about parenting styles for parents at different levels. Niaraki and Rezai (2010) studied the 'Self- Esteem, Mental Health and Quality of Life in relation to Parenting Styles of High School Students in Iran'. It was found that there was a significant impact of parenting style on three dimensions of mental health, namely: (a) physical, (b) anxiety, and (c) depression. This means that children raised by authoritative parenting style had better total mental health, better physical mental health and lower anxiety and depression than children raised by authoritarian and permissive parenting styles. However, it was found that parenting style did not impact social mental health. Amidst the understanding of the importance of the parent-child relationship, it becomes crucial to decipher whether the parenting styles really influence the mental health of adolescents.

MATERIALS AND METHODS

The sample comprised of 375 adolescents student and his parents from the province of Esfahan. Five districts were selected from the province of Esfahan by convenient sampling method. Adolescents and his parents were identified based on random sampling.

Tools Used

Parental Authority Questionnaire: The PAQ was designed by Buri based on the Baumurind's research on the parenting style in the year 1991 to find out the particular parenting topology being exhibited by the parents towards their child. This questionnaire is to be filled by the child. It is 30-item questionnaire and contains 10 items each on permissive, authoritative and authoritarian parenting style. It is a five point likert scale ranging from strongly disagree to strongly agree. The maximum score for each parenting topology is 50 whereas minimum score is 10. The higher score of a particular type of parenting typology indicates the parenting style of the parent of that child. The questionnaire has very high reliability as being tested through testretest method (0.81 for permissiveness, 0.86 for authoritarian and 0.78 for authoritative in case of mother). The internal consistency of items is being measured by Cronbach alpha (0.75 for permissiveness, 0.85 for authoritarian and 0.82 for authoritative in case of mother). This Questionnaire has high discriminant validity as well as high criterion validity.

General Health Questionnaire-28 (GHQ-28): GHQ-28 is a popular 28-item questionnaire specially designed to detect a wide range of psychiatric symptoms. The General Health Questionnaire has been used in more than 30 languages throughout the world as a powerful screening test. It has also been translated to Persian. In a National study, GHQ has been validated in a sample of 35014 Iranian individuals (Noorbala, 1999). This instrument is a self-administrative questionnaire and is capable to detect minor, non-psychotic psychiatric disorders in general practice. For the present study, it has been used in dermatologic patients as a valid and reliable instrument (Picardi, 2000). The questionnaire comprises four subscales of Somatic Symptoms, Anxiety and Insomnia, Social Dysfunction and Severe Depression. Each subscale consists of seven questions. The questions were to be answered on a Likert scale. The subjects would get 0 point if they chose "not at all", to 3 points for "much more than usual" responses. We use GHQ-28 rather than GHQ-12 due to more application of this version in Iran and also due to the more extended aspect.

Data Analysis

The result distributions are presented and basic descriptive parameters (arithmetic mean \pm standard deviation) were calculated. The differences between the groups were tested t test and two way ANOVA. The correlation between the variables was assessed with Pearson's correlation coefficient. The level of statistical significance was set at $P < 0.05$.

RESULTS AND DISCUSSION

Results

Results of Pearson correlation coefficient showed a significant negative relationship between authoritarian parenting style and mental health of students (Table 1).

Table 1. Pearson correlation coefficient for the relationship between authoritarian parenting style and mental health of students

Statistical Indices	
N	375
R	-0.76
Sig	0.000

Pearson correlation coefficient showed a significant positive relationship between authoritative parenting style and mental health of students (Table 2).

Table 2. Pearson correlation coefficient for the relationship between authoritative parenting style and mental health of students

Statistical Indices	
N	375
R	0.51
Sig	0.000

Pearson correlation coefficient showed a significant positive relationship between permissive parenting style and mental health of students (Table 3).

Table 3. Pearson correlation coefficient for the relationship between authoritative parenting style and mental health of students

Statistical Indices	
N	375
R	0.56
Sig	0.000

Discussion

The analysis revealed that authoritative parenting style does contribute towards the mental health of adolescents. Developmental psychologists overwhelmingly endorse authoritative parenting as the optimal parenting style for raising adolescents (Steinberg, 2001). An authoritative parenting style that includes parental monitoring and supervision promotes adolescents exposure to positive activities and reduces the opportunities for engaging in delinquent and risky behaviour (Wargo, 2007). The findings of the present study provides some insights to parents, psychologists and researchers in promoting adolescents' psychosocial development and mental health. It is also suggested that future research studies be conducted considering parents' age, educational level, socio-economic status, family size, and parental background etc. to study the relationship of parenting styles and attachment styles of adolescents.

REFERENCES

- Baldwin AL, Baldwin C and Cole RE. 1990. Stress-resistant families and stress-resistant children. In J. Rolf, A. Masten, D. Chicchetti, K. Nuechterlein, and S. Weintraub (Eds.), Risk and protective factors in the development of psychopathology (pp. 257-280). Cambridge, UK: Cambridge University Press.
- Barber B. 1996. Parental psychological control: Revising a neglected construct. *Child Development*, 67, 3296-3319.
- Barber B. 1997. Adolescent socialization in context: The role of connection, regulation and autonomy in the family. *Journal of Adolescent Research*, 12, 5-11.
- Baumrind D. 1972. An exploratory study of socialization effects on Black children: Some Black-White comparison. *Child Development*, 43, 261-267.
- Baumrind D. 1991. The influence of parenting style on adolescent competence and substance use. *Journal of Early Adolescence*, 11, 56-95.
- Bigner JJ. 1994. Individual and family development: A life-span interdisciplinary approach. Englewood Cliffs, NJ: Prentice Hall.
- Bornstein MH (Ed.). 1995. Handbook of parenting, Vol. 3: Status and social conditions of parenting. Mahwah, NJ: Lawrence Erlbaum Associates, Inc.
- Bronfenbrenner U. 1979. The ecology of human development. Cambridge, MA: Harvard University Press.
- Buri JR, Louiselle PA, Misukanis TM and Mueller RA. 1988. Effects of parental authoritarianism and authoritativeness on self-esteem. *Personality and Social Psychology Bulletin*, 14(2), 271-282.
- Ford DL and Lerner RM. 1992. Developmental systems theory: An integrative approach. Newbury Park, CA: Sage.
- Forward S. 1989. Toxic parents: Overcoming their hurtful legacy and reclaiming your life. New York: Bantam Books.
- Hill NE. 1995. The relationship between family environment and parenting style: A preliminary study of African American families. *Journal of Black Psychology*, 21(4), 408-423.
- Lamborn SD, Mounts NS, Steinberg L and Dornbusch SM. 1991. Patterns of competence and adjustment among adolescents from authoritative, authoritarian, indulgent, and neglectful families. *Child Development*, 62, 1049-1106.
- Lerner RM, Castellino DR, Terry PA, Villarruel FA and McKinney MH. 1995. A developmental contextual perspective on parenting. In M. H. Bornstein (Ed.), Handbook of parenting: Biology and ecology of parenting, 2, 285-309. Hillsdale, NJ: Erlbaum.
- Noorbala AA, Mohammad K, Bagheri Yazdi SA. 1999. Validation of GHQ - 28 in Iran. *Hakim Research Journal*. 5:101-10.
- Picardi A, Abeni D, Melchi CF, Puddu P, Pasquini P. 2000. Psychiatric morbidity in dermatological outpatients: an issue to be recognized. *The British journal of dermatology*. Nov;143(5):983-91.
- Rohner EC, Chaille C and Rohner RP. 1980. Perceived parental acceptance-rejection and the development of children's locus of control. *The Journal of Psychology*, 104, 83-86.
- Steinberg L, Mounts N, Lamborn S and Dornbusch S. 1991. Authoritative parenting and adolescent adjustment across varied ecological niches. *Journal of Research on Adolescence*, 1, 19-36.
- Tobach E and Schneira TC. 1968. The biopsychology of social behavior of animals. In R.E. Cooke and S. Levin (Eds.), *Biologic basis of paediatric practice* (pp. 68-82). New York: McGraw-Hill.
- Vygotsky LS. 1978. Mind in society. Cambridge, MA: Harvard University Press.
- Wenar C. 1994. Developmental psychopathology: From infancy through adolescence. New York: McGraw-Hill.
- Whitfield CL. 1987. Healing the child within: Discovery and recovery for adult children of dysfunctional families. Deerfield Beach, FL: Health Communications.