

Parenting Styles and Mental Health of Adolescents

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ABSTRACT

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Adolescence is a developmental phase marked with a heightened risk of inception of mental health disorders. The neglect in addressing mental health issues during childhood and adolescence could lead to the development of mental health problems in later life. The perspective with which children perceive their parent's parenting influences the children's mental health. Furthermore, the gender of the parent has its impacts on the shaping of a child's personality under the patriarchal society. The present research attempted to investigate the impact of different parenting styles (paternal) on adolescents' mental health. The study sample comprised 150 adolescents of 14-17 years in age from different schools located in the state of Haryana, India. Parenting Authority Questionnaire and General Health Questionnaire (GHQ-28) were used to assess parenting styles and mental health. The present study's findings suggest that adolescents with a permissive parenting style have poor mental health compared with authoritative and authoritarian parenting styles. The study recommends incorporating healthy practices in parenting styles to prevent mental health issues among adolescents.

1. Introduction

Adolescence is a developmental phase marked with a heightened risk of inception of mental health disorders (Kessler et al., 2007). The neglect in addressing mental health issues, including developmental and intellectual disorders during childhood and adolescence, could lead to the development of mental health problems in later life (Kessler et al., 2007; Kim-Cohen et al., 2003). 10–20% of children and adolescents are influenced by mental health problems globally (Kessler et al., 2007). Suicide, anxiety disorders, depression, conduct disorder, substance use disorder, and hyperkinetic disorder are mental health issues that could be prevented if addressed properly. The World Report on Violence and Health (2002) has characterized abuse and neglect in the early phase of life as prominent causes of emotional adversities and mental health issues. The cause of mental health problems that originate during adulthood is rooted in childhood and adolescence. Therefore, it becomes important to secure children from any mistreatment (Krug et al., 2002).

2. Literature Review

According to Shek (1995), on his research work on Hong Kong adolescents, family factors significantly impact psychosocial adjustment, especially positive mental health symptoms. A Cooperative and secure family atmosphere promotes psychosocial adjustment and mental health among adolescents (Repetti et al., 2002). Parenting has its role in the development of adolescents. Research studies conducted in the past have established the significant role of parenting and parenting styles in shaping an individual's personality. Parenting comprises genetic endowment, parents' beliefs and behaviors influenced by their experience, and indirect effects of parents' relationships with each other and their social environment (Luster & Okagaki, 2006). Parenting style is an archetype formed during

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communication between parents and children; and the way they react to their child's actions (Kaplan et al., 2002). The term parenting style is referred to as behaviors and strategies that parents apply to oversee and socialize with their children (Lightfoot et al., 2009).

Baumrind (1971) classified parenting styles as authoritative, authoritarian, and permissive parenting. Authoritative parents provide an environment of trust, cooperation, open communication, psychological autonomy, and self-dependence (Ballantine, 2001). Authoritarian parenting style is a restrictive punitive style where authoritarian parents expect obedience, are highly demanding and are less responsive (Dornbusch et al., 1987). Permissive parents exert little control over children and the intention is to provide a high level of warmth to the children. Punishment is seldom used in a permissive style and children are generally given an immense amount of liberty to make their own decisions in life (Kang & Moore, 2011).

Researchers conducted in the past suggest that perception of parenting styles has a crucial role in developing anxiety (Furukawa, 1992; Gerlsma et al., 1990; Muris & Merckelbach, 1998). Adolescents with authoritative parents appear to have lesser depressive symptoms than other adolescents and the phenomena sustain over time (Liem et al., 2010). Research studies have documented the less likelihood of depression symptoms among the adolescents upbrought with warm paternal and maternal parenting than adolescents who were harshly disciplined by both parents in case of stressful events (Wagner et al., 1996). The authoritative parenting style comprising of open, coherent, and prudent communication leads to the development of social competence and decreases the possibility of mental health problems and risky behaviors (Baumrind, 1991).

The works of Dusek and Danko (1994) found that dominating and commanding parenting style is concurrent with psychological disturbances during the period of adolescence. Paternal parenting style was found to be linked with psychological adjustment. Though authoritative mothers had an advantage over permissive mothers, which was apparent for all the assessed outcomes, the advantage was not much certain in the case of authoritative fathers and appeared evident only in the case of depression (Milevsky et al., 2007). Whereas Vietnamese adolescents of authoritarian fathers reported greater levels of depression in contrast with adolescents with authoritative fathers (Nguyen, 2008).

Depression and anxiety are more common where both father and mother are perceived as authoritarian (McKinney et al., 2011). Children of authoritarian parents are poor in self-control and emotional regulation than authoritative parents resulting in psychopathology (Williams et al., 2012). A permissive parenting style leads to the development of poor self-concept and mental health (Niaraki & Rahimi, 2013). Chan and Koo (2011) found that authoritarian parenting style is linked with social problems, delinquent acts, and a lower accomplishment rate. Positive and supportive parenting behavior predicts better mental health among adolescents (Singh et al., 2018).

The gender of the parent is reported to influence the perception of parenting style. Society and culture direct the role of mother and father socially to a great extent. In most societies, cultural norms are such that mothers spend more time with children than the fathers, consequent to which they are expected to dedicate more time catering to the emotional and psychological needs of children whereas fathers are expected to be providers and disciplinarians (Ang, 2006; McKinney & Renk, 2008a; Phares et al., 2009). Asian fathers have been described as "the detached disciplinarian" Ang (2006). Indian society is patriarchal, and various factors contributing to this system persist today (Sinclair, 2021; Thomas, 1996). However, fathers have also started spending more time with their children in the past few decades (Gryczkowski et al., 2010).

Although there is no consensus on the theory of parenting and how it shapes children's development, the existing research base indicates that parenting style has a major influence on the child's development (Thergaonkar & Wadkar, 2007). The perspective with which children perceive their parent's parenting influences the children's mental health. Furthermore, the gender of the parent has an impact on the shaping of a child's personality under the patriarchal society. The present research attempted to investigate the impact of different paternal parenting styles on adolescents' mental health. The present study also hypothesizes that there shall be a significant difference in adolescents' mental health with different paternal parenting styles.

3. Methodology

3.1 Sample

The study sample was comprised of 150 adolescents (N=150), which were selected after screening from different schools located in the state of Haryana, India. The sample's age range is 14-17 years (M=16.26, SD= .64). Students of 11 and 12 standards were included in the study. The sample was further classified into three groups based on perceived parenting style (paternal). Group 'A' comprises of participants with authoritative parenting style (n=50), Group 'B' comprises of participants with authoritarian parenting style (n=50), and Group 'C' comprises of participants with permissive parenting style (n=50). The parental Authority Questionnaire (Buri, 1991) was used as a screening tool to identify the perception of paternal parenting style among adolescents.

3.2 Measures

3.2.1 Parenting Authority Questionnaire

Perceived paternal parenting style was measured via the Parental Authority Questionnaire (PAQ; Buri, 1991). The PAQ is 30 items Likert scale developed to assess parenting practices. The retrospective student report measure comprising mother and father assesses paternal and maternal authoritativeness, authoritarianism, and permissiveness. Reliability for the six PAQ scales ranges from .75 to .85 for maternal styles and .74 to .87 for paternal styles (Buri, 1991). The PAQ is designed to measure parental authority, or disciplinary practices, from the child's point of view (adolescents and younger adults). Furthermore, PAQ scores did not appear vulnerable to social desirability response bias.

3.2.2 General Health Questionnaire

GHQ-28 by Goldberg and Williams (1991) was used to assess adolescents' mental health. It is divided into four sub-scales which are: somatic symptoms (items 1-7); anxiety/insomnia (items 8-14); social dysfunction (items 15-21) and severe depression (items 22-28). A higher score on the questionnaire indicates poor mental health. The test possesses sound psychometric properties with split-half reliability of 0.95 and Cronbach alpha ranges from + 0.28 to + 0.93 and the test-retest reliability is .90. It holds good content, constructs, and predictive validity.

3.3 Procedure

The main objective of the present study was to explore the impact of parenting style (paternal) on adolescents' mental health. Purposive random sampling was applied for data collection. All the participants included in the study were selected from the 11 and 12 standard studying in different schools of the state of Haryana, India. The schools were contacted to provide consent for conducting the study in their institutions. After selecting the sample with the help of a parenting authority questionnaire and classifying them into designated groups, the GHQ-28 was administered to participants. The data obtained were analyzed with the help of appropriate statistical tools. Participants were well informed about the purpose of the study and confidentiality was assured.

4. Results and Discussion

The findings obtained from the present study are shown in Tables 1, 2, and 3. The demographics of the sample are shown in Table 1.

Percentage							
		Total	Percentage	P1	P2	P3	
Gender							
	Male	80	53.33%	37.5%	31.25%	31.25%	
	Female	70	46.67%	28.57%	35.71%	35.71%	
	Total	150	100%				
Standard							
	11	76	51.67%	42.1%	25%	32.89%	
	12	74	49.33%	24.32%	41.89%	33.78%	
Note: P			49.33% 2- Authoritarian Pare				

Table 1: Demographics

Table 2: Descriptive Statistics

Variable	Ν	М	SD	Variable	Ν	М	SD	Variable	Ν	М	
P1	50	37.40	3.35	P2	50	38.46	3.32	P3	50	41.30	3.89
MH	50	31.92	14.13	MH	50	23.56	11.87	MH	50	21.02	12.56

Note: P1- Permissive Parenting Style; P2- Authoritarian Parenting Style; P3- Authoritative Parenting Style, MH- Mental Health

	Sum of Squares	df	Mean Square	F	
Between Groups	3252.52	2	1626.26	9.79**	
Within Groups	24414.98	147	166.09		
Total	27667.50	149			
Post hoc Analysis					
I (Condition 1)	J (Condition 2)	Mean difference (I-	Std. Error	Sig.	
a	b	8.36*	2.57	.001	a>b
b	с	10.90**	2.57	.000	a>c
b	с	2.54	2.57	.326	

Table 3: One-way ANOVA Comparison between three	ee parenting styles on mental health (N=150)
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Note: **a**-Permissive parenting; **b**- Authoritarian parenting; **c**- Authoritative parenting

The findings obtained from the present study as shown in Table 3 depict the significant differences in the mental health [F (2,147) = 9.792, p < .01] of the adolescents with different parenting styles. The post hoc analysis revealed statistically significant differences between permissive and authoritarian parenting styles; the adolescents with permissive style have higher mean scores on mental health (M= 31.92, SD= 14.13) in comparison with authoritarian parenting style (M=23.56, SD=11.87), the difference is found to be significant at p < .001.

The post hoc analysis further establishes the significant difference between permissive parenting style (M=31.92, SD =14.13,) and authoritative parenting style (M=21.02, SD=12.56), and the difference is found to be significant at p<.000. Furthermore, the post hoc analysis reveals that adolescents with authoritarian parenting styles have a higher mean score (M=23.56, SD=11.87) than authoritative parenting style (M=21.02, SD=12.56). However, the difference is not statistically significant. The higher score on the scale of mental health is an indicator of poor mental health. Thus, from the findings of the present study it is inferred that among the different parenting styles, adolescents with permissive parenting styles have poor mental health when compared with authoritative and authoritarian parenting styles.

Answering the important question: "Are their differences in the adolescents' mental health raised with different paternal parenting styles". The findings of the present comparative study provide us an understanding of the fact that there exist differences in the mental health of adolescents upbrought with different parenting styles. Moreover, mental health appears to be the best among the adolescents falling under authoritative parenting style followed by authoritarian and permissive parenting style respectively.

Findings depict authoritative parenting style to positively impact mental health compared with the authoritarian and permissive parenting style. The authoritative parenting style has emerged as the best for adolescents' mental health. Findings are in line with the research conducted in the past by Uji et al. (2014) wherein they concluded that the authoritative parenting style of fathers is instrumental in the prevention of risk of development of health issues in the later stage while authoritarian parenting had a detrimental impact on mental health in a later stage. Paternal permissiveness increased symptomatic problems. Furthermore, the present research findings are also supported with the findings of Pyun (2014) wherein lower levels of internalizing problems and inattentive/hyperactive behaviors were reported among adolescents who had healthy paternal relationships. Consistent and engaging behavior of parents acts as a buffer against mental health complications among children and adolescents (Patel et al., 2007).

The present research findings are in contrast with the existing research base which suggests better mental health in a permissive parenting style. In their study, Zahra et al. (2013) observed that permissive parenting style leads to poor mental health, but its effect is comparatively lower than authoritarian parenting style. Niaraki and Rahimi (2013) did not find any differences in mental health between authoritarian and permissive parenting styles. This could be attributed to leniency, non-directedness, and low expectations from permissive fathers, which can have a detrimental impact on adolescents' mental health. Indian fathers are usually authoritarian (Kakar, 1978), and authoritarian parenting styles do not hurt adolescents' mental health, especially in authoritarian cultures (Dwairy, 2004).

5. Conclusion

Thus, from the findings of the present study it is inferred that among the different parenting styles, adolescents with permissive parenting styles have poor mental health when compared with authoritative and authoritarian parenting styles. The findings also suggest that the mental health of adolescents of authoritarian parents is better than adolescents of permissive parents. This study has strengths and limitations. The reported findings are preliminary and further open the way to cross-sectional and experimental studies in the area. The relationship between parents and children is bilateral but in the present study, families were classified into one of three typologies (authoritative, authoritarian, and permissive) based on ratings of the children and did not involve the parents' responses making the present study unilateral.

The present findings mark the attention of parents, teachers, health, and mental health workers that different parenting styles leave a different impact on adolescents' mental health. Adolescence being the tender age, requires more attention and warmth, the scars left on the mind of the adolescents get reflected at a later age. A healthy parenting style acts as a protective factor against mental health issues. The study suggests incorporating healthy practices in parenting styles so that mental health problems among adolescents are prevented.

Ethical clearance - Ethical clearance was obtained pre-hand.

Conflicts of interests- No conflicts of interests amongst the authors

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