

Parenting Styles' Effects on Depressive Symptoms' Development

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ABSTRACT

As the general population of adolescents keeps growing in China, psychological symptoms and mental disorders such as depression among this cohort is likely to become a larger societal level issue in the foreseeable future as few studies demonstrated in Beijing and Guangdong,[1]which is alarming and stresses the importance to improve adolescents' mental health well-being. The current study focused on investigating the interaction between adolescents' perceived house hold parenting styles and their own mental health wellbeing. Questionnaires were distributed to students in China asking how do they perceive their parents' parenting styles and BDI was used to measure participants' depressive symptoms. The results indicated that participants who perceived their household parenting styles as authoritative are more likely to have higher BDI ratings which mean more depressive symptoms. An interaction between perceived parenting styles and gender was also found, and female participants were more susceptible to perceived authoritative parenting styles than male participants did.

Keywords: *Parenting Style, Depression, Subjective Interpretation, Adolescent*

1. INTRODUCTION

There are a variety of factors that are correlated with onset of depression or depressive symptoms. Parenting styles is among them. Parenting styles have been traditionally placed into four categories: authoritarian, authoritative, indulgent, and neglect .[2] For an authoritarian parenting style, parents need to be rated high in parental control (PC) and low in parental supportiveness (PS); An authoritative parenting style requires ratings high in both PC and PS; Indulgent parenting style indicates that parents are high in PS and low in PC; Whereas neglect parenting style sees parents who are low in both PC and PS ratings . [2]Both indulgent and neglect parenting styles will not be included in the current study due to their small and unrepresentative sample size. This strategy has been used in similar studies .[3] Past studies have rendered the correlations between each parenting style and prevalence of depressive symptoms. A range of studies have provided evidence to support that parent who demonstrates less support and affection lead to higher prevalence of internalizing disorders such as depression in adolescent offspring .[4] Parents who are authoritarian emphasize more on values such as obedience and restrictiveness whereas at the same time, they tend to be

less nurturing and supportive than parents who are categorized as authoritative. On the other hand, authoritative parenting style seems to yield more optimistic results in adolescents. It was reported that adolescents who have authoritative parents experience more positive moods at the time of the study being done .[4] These results could be concluded as having more "parental involvement" (high rating in parental support) in life. [5]

As previous literature has heavily based their studies in western countries, emerging studies in this field started to investigate parenting styles' influences on internalizing disorders in eastern countries such as China. Profoundly, similar results were shown in studies conducted in China. High parental warmth is associated with less depression in children and adolescents, while traits such as parental rejection and punishment are positively associated with increased prevalence of depression. Parental control is positively associated with raised prevalence of depression only in authoritarian parenting style. Authoritative parenting style, on the other hand, is generally associated with less adolescent's depression[1].

Finding similarities between studies conducted in both western and eastern cultures is crucial, as it is

rational for the current study to inherit Baumrind's parenting style categorization strategy and measuring parenting styles using parental control and parental support as two dimensions. With a solid foundation laid, the current study would be more confident in investigating and filling research gaps left by studies done both inside and outside of China. Generally, studies that emphasized on the association between parenting styles and prevalence of depression in only involved participations and subjective interpretations from parents. Less than rare studies had taken adolescent's subjective interpretations and perspectives into account when evaluating parenting styles and investigate how does subjective perceptions of parenting styles of adolescents could affect their own mental health well-being. [5][6][7][4] Although, one study did find evidence to support the hypothesis that parents and adolescents' perceptions of parenting styles differ. It was demonstrated that only below 30% of adolescents agreed with their parents on the matter of defining their familial parenting styles. Furthermore, a few studies in the past have emphasized on the essence and characteristics of parenting styles, and these studies proposed that parenting styles should be treated as a bidirectional or reciprocal processes instead of a characteristic of parents in parent-adolescent interaction; [3] Thus, taking adolescents' perceptions into consideration is key. [8][9] Such discussions putting in light the importance for the current study to further investigate relationship between adolescent's subjective perception and interpretation of parenting styles and their mental health well-being.

Beside parenting styles, the effect of adolescents' gender will also be considered in the current study. In the majority of studies concerning the interaction between parenting style and mental health wellbeing, gender was usually not taken into consideration and only limited findings were presented. Kerr and Stattin [9] found a bidirectional interaction that adolescents' delinquency and maladjustment behaviors tends to shift boys' parents' parenting style toward the authoritarian side but not girls'. A study done in Japan demonstrated results indicating that authoritarian parenting style predicted clinically significant externalizing for both boys and girls, but there was no gender difference found. [10] The current study is interested and eager to further investigate how parenting styles and gender interact with each other to impact mental health wellbeing in adolescents.

The main research question of the current study is how adolescents' subjective evaluations of parents' parenting styles influence and contribute to their own mental health well-being and prevalence of depression. Secondly, the study is interested in investigating if gender interact with perceived parenting styles to influence the development of depressive symptoms in adolescents. Thus, the first hypothesis is that adolescents who evaluate their parents as being authoritative (rated higher in parental warmth) would demonstrate fewer depressive

symptoms or lower probability of being diagnosed with depression than adolescents who have authoritarian parents. The second hypothesis is that gender has an effect on the development of depressive symptoms which reflects on the BDI ratings of subjects, and interpreted household parenting styles interact with gender to further influence adolescents' mental health wellbeing.

2. METHOD SAMPLE

The preregistered sample of the current study was 160 participants. The participants were recruited randomly from high schools in Kunming, Yunnan province. Surveys and questionnaires were distributed using online survey form. 3 questionnaire forms were removed from the data base due to invalid input. Another 23 forms were removed because the subjects' age did not meet the requirement. The final sample size was 134 (Male:47, Female:87) with aging from 15 to 18 years old ($M=16.2$, $SD=1.2$).

3. MEASUREMENTS

Due to the nature of the study, both measurements of depression or depressive symptoms and parenting styles are administrated to adolescents only. General background information survey was distributed to collect personal information from participants. The Parental Authority Questionnaire (PAQ) was used to assess adolescents' perception of their parents' parenting styles. [11] [3] The PAQ originally had 30 items, but due to the nature of the study in which permissive parenting style was omitted for statistical analysis, only 20 items were utilized. The results yield sum scores to categorize parenting style of each family. Beck Depression Inventory (BDI) was used to administrate adolescents' depression or depressive symptoms prevalence as it is effective among age 13 and above. 21 items in total are included and distributed in multiple choice format. Participants' manifestations and severity of depression or depressive symptoms are tested.

R studio was used to examine the reliability and validity of the two measurements. The BDI is reliable, $\alpha = .87$, and the authoritative parenting under PAQ is also reliable, $\alpha = .88$. The authoritarian parenting under PAQ is less but fairly reliable, $\alpha = .78$. The confirmatory factor analysis (CFA) analyses were evaluated as the evidence of construct validity. The results provided moderately good fit for both of the PAQ, $\chi^2 = 391.96$, $p < .001$, CFI = 0.79, TLI = 0.76, EMSEA = 0.096, and DBI, $\chi^2 = 306.89$, $p < .001$, CFI = 0.83, TLI = 0.81, EMSEA = 0.075.

4. RESULTS

A two-way analysis of variance yielded a main effect for the interpreted household parenting style of subjects with a large effect size, $F(1, 130) = 16.10$, $p < 0.05$, $\eta^2 =$

0.16, such that the average BDI ratings of subjects from authoritarian parenting style households ($M = 34, SD = 11.60$) is significantly higher than subjects who interpreted household parenting styles as authoritative ($M = 28.20, SD = 5.1$). The main effect of gender was found to be significant as well, however, the effect size is medium $F(1,130) = 5.5, p < 0.05, \eta^2 = 0.04$, and the results demonstrated that females have a higher average BDI rating ($M = 30.40, SD = 8.47$) than male ($M = 30.50, SD = 8.46$). A significant effect was also found for the interaction between subjects' gender and interpreted household parenting style with a medium effect size, $F(1, 130) = 5.60, p < 0.05, \eta^2 = 0.04$, indicating that interpreted household parenting style and gender interact

and make impacts to the development of depressive symptoms in adolescents aged between 15 and 18. As demonstrated in figure 1, both male and female subjects who perceived their household parenting style as authoritarian were rated higher in BDI than their counterparts who have perceived authoritative parents. For female subjects especially, perceived authoritarian parenting style created the largest impact and skyrocketed the average BDI ratings, and such effect was not seen for male subjects. Thus, female adolescents who interpret their household parenting style to be authoritarian are most susceptible to depression/depressive symptoms.

Interaction Between Gender and Perceived Parenting Style

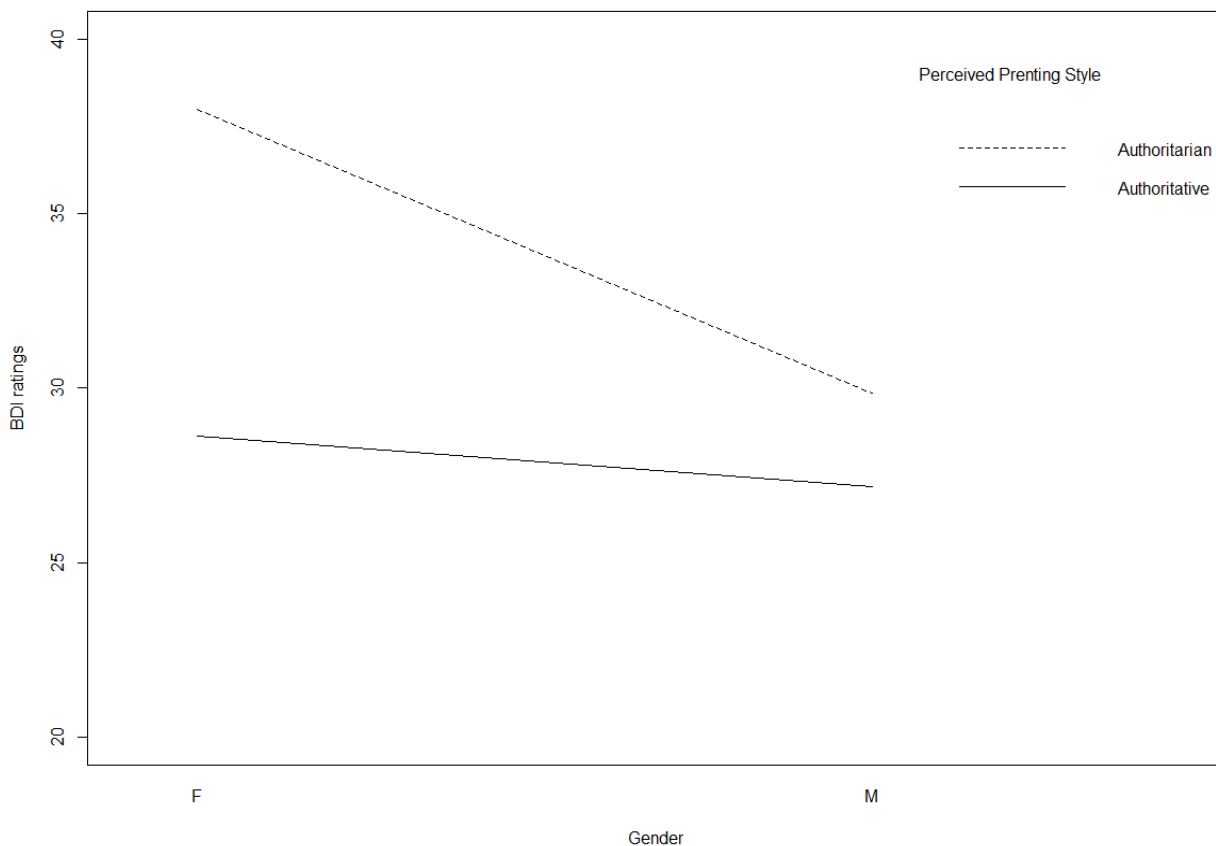


Figure1. Interaction Between Gender and Perceived Parenting Style

5. DISCUSSION

The purpose of the current study was to find out if adolescents' subjective interpretation of their parents' parenting styles would influence their mental health wellbeing and predict development of depressive symptoms. Also, the study was interested to investigate how would gender act as a factor during the process.

The results of this study provided supporting evidence to the two hypothesis and indicated that perceived authoritative parenting style predict fewer

depressive symptoms than perceived authoritarian parenting style in adolescents in general. Moreover, the interaction between perceived parenting style and gender exists, and such interaction pointed out that female adolescents who live under perceived authoritarian parenting style are more susceptible to high BDI ratings and depression/depressive symptoms. Male subjects on the other hand, demonstrated lower BDI ratings for both perceived authoritative and authoritarian parenting styles.

The findings of the current study are consistent with previous studies' that authoritative parenting styles do predict better mental health wellbeing of adolescents than authoritarian parenting styles.[1] Furthermore, as indicated by previous literatures, investigating and understand adolescents' subjective interpretation of household parenting styles are indeed crucial as it does make a difference. [5][6][7][1]

Based on the importance of investigating adolescents' subjective understanding of parenting styles, the current study was able to find evidence to support the hypothesis that when adolescents evaluate household parenting styles as being authoritative, they demonstrate fewer depressive symptoms and lower BDI ratings. The results strongly imply that adolescents aged between 15 to 18 have well developed knowledge of their parents' parenting behaviors, and they could evaluate such behaviors clearly. Such evaluations or interpretations in turn contribute to their own mental health development. Furthermore, gender acts as a factor to interact with such subjective interpretation to influence subjects' development of depressive symptoms.

Besides finding evidence supporting the hypotheses, there are certain limitations to the study. A first limitation concerns the unbalanced number of male and female subjects. There are more female subjects to male subjects in the sample, and it could be improved to seek a more scrupulous prediction of the effect of gender and its interaction with parenting styles. Secondly, the questionnaires were administrated online which was cost and time efficient. However, such administration process caused several invalid data and potential perfunctory questionnaire-filling behavior. In order for future study to improve the data collection process, gift card could be used as rewards to the subjects, and a face-to-face administration process could be utilized to improve the overall quality.

Despite the limitations, the results suggested several theoretical and practical implications. Firstly, the findings imply that adolescents' subjective interpretation of household parenting styles might or might not be identical to their parents' interpretations, but adolescents' interpretation do predict their own mental health wellbeing. If this gap between adolescents' and parents' interpretations do exist, it is crucial to further understand why such differences exist and how would such differences make impacts on adolescents' mental health wellbeing and parents' parenting behaviors. Secondly, if adolescents' subjective understanding of parenting styles is so important that it makes outstanding impact to their own mental health development, their interpretations should be taken more seriously by researchers and parents when discussing parenting styles.

Findings of the current study could help with potential design and development of intervention programs that aim to improve mental health wellbeing of

adolescents. Evidence has been seen in the current study to support that adolescents' perception and interpretation should be taken seriously. The interaction between parenting styles and adolescents' perception should be considered as bidirectional or even multidirectional, and such way of evaluating could be used to help intervention programs to produce more prominent results. For educators, more evidence has been presented in the current study to support that authoritative is better at preventing potential mental health issues such as depression. Parenting training programs and projects could focus on enhancing authoritative parenting and its correlated qualities such as parental responsiveness and parental supportiveness to promote efficient and beneficial parental behaviors.

In terms of future research, it would be helpful to consider the implications of the current study and extend current findings by examining the degree of difference between parents' and adolescents' interpretation of parenting style (household or parent by parent). In addition, it is also crucial to understand how such difference would make impacts to mental health development and parenting behaviors. Furthermore, other factors beside the gender should be taken into consideration as well. Factors such as socio-economic status of families, parents' academic expectations of children, and parents' education level etc. could possibly be variables that contribute to such interaction with subjective interpretation of parenting styles.

6. CONCLUSION

The current study was proposed based on research done regarding adolescents' mental health wellbeing in China. A gap was found, and it was crucial to stress on looking for more detailed empirical evidence to identify various underlying mechanisms that lead to depression in adolescents. Thus, this study focused on looking at adolescents' subjective interpretation of their household parenting styles and tried to examine what are the influences of such interpretation. Based on previous studies, authoritative parenting styles predicted better mental health wellbeing outcomes in adolescents than authoritarian parenting style. However, such studies were mostly done by taking perceptions from parental side, and used parental indicators to measure household parenting style. Due to the idea that parenting is actually a bidirectional interaction instead of a unidirectional one, it is necessary to take the adolescents' side of story into consideration. It was hypothesized that adolescents who perceive their household parenting styles as being authoritative would have less mental health issues and less depressive symptoms. The results were consistent with such hypothesis. Furthermore, an interaction between perceived parenting styles and gender exists. Female participants of the study were found to be more susceptible to perceived authoritarian parenting style as

they demonstrated higher BDI ratings when compared to male participants. Male participants on the other hand, demonstrated lower BDI ratings under both perceived parenting styles. The results of the current study provide significant implications for both theoretical research and field practices. Firstly, it is important to realize the fact that parents and adolescents might perceive parenting styles differently, and such differences could create discord within families and lead to mental health related issues. Future research regarding parenting styles, mental health wellbeing, and younger subjects should take such factor into consideration. Secondly, family coaches and intervention programs should not overlook the fact that parenting is actually a bidirectional process in which both parents and adolescents' interpretation of situations are important. It is crucial for practical workers to consider both sides to work more effectively.

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