CHAPTER 1
INTRODUCTION TO PERCEIVED PARENTING IN RELATION TO MENTAL HEALTH AND SOCIAL MATURITY

Mental and behavioral problems are increasingly a part of the health problems the world over. The burden of illness resulting from psychiatric and behavioral disorders is enormous. However the issue remains grossly under-represented by conventional public health statistics, which focus on mortality rather than the morbidity or dysfunction. Mental disorders account for a large proportion of the disease burden in young people in all societies. Most mental disorders begin during youth (12–24 years of age), although they are often first detected later in life. Poor mental health is strongly related to other health and development concerns in young people; notably lower educational achievements, substance abuse, violence, and poor reproductive and sexual health (Kumar, Narender et al. 2005). The stage in life that poses tremendous risk to an individual’s complete self integration is the adolescent phase. Adolescence is said to be the most stressful periods, rightly termed by Erik Erickson as the period of “Identity v/s Role Confusion”. The image of adolescence is a time of storm and stress, intense moodiness, and, preoccupation with the self permeates both professional and lay perspectives on this developmental period.

Clearly adolescence is a time of great change on many levels. Adolescence comes from the Latin ‘adolescere’ which means to grow into adulthood. This development phase is marked by the onset of puberty, emergence of more advanced cognitive abilities and the transition into new roles in society (Hill, John 1983). Probably most dramatic are the biological changes associated with puberty. These changes include dramatic shifts in the shape of the body, increases in hormones, and
changes in brain architecture. These biological shifts are directly linked to changes in sexual interest, cognitive capacities, and physical capacities. There are also major social changes associated with the school-linked transitions and with changes in the roles adolescents are expected to play by all those around them. Finally, there are major psychological changes linked to increasing social and cognitive maturity. In fact, very few developmental periods are characterized by so many changes at so many different levels. The adolescent begins to develop his individual identity. He questions existing rules, seeks reason and desires to find a deeper meaning and purpose to life. It is a critical phase and one deviant turn can cause irreparable damage.

Adolescence is divided into three periods: Early Adolescence (11-14yrs), Middle Adolescence (15-17yrs), and Late Adolescence (18-20 yrs). These dimensions are arbitrary; growth and development occur on a continuum and vary from person to person. The early years are marked by callousness and egocentricity. While the intensity and exclusivity of parental attachments begin to change yet the early adolescent is dependent on his parent and relies to a greater degree on parental value systems and beliefs (Blos, 1967). In the process of distancing from the dependency and control of early childhood, adolescents use a variety of defenses and character traits. These defenses may take the form of displacements or substitutions and may be played out through imitation of parental interactions with their own friends; or they may show up in the form of ego disturbances such as acting out, negativism, exaggerated moodiness or episodic acts of aggression. By middle adolescence, the teenagers have had enough experience with reality to begin dispensing with their ‘imaginary audience’. Their testing of this fictional construct allows them to replace it with a more realistic framework. As late adolescence approaches the adolescent
relationships and mental life are infused with sensitivity and altruism. Adolescents are now capable of greater complexity, self criticism and differential feelings, motives and form of self expression. Besides disengaging the self from parental egos the adolescents also face the task of reorganizing the superego. This process can be difficult depending on the success of early ego organization and parental support for children’s individuation and separation. Thus altered relationships with parents can be seen as springing in part from children’s growing cognitive capacities to make moral judgments outside of their parents’ moral milieu. With rapid change come a heightened potential for both positive and negative outcomes and a call for immediate therapeutic interventions: preventive as well as remedial in nature. The effectiveness of some interventions for some mental disorders and mental health issues in this age-group have been established, although more research is urgently needed to improve the range of affordable and feasible interventions, since most mental-health needs in young people are unmet, even in high-income countries (Patel, Vikram; Fisher, Alan J., Hetrick, Sarah and McGorry, Patrick, 2007).

1.1 Goan Scenario: Status and Statistics from the sampled region

The current doctoral research is based in Goa and hence it is imperative to comprehend the state of affairs within the same region. In the state of Goa, Sangath Centre for Child Welfare and Family Guidance, an NGO, under the leadership of Dr. Vikram Patel et.al (2008), conducted the epidemiological study to describe the current prevalence of mental disorders and its correlates among 2,000 plus adolescents aged between 12 and 16 years. For the same, a population-based survey of all eligible adolescents from six urban wards and four rural communities was randomly selected to diagnose current emotional and behavioral disorders. All adolescents were also interviewed on socio-economic factors, education, neighborhood, parental relations,
Perceived Parenting in relation to Mental Health and Social Maturity

peer and sexual relationships, violence and substance abuse. Out of 2684 eligible adolescents, 2048 completed the study. The current prevalence of any DSM–IV diagnosis was 1.81%; CI 1.27–2.48. The most common diagnoses were anxiety disorders (1.0%), depressive disorder (0.5%), behavioral disorder (0.4%) and attention-deficit hyperactivity disorder (0.2%). Results have shown a severe impact of stress and depression on Goan women. In community settings, six per cent of women in the reproductive age group - about 20,000 women state-wide - suffer from depression. Adolescents from urban areas and girls who faced gender discrimination had higher prevalence.

An independent association of mental disorders was also found with an outgoing ‘non-traditional’ lifestyle (frequent partying, going to the cinema, shopping for fun and having a boyfriend or girlfriend), difficulties with studies, lack of safety in the neighborhood, a history of physical or verbal abuse and tobacco use. Having one’s family as the primary source of social support was associated with lower prevalence of mental disorders. It is possible that the role transition from childhood, which in a Goan as well as Indian cultural milieu may extend well into adolescence (exemplified, for example, by high levels of parental authority in decision making) to adulthood, often heralded by marriage, is frequently sudden and without the gradual development of autonomy that is seen in some other cultures. While the persistence of a ‘child’ role into adolescence may be a protective factor in early adolescence, the sudden role transition may be a key factor in explaining the increased vulnerabilities for young adults. The role of the family in promoting mental health of adolescents is clearly demonstrated by the independent protective effect of family support. Hence, it can be said, the family is an important part of the environment and plays a central role in the outcomes of children (Sameroff, 1993); academic growth, psychological and mental
health and well-being and social maturity. The families in general and parents in particular, have often been deemed to be the most important support system available to the child. The strongest factor in moulding a child’s personality is his relationship with his parents. If his parents love him with a generous, even-flowing, affection and if they respect and treat him as a person who has both rights and responsibilities, then his chances of developing normally are well and good. But if they diverge from this, the child’s development may be distorted. Adolescents have a poor reputation of getting along poorly with their families. The teenage boy or girl may be faced with serious problems of adjustment when there is a difference of opinions, ideals and attitudes with their parents. Conflicts may arise between the adolescent and the parents; and can be difficult to resolve if neither is willing nor able to compromise. It takes all the tact and understanding of parents to handle their teenage son or daughter (Coleman, 1974). Baumrind, Diana (1991), through extensive research concluded that parents use certain techniques to raise their children. These include authoritarian, authoritative, neglectful and indulgent techniques either in pure form or in combination. The use of any and each of these strategies has a defined characteristic impact upon the child’s development. The use of the techniques influences the adolescent’s self concept, and will impact his esteem, academics, personality crystallization, mental health and the way he relates to his current and future interpersonal relationships. The effective resolution of this stage leads to improved familial interactions, acquisitions of healthy coping styles, mental fitness and adequate social maturity. Self confidence and personal achievements at academic and career fronts follow. It is hence imperative to assess the dynamics of parental effects on adolescents and the current study *Perceived Parenting in relation to Mental Health and Social Maturity among Adolescents* intends to analyze the same.
1.2 Parenting: Roles and Challenges

Parents create a most congenial, happy, democratic, lucid and warm atmosphere (Erickson, 1974) where a child blossoms his own hidden potentialities and also develops social interactional skills (Bharadwaj, 1995). Parent-child relationships do not occur in a vacuum and the context in which the relationships develop are likely to affect the nature of the relationships. Such factors as birth order, financial and emotional stress, and social support, gender of the parent, infant temperament, and parent personality may influence qualities of the parent-child relationships and the impact of that relationship on the child's development. Parental personality and psychological functioning have been found to influence parenting practices, beliefs, and expectations (e.g., Cummings & Davies, 1994; Vondra & Belsky, 1993). Henry (1961) and Ojha (1988) found that conservative parents are authoritarian in their rearing of children than those who are less conservative and parents who had radical opinions were more permissive in their child rearing practices. Rothbart & Maccoby (1966) found complex interaction between sex of the parent and sex of the child. Mothers tend to be more permissive towards their sons than towards daughters whereas fathers tend to be more attentive and permissive towards their daughters than their sons. Furthermore, research from a developmental perspective considers parenting to be an extension of internal working models of attachment shaped by the way parents were treated by their own caregivers as children (Bowlby, 1973). The availability of emotional and instrumental support to parents has been widely studied, with the findings consistently pointing to a positive relationship between social support and adaptive parenting (Burchinal, Foller, & Bryant, 1996).

Parenting as a style of child upbringing refers to a privilege or responsibility of mother and father together or independently to prepare the child for society and
Perceived Parenting in relation to Mental Health and Social Maturity

culture (Veenes 1973a) which provides ample opportunity to a child to find roots, continuity and a sense of belonging (Sirohi and Chauhan, 1991) and also serves as an effective agent of socialization. Parenting has long been recognized as making an important contribution to child development. Parenting is a complex activity that includes many specific behaviours that work individually and together to influence the developing child. The two distinctive roles of parents include both mothering and fathering. A child bestows on both mother and father together and independently, the responsibility of upbringing him or her. Hence mothering, fathering and parenting as a whole are important. Researchers are now more interested in having separate analyses for maternal and paternal parenting style; rather than just parenting style which could be referred to just mother or father style of parenting in a general categorization without taking into consideration of the separate unique contribution of paternal as well as maternal parenting styles (Shek, Lee, & Chan, 1998; Milevsky, Schlechter, Netter, & Keehn, 2006). It is important to consider the separate analyses of maternal as well as paternal parenting styles (Milevsky, Schlechter, Netter, & Keehn, 2006).

The role of father or the style of upbringing stands as a bridge by which the child comes into the contact of outside world (Meerto, 1968) encourages curiosity and a will to face the challenges of the world and appears as a symbol of assertive, independent, emotional and psychological support in the realization of truth. To love children is predominantly a feature of fathering in non-deviant families and relates to acceptance, satisfaction and differentiating experiences in the children that can also be deemed as a conditional one, because it is acquired or earned by the child’s performance of duty, obedience and fulfillment of father’s expectations. Inadequate fathering is usually understood to be a prime source of maladjustment; truancy, guilt, self devaluation and dependency. On the other hand the role of the mother or the style
of upbringing is largely associated with congenial development of personality, because the child first comes in contact with the mother and always depends on her to satisfy his/her basic needs. The role of mother shows better control over the children and stands for friendship with less punishment and dominance, symbol of emotional support, interpersonal sensitivity and helps and plays an important role in making a person more productive and imaginative. Patterns of inadequate maternal behavior seem to be responsible for the problem of children’s behavior; and chemical dependence and tend to inhibit the exploration of child’s personality in the environment.

Parents of this century are in a situation that the previous generation had never experienced. They have to redefine the concept of ‘parenting’ or ‘parenthood’. Globalization, urbanization, migration, technological advances, media, exposure to western style of living have brought within their wake social forces that have transformed family life patterns and child rearing practices into a phenomenon which calls for increasing parental education that will help parents to meet the new challenges of the changing society. An increasing focus on nuclear family structure, maternal employment, and focus on maintaining a career competes with the needs of children. Parents are aware of the importance of the formative years of childhood but most often they are traditional and not very innovative when interacting or dealing with their children. Some parents are pessimistic about family life, aware of the limitations but not sufficiently aware of the possibilities. Decisions about parenting may be purely personal. Parenting is not automatic or instinctive rather it is knowledge, experience and skills that are learned over time. It is not an easy task but involves a total, day-in day-out responsibility that is unrelenting and that cannot be
ignored or avoided. Thus, the role of parents in creating a happy home is indeed a challenging one.

1.2.1 Parenting: Styles, Consequences and Perceived Parenting

The construct of parenting style is used to capture normal variations in parents’ attempts to control and socialize their children (Baumrind, 1991). Two points are critical in understanding this definition. First, parenting style is meant to describe *normal* variations in parenting. In other words, the parenting style typology Baumrind developed should not be understood to include deviant parenting, such as might be observed in abusive or neglectful homes. Second, Baumrind assumes that normal parenting revolves around issues of *control*. Although parents may differ in how they try to control or socialize their children and the extent to which they do so, it is assumed that the primary role of all parents is to influence, teach, and control their children. The four features of parenting that stand out include:

- Parents differed in their warmth, or nurturance towards offspring.
- They varied in their strategies to control their child’s actions through explanations, persuasion and /punishment.
- Parents differed in the quality of communication with their offspring.
- Parents varied in their maturity demands, i.e., in their expectations for age appropriate conduct.

On the basis of these, Baumrind delineated the three basic patterns of parenting, *Authoritative, Authoritarian and Permissive*, each style having its own features, which are next presented in table 1.2.1:
A brief descriptive overview of the three basic parental behaviors and attitudes that characterize each parenting style is summarized as under:

**Authoritarian Parenting** shapes, controls, and evaluates the behavior of children in accordance with a set of standard of conduct, usually an absolute standard, theologically motivated and formulated by a higher authority. Rules are clear and unbending. Parents are demanding, but they place such a high value on conformity that they are unresponsive. Misbehavior is strictly punished. They do not encourage verbal give and take and believe that the child should accept their word for what is right. The parents value obedience as a virtue and favor punitive forceful measures to curb self-will. This style is clearly biased in favor of parents’ needs (Parke & Buriel, 1998); children’s self-expression and independence are suppressed.

Authoritarian parenting style mismatches a rapidly changing society that values choice and innovation. Baumrind (1978) suggested that authoritarian parents are neither warm nor responsive to their children. These parents are strict, expect obedience, and assert power when their children misbehave. When socializing with their children, authoritarian parents express their maturity demands and expectations through rules and orders, and do not communicate to their children the rationale behind these rules. These parents score high on measures of maturity demands and
control but low on measures of responsiveness, warmth, and bidirectional communication (Maccoby and Martin, 1983). With regards to authoritarian parenting, children and adolescents of authoritarian parents were anxious, withdrawn and unhappy. When interacting with peers, they tended to react with hostility when frustrated (Baumrind, 1967). Boys, especially, were high in anger and defiance. Girls were dependent and lacking in exploration, and they retreated from challenging tasks (Baumrind, 1971). Children with authoritarian parents typically have lower grades in school, have lower self-esteem, and are less skilled socially (Hinshaw, et al., 1997; Parke & Buriel, 1998). Jones, Rickel, and Smith (1980) found a correlation between high parental restrictiveness, characteristic of an authoritarian parenting style, and the use of less effective social problem-solving strategies in children. So also, authoritarian parenting has been negatively associated with academic performance and teacher reports of child adjustment at school and aggressive behaviour (Dornbusch, Ritter, Leiderman, Roberts, & Fraleigh, 1987; Shumow, Vandell, & Posner, 1998).

**Permissive Parenting** displays acceptant and affirmative manner towards the child’s impulses, desires and actions. Parents are nurturing and accepting and allow the child to regulate his own activities, avoid the exercise of control and give no encouragement to obey externally defined standards. Misbehavior is ignored. Without clear limits, children get confused, feel insecure and can make poor choices. Baumrind (1978) suggested that permissive parents are moderate in their responsiveness (i.e., some parents are high and some are low) toward their children’s needs. These parents, however, are excessively lax in their expectations for their children’s level of maturity and their tolerance of misbehavior. When socializing their children, permissive parents are usually dismissive and unconcerned. These parents
score moderately high on measures of responsiveness and low on measures of
maturity demands and control (Maccoby and Martin, 1983). On the other hand
children of permissive parents were very immature, had difficulty controlling their
impulses and were disobedient and rebellious when asked to do something that
conflicted with momentary desires (Baumrind, 1967). They were also overly
demanding and dependent on adults, and showed less persistence on tasks than
children of parents who exerted more control. The link between permissive parenting
and dependent, non achieving behavior was especially strong for boys (Baumrind,
1971). Baumrind (1978) observed that parenting that lacks either parental control, in
the form of monitoring or consistency in discipline, or parental warmth is associated
with greater child behavior problems at various developmental stages. In adolescence,
parental indulgence continues to be related to poor self-control. Permissively reared
teenagers are less involvement in school learning and use drug more frequently than
do teenagers whose parents communicate clear standards for behavior (Baumrind,

**Authoritative Parenting** establishes clear-cut basic guidelines for children
and is based on the democratic concepts of equality and trust. They express warmth
and affection, make reasonable demands for maturity, clarify issues, give explanation
for limits, encourage verbal give and take and participation in family decision making,
and value both autonomous self-will and disciplined conformity. They recognize the
child’s interests and rights. Learning to take responsibility is a high priority.
Misbehavior is handled appropriately. Authoritative parenting is the best for a fast
growing and changing society where choice is abundant and there is no longer one
‘right’ way. Children learn to accept responsibility, cope with change, and make better
choices. In sum, authoritative child rearing is a rational democratic approach that
recognizes and respects the rights of both parents and children. Maccoby & Martin
(1983) have identified the defining interactions as those that are high in reciprocity
and bidirectional communication. Baumrind (1978) suggested that authoritative
parents are warm and responsive, providing their children with affection and support
in their explorations and pursuit of interests. These parents have high maturity
demands (e.g., expectations for achievement) for their children but foster these
maturity demands through bidirectional communication, induction (i.e., explanations
of their behavior), and encouragement of independence. Authoritative parents score
high on measures of warmth and responsiveness and high on measures of control and
maturity demands (Maccoby and Martin, 1983). Baumrind (1991) and Darling and
Steinberg (1993) have defined parental authoritativeness as a complex amalgam of
actions and attitudes that give priority to the child’s needs and abilities while at the
same time implying age appropriate maturity demands. Research based on parent
interviews, child reports, and parent observations consistently found that children and
adolescents of authoritative parents were lively and happy in mood, self-confident in
their mastery of new tasks, and self-controlled in their ability to resist engaging in
disruptive acts (Baumrind, 1967). These children also displayed less traditional
gender-roles behavior. Girls scored particularly high in independence and desire to
master new tasks and boys in friendliness and cooperativeness (Baumrind & Black,
1967). The authoritative parenting style is correlated positively with positive child
outcomes such as social and cognitive functioning (Baumrind,1989, 1993), self
esteem (Carlson, Uppal & Prossner, 2000), social adjustment and social competence
(Fagan 2000). Also, evidence confirms a positive association between authoritative
parenting and emotional and social skills during the preschool years (Denham,
Remwick, & Holt, 1991). Authoritative parenting is found to relate to various
measures of adaptive child psychosocial adjustment, including academic competence, high self-esteem, positive peer relations, fewer child behavior problems (Baumrind, 1978; Brody & Flor, 1998; Patterson, Reid, & Dishion, 1992) as well as self confidence (Conger et al., 1992).

Furthermore, positive parenting strategies of authoritative parenting have been found to be particularly important for children in families facing adverse circumstances or stresses, such as financial hardship, parental divorce, or parental illness. Authoritative parenting style tends to result in children who are happy, capable and successful (Maccoby, 1992). An authoritative home environment has been cited as one of the characteristics in the profile of the resilient child (Barocas, Seifer, & Sameroff, 1985). More recently, adolescents who described their parents as authoritative scored highest on measures of psychosocial competence and maturity and lowest on measures of psychological and behavioral dysfunction (Lamborn et al., 1991; Mantzicopoulos & Oh-Hwang, 1998). They were less likely to be anxious or depressed and scored higher on measures of self-reliance (Radziszewska, Richardson, Dent & Flay, 1996; Steinberg, Mounts, Lamborn,&Dornbusch, 1991). Compared to parents using other childrearing models, authoritative parents were also more successful in protecting their adolescents from drug use and delinquent activities as well as facilitating school involvement and academic performance (Baumrind, 1991; Lamborn et al., 1991; Steinberg et al., 1991; Steinberg et al., 1992) and classroom adjustment as well (Kauffman et al.,2000). In addition, the authoritative style is also correlated with low rates of child psychopathology while authoritarian and permissive styles have been shown to be associated with increased rates of child psychopathology.
It is thus seen that authoritarian parenting or such a perception by adolescents, provides a protective environment for the adolescent to grow and resolve into an individual of integrated identity status, adequately mentally healthy and socially mature.

Parenting style captures two important elements of parenting: parental responsiveness and parental demandingness (Maccoby & Martin, 1983). Parental responsiveness also referred to as parental warmth or supportiveness refers to “the extent to which parents intentionally foster individuality, self-regulation and self-assertion by being attuned, supportive, and acquiescent to children’s special needs and demands”. Parental demandingness also referred to as behavioral control refers to “claims parents make on children to become integrated into the family whole, by their maturity demands, supervision, disciplinary efforts and willingness to confront the child who disobeys”. According to Broderick and Blewitt (2003) responsiveness dimension is also called warmth. Warmth implies being involved and interested in the child’s activities, listening to the child and being supportive and demandingness refers to the amount of control a parent imposes on a child (e.g expectations for behavior), the implementation of standards and rules and the degree to which a parent enforces the standards and rules. Another important component of demandingness is autonomy. Autonomy granting is described as allowing the child autonomy and individual expression within the family (Steinberg et al., 1994).

Each parenting style is more than and different from the sum of its parts (Baumrind, 1991). In addition to differing on these two dimensions, demandingness and responsiveness, the parenting styles also differ in the extent to which they are characterized by a third dimension: psychological control. Psychological control “refers to control attempts that intrude into the psychological and emotional
development of the child” (Barber, 1996) through use of parenting practices such as
guilt induction, withdrawal of love, or shaming. One key difference between
authoritative and authoritarian parenting is in the dimension of psychological control.
Both parents place high demands on their children and expect their children to behave
appropriately and obey parental rules. Authoritarian parents, however, also expect
their children to accept their judgments, values, and goals without questioning. In
contrast, Authoritative parents are more open to give and take with their children and
make greater use of explanations. Thus, although both types of parents are equally
high on behavioral control, authoritative parents tend to be low on psychological
control, while authoritative parents tend to be high.

In reviewing the literature on parenting style, one is struck by the consistency
with which authoritative upbringing is associated with both instrumental and social
competence and lower levels of problem behavior in both boys and girls at all
developmental stages. The benefits of authoritative parenting and the detrimental
effects of uninvolved parenting are evident as early as the preschool years and
continue throughout adolescence and into early adulthood. Although specific
differences can be found in the competence evidenced by each group, the largest
differences are found between children whose parents are unengaged and their peers
with more involved parents. Differences between children from authoritative homes
and their peers are equally consistent, but somewhat smaller (Weiss & Schwarz,
1996). Just as authoritative parents appear to be able to balance their conformity
demands with their respect for their children’s individuality, so children from
authoritative homes appear to be able to balance the claims of external conformity and
achievement demands with their need for individuation and autonomy.
The impact of different parenting styles on individual development are evident as early as the preschool years and continue throughout adolescence and into early adulthood. Follow up research (Baumrind, 1991) has also found that the initial advantages of the authoritative approach are likely to become even stronger over time. Both parental responsiveness and parental demandingness are important components of good parenting. However if the parents do not use proper parenting strategies suitable to the age level of the child and the situational demands it can have harmful consequences on the child’s overall development.

Parenting however is really a dynamic, interactive process in which parents and children influence each other (Parke & Buriel, 1998). One way to see the influence of children on parents is by looking at how parental behavior changes as children grow. The parenting that is effective with infants and toddlers is inappropriate for adolescents. Warmth is essential throughout development. However, the manifestation of parental affection changes, becoming more restrained as children develop (MacNally, Eisenberg, & Harris, 1991). Parental control also changes as children develop. Parents tend to be less controlling with older children and adolescents than with younger children. Parents behave differently depending upon the child’s specific behavior. The child’s behavior may cause parents to abandon one parenting style in favor of another. With a child who is less sociable and more active, the parent may need to be more controlling and directive (Dumas, LaFreniere, & Serketich, 1995). Thus, influence is reciprocal. Children behavior helps to determine how parents treat them and the resulting parental behavior can influence children’s behavior, which, in turn, causes parents to again change their behavior (Stice & Barrea, 1995). The marital relationship provides an important support for parenting (Cummings & Davies, 2002; Fincham & Hall 2005). When parents report more
intimacy and better communication in their marriage, they are more affectionate to
their children (Grych, 2002).

1.2.2 Influences on Parenting

It is important to perceive parenting style in terms of the context in which it is
used. The type of parenting style used may be influenced by a variety of factors.
Belsky (1984) has presented a model of the determinants of parenting that suggests
three broad domains of influence that are believed to affect parenting, although not
equally:

- Personal psychological resources of the parent
- Social–contextual characteristics
- Child characteristics

Personal characteristics that influence parenting include self-esteem, sociability,
and introversion/extraversion (Woodworth, Belsky, & Collins, 1996). Other variables
of interest may include personal attitudes, knowledge, and skills. Social–contextual
influences include issues such as the marital relationship, social network and support,
and work–family interactions. Child characteristics include the age, birth order, sex,
and temperament of the child. Belsky (1984) states that “the determinants of parenting
shape childrearing, which in turn influence child development.

Belsky, Robins and Gamble (1984) defines competent parenting as “the style of
child rearing that enables the developing person to acquire the capacities required for
dealing effectively with the ecological niches that she or he will inhabit during
childhood, adolescence, and adulthood”. Competent parenting is related to warmer,
more accepting, and more helpful styles of parenting (Bogenschneider, Small, &
Tsay, 1997). In a world where parents play multiple important roles in the lives of
their children - provider, caregiver, disciplinarian, teacher, role model, it is often
difficult for parents to find time to give their children the undivided, positive attention that they want and need. The task of increasing the amount of positive parent-child interactions becomes all the more difficult for parents of strong-willed children, who tend to be more oppositional in nature. These children tend to "push parents away" by being disrespectful, overtly defying house rules, and displaying aggressive behavior. These types of negative child behaviors tend to make "parent-child time" less desirable in the eyes of the parent. However, it does not decrease the need for these important interactions. Parents must take the initiative to "set their children up for success" and create opportunities for children to receive positive feedback in the home environment. By increasing the opportunities for positive parent-child interactions, parents establish a strong framework from which to develop and shape child behavior.

1.3 Perceived parenting in relation to mental health and social maturity among adolescents: conceptual framework

Though parenting, as a perception of the parents of their own attitude towards their child, happens to be of great significance in the dynamics of behavior for socio-psychological researches, however there is a crucial aspect that often goes missed that is the impact of how the adolescent perceives his parents. Perceived Parenting is the perception of the individual (P.P) or one’s own feeling as to how s/he is brought up by his/her parents and it always remains most important as the child is the one whose processes of socialization stands for furtherance (Bharadwaj, 1996). Individual experiences not only help in making the sense of self identity and self ideal but may also lead him to perceive, think and act in the self directed manner. The child can perceive his parents parenting style across various factors such as; rejection v/s acceptance, carelessness v/s protection, neglect v/s indulgence, utopian expectation
v/s realism, latent standard v/s moralism, freedom v/s discipline, marital conflict v/s marital adjustment.

Components of perceived parenting include:

1. Rejection v/s Acceptance: a child develops shock when he does not find proper care and response of his parents. The infantile honesty and truthfulness meets an adverse atmosphere and therefore the psychological growth of the child is affected. It is quiet natural that a child meets proper nourishment of his genuine feelings. Rejection of parents manifests itself in interpersonal relationships in direct ways, when the child has to face extreme criticism, indvidious comparison, harsh and inconsistent punishment by both or either of the parents in his upbringing. Rejection of parents may also evince itself in physical neglect, denial of love and affection, lack of interest in his activities and failure to spend time with him. On the other hand, parental acceptance implies an attitude of love for the child. The accepting parent puts the child in a position of importance in the home and develops a relationship of emotional warmth. Parental acceptance encourages the child and makes itself apparent in receptive or positive attitude towards the child’s idea and judgment, worthiness and capability, love and affection and admiration along with adequate attention towards him.

2. Carelessness v/s Protection: is perceived when both or either of the parents do not pay adequate heed towards child’s activities thus giving an impression of unwantedness by careless and unthoughtful negligible behavior towards him even in the presence of his proper and worthy behavior in day to day matters. On the other hand a sense of protection in the child makes him better and more confident. It is true that over protection is a disease and obstructs the
independent growth of the child. But the sense of protection gives him
strength and psychological support.

3. Neglect v/s indulgence: neglect manifests itself in lack of attention and
cooperation with children, wilfully ignoring them and their activities and
avoidance of their genuine needs. Giving more importance to self designs of
work but least attention to the feelings and needs of their children comes
within the purview of neglect. On the other hand over indulgence of parents
with the child develops certain whims and psychological inconsistencies in the
latter. It may be seen in the parents yielding to every demand of the child and
failure to exercise the needed constraint even when necessary. Such a child
becomes unfit for a reasonable adjustment in the social circumstances.
However, it should be kept open to ourselves that indulgence with the child to
a reasonable degree shall be deemed as a healthy giving sign. It helps in
developing the child’s emotional response to the situation.

4. Utopian Expectation v/s Realism: utopian expectation exhibits itself in
expecting a very high quality of performance from the child even against his
capabilities. Some parents use their children as a means of achieving their own
thwarted ambitions without taking into consideration the abilities and
limitations of their children. Such parents are over-ambitious regarding their
children. The more children achieve, the more parents expect of them. Thus,
very high unrealistic and imaginary demand of parents regarding to the
performance of their children come within the purview of utopian expectations
which are not fulfilled by the children. However, a parental attitude of realism
signifies itself in taking into consideration the objective of realities pertaining
to both, the child’s capabilities and the outside world while setting up and expecting his level of performance.

5. Lenient Standard v/s Moralism: this mode of perceived parenting takes into account lenient standard as a negative dimension and moralism as a positive dimension. Lenient standards of parents make themselves apparent in permitting lesser restrictions from deviations from ethical and moral behaviour and an attitude showing indifference against such inhibitions to restrict the child’s freedom and individuality. On the other hand moralism as a socio-cultural product refers to the doctrine of duties of life, principles and conduct adhering to what is right and virtuous and plays an important role in the dynamics of social relations. It would be an admirable exercise, if a child is prone to inculcate a reasonable degree of moralism in his personality orientations. If parental behaviour evinces moralism to an extensive degree, it harms the child’s natural and dynamic integration. Certain parents develop an attitude of condemnation of the child’s mild departure from the ideals of morality and force them to live a strong puritan life. Such severe attitudes are also harmful.

6. Freedom v/s Discipline: freedom manifest itself in the absence of restraints to all the matters to what they pertain. In fact the child is a sole decision maker of his activities. There is hardly any questioning or impediments on the part if the parents. He may disregard or disobey his parents without any fear of punishment from them. On the other hand parents with penchants for strict discipline simply pass on orders to their children, who have to merely obey them. The child is not allowed to take any decision regarding his dress, appearance, manners, friends or other activities of his life. Disobedience is met
with punishment, whereas obedience is appreciated. Although discipline is essential to establish social orientations, yet the severe discipline on the part of the parents hamper the delight and liberty of the child which he wishes to obtain at every stage of life.

7. Faulty Role Expectation v/s Realistic Role Expectation: parents usually expect divergent and contradictory roles from their children. This makes the child confused and embarrassed because of the unpredictable expectations of his parents. The other dimension of realistic role expectation is reverse. It is when parents present themselves as an example to be followed by the children and their behaviour is thoughtful, consistent and predictable in day to day strives. The children know for certain what their parents like and what is expected of them.

8. Marital conflict v/s marital adjustment: marital conflicts affect the child as and when they witness open conflicts between their parents. The child is not able to reconcile with and it leaves a non palatable feeling on his mind. Alternatively, marital adjustment exhibits itself in a calm and composed adjustment between the parents, thereby creating a solidarity and congenial atmosphere of peace and harmony in the family.

This goes to explain that, undoubtedly parents bring up the child with the noblest of intentions but communication patterns play the critical role. They may assume a participative style but the manner, in which it gets communicated across to the adolescent, may be perceived as authoritarian; in such a case the effect on the adolescent could be grave. It adds another dimension to be resolved while coming toward an identity resolution. The dissonance within the situation sets the adolescent in conflicting situations. The strategies he then uses to rise to the occasion will
determine how well he is adjusted with his family, society and more so himself. An effective strategy will ensure resiliency and maintain a balanced mental health disposition. However with a perceived parental situation that focuses on incongruence and with the adoption of an ineffective conflict resolution technique, the impact on the adolescents’ self worth, social maturity, work efficiency and mental health gets seriously affected. According to Darling and Steinberg (1993) parenting styles must be distinguished from parenting practices—behaviours defined by specific content and socialisation goals (e.g. school achievement). Parenting styles can be understood as attitudes toward the child that are communicated to the child and create an emotional climate in which parents’ behaviour is expressed. Several studies emphasise the importance of perceived parenting styles as risk factors for individual development during adolescence. A positive relationship with parents provides a form of social support, which enhances psychological resources (e.g. self-esteem) and therefore enables adolescents to cope with stressful events (Cohen & Wills 1985; Baumrind, 1991). In a study of high school students, Dusek and Danko (1994) found that students with authoritarian parents reported less frequent use of active coping behaviour than did students with highly permissive or authoritative parents. The results of the described studies showed that perceived authoritarian and controlling parenting styles are closely related to psychological disturbance in adolescence. A smaller number of studies have investigated the role of perceived parenting styles in the development of anxiety (e.g. Gerlsma, Emmelkamp, & Arrindell, 1990; Furukawa, 1992), suggesting that parental rejection and control are closely associated with anxiety in childhood. These studies suggest that the parenting styles perceived by the adolescents have a substantial impact on their level of psychopathology and in turn mental health.
At this juncture, it is crucial to understand the term ‘mental health’. Clearly, a person can be called normal if he is not sick, if he is average, if he conforms to social norms, or if he approximates an ideally mature, healthy (physically and mentally) or fully functioning personality. Indeed one can view a kind of continuum ranging from the grossly disturbed to the conventionally adequate to the creatively mature and we often to do this in clinical practice as in ordinary socially life. World Health Organization (WHO) defines Mental Health (3 September 2007), as ‘A state of well-being in which every individual realizes his or her own potential, can cope with the normal stresses of life, can work productively and fruitfully, and is able to make a contribution to her or his community’. It connotes those behaviours, perceptions and feelings that determine a person’s overall level of personal effectiveness, success, happiness and excellence of functioning as a person (Kornhauser, 1965). It depends on the development and retention of goals that are neither too high nor too low to permit realistic successful maintenance of belief in one’s self as a worthy effective human-being (Laxminarayan and Prabhakaran, 1993). So a mentally healthy person is firm in his intentions and least disturbed by strains and stresses of day-to-day life. Thus, the concept of mental health takes a ‘gestalt’ view of the individual. It incorporates the concepts of personality characteristics and behavior all in one. It may also be understood as the behavioural characteristic of the person. A mentally healthy person shows homogenous organization of desirable attitudes, healthy values and righteous self concept and a scientific perception of the world as a whole. Several psychologists like Erickson (1963), Rogers (1969), Hurlock (1972) have expressed their view in a similar tone. A mentally sound person or healthy person should also be understood as a dynamic and conscientious person who is found to be reasonably rational in the choice of means for the realization if his/ her pious ends (Anand, 1989).
Mental health is an attitudinal concept toward ourselves and others and it presents a humanistic approach towards the understanding and assessment of the self, positive feeling, attitudes towards self and others. After reviewing literature in this field, (Jahoda, 1959; Maslow & Mittleman, 1951; Rogers, 1961, Whittaker, 1970), six indices of mental health were highlighted (Singh & Sen Gupta, 2000):

1. Emotional Stability – experiencing subjective stable feelings which have positive or negative values for the individual.

2. Adjustment – individual’s achieving an overall harmonious balance between the demands of various aspects of environment, such as home, health, social, emotional and school on the one hand and cognition on the other.

3. Autonomy – a stage of independence and self determination in thinking.

4. Security – Insecurity – a high or low sense of safety, confidence, freedom from fear, apprehension or anxiety particularly with respect to fulfilling the person’s present or future needs.

5. Self – Concept – the sum total of the person’s attitudes and knowledge towards himself and evaluation of his achievements.

6. Intelligence – the general mental ability which helps a person in thinking rationally and in behaving purposefully in his environment.

In connection to the above mentioned perspective, it is tacit that mental health among adolescents is jeopardized. The effective resolution of the identity crisis at this stage leads to improved familial interactions, acquisitions of healthy coping styles, mental fitness and adequate social maturity. Self confidence and personal achievements at academic and career fronts follow. This stage of an individual’s life serves as a platform to leverage him into the world. Family, peers, school authorities, significant others and personal psychological make-up are important influencing
factors. It is estimated that 65% of the problems do not result from lack of skills or motivation but because of strained relationships. It is in this stage that parental relationships suffer the most. Parents become very concerned about the adolescents’ all round personality development; whether it is at the academic front, additional skill building, emotionality, morality, or with the way the individual relates and reacts to society. Parents wish for their children to grow into socially mature and respected individuals and the process of molding them begins early on. Diana Baumrind (1991), through extensive research concluded that parents use certain techniques to raise their children. As noted earlier, these include authoritarian, authoritative, neglectful and indulgent techniques either in pure form or in combination. The use of any and each of these strategies has a defined characteristic impact upon the child’s development. The use of the technique influences the adolescent’s self concept, will impact his esteem and the way he relates to his current and future interpersonal relationships.

Research has shown that people with different dispositions create different social environments for themselves. Thus a person’s ‘situation’ does not depend only on external conditions but also on his/her own approach to people and problems. As the adolescent moves toward integration another crucial variable is influenced - social maturity. Social maturity encompasses attainments in several domains, including independent functioning, effective interpersonal communication, interaction and responsibility i.e. contributing to the well being of society (Greenberg, Josselson, Knerr and Knerr, 1995). Social maturity implies a well developed awareness, deep and clear understanding of the social heritage and appreciation of value of social cautions, manners, and more of the rules that govern social behavior, of the rights of others and of personal responsibilities as a member of a social group. He understands the full import of a social organization in which he lives, the desirability of rules and
laws to govern group behaviour and the overall objective and purpose of the social structure. Social maturity also implies that the individual develops a pattern of behaviour, habits, attitudes, manners and skills which will help him fit into group living and contribute to the welfare of the group. (T. Kalyanidevi and N. Chaitanyapratima, July, 2008). Social maturity has to do with how well people understand the nature of the social world they live in. It refers to the individuals’ general level of adaptive functioning and socio emotional competence (Galambose and Cotigan, 2003). Greenberger, Ellen and Sorenson, Aage B. (1974) constructed a model of psychosocial maturity which specifies measurable attitudes and dispositions. The model of psychosocial maturity integrates sociological and psychological views of the person; that is, it takes into account the requirements of societies as well as the development of individuals. The model outlines three general dimensions of maturity which are likely to be relevant in all societies. These include the capacity to function adequately on one’s own (personal adequacy), the capacity to interact adequately with others (interpersonal adequacy) and the capacity to contribute to social cohesion (social adequacy). This psychosocial structure comprises of general characteristics, which represent the most common type of demands made by all societies on individuals, and at the same time, specific categories which are culture specific attributes of individuals, that enable them to meet these demands.

The components of social maturity include:

1. Personal Adequacy
   a. Work Orientation: it manifests itself in the perception of work related skills and development of proper attitudes toward work in terms of knowledge of standards of competence in performing tasks, capacity for experiencing pleasure in work leading to self sufficiency.
b. Self Direction: it manifests in one’s own capacity to independently act and exercise control over one’s own actions. This also involves the initiative an individual takes in directing himself and his actions with a feeling of security and full faith in one’s efforts.

c. Ability to take stress: it is the ability to exhibit appropriate emotional stability and react without embarrassing either himself or the group he is in. It also involves the ability to undertake difficult and challenging tasks with assurances.

2. Interpersonal Adequacy

a. Communication: it involves an ability to understand, write, communicate and make clear meaningful speeches and gestures. The ability also involves empathy which sensitizes the individual to the affective domain and demands effective communication.

b. Enlightened Trust: it includes a general belief that is acceptable to rely or depend on others when the need arises. It involves the clear functioning of an enlightened decision about whom, when and how much to trust.

c. Cooperation: it is an altruistic tendency to join others in their efforts to reach a mutually desirable goal. It involves the ability to regard rules and practices more as a reciprocal social agreement than a rigid, unchangeable law.

3. Social Adequacy

a. Social Commitment: it involves a feeling of oneness with others, willingness to modify or relinquish personal goals in the interest of societal goals and also a readiness to invest in long term social goals.

b. Social Tolerance: it involves a person’s willingness to interact with individuals and groups, who differ from him. Sensitivity to the right of individuals and
groups who differ from him, thus accepting the difference as a means of
building up the out group - loyalties.

c. Openness to Change: it involves the willingness to accept changes in the social
setting and adapt oneself to the demands of these changes.

The variables that are known to affect social maturity also seem to affect
adolescent identity resolution, mental health, and adoption of an adequate conflict
resolution strategy. The various factors include home and school environments, socio-
economic status, family-size, familial interactions, perceived parenting, education and
occupation, urbanization, modernization and intelligence.

1.4 In summary: perceived parenting in relation to mental health and social
maturity

As individuals grow, they closely observe their parents and the familial
interactions. They feel inclined to imbibe parental attributes or in some cases, to even
rebel against them. Parental acceptance, rejection, and encouragement shape the
individual’s view of the world, his attitudes toward society, conflicts and resolution.
As children, perceived parenting is critical as it lays the foundation of how well the
individual has accepted himself (with the strengths and weakness), how well he is
adjustable to his challenging circumstances, how adequately he manages conflicting
situations, his levels of tolerance and resilience, his mental health status and his
understanding of society and the way it functions. An adverse strain on any of the
aspects upsets the balance and the individual needs to reorganize his mental frame to
fit into his environment more adequately. If he fails to do so his mental health is
jeopardized. Mental illness and its physiological manifestations occur. Social
relationships cease to be satisfactory and self worth and quality of life are seriously
hampered.
The characteristics of parent-child interaction that are associated with positive outcomes for the adolescent are similar in that they reflect support for and acceptance of the developing youth. Indeed, when parent-adolescent relationships provide support for the youth's behaviors, interest, and activities, numerous positive developmental outcomes are likely to occur. For instance, support has been associated with better school grades and scholastic self concept (DuBois, Eitel, & Felner, 1994); with perceiving that social relationships could be more beneficial to one's development than risky (East, 1989); with being more satisfied with one's life (Young, Miller, Norton & Hill, 1995); and with a decreased likelihood of involvement in drinking, delinquency, and other problem behaviors (Barnes & Farrell, 1992).

A healthy father-child relationship leads to the feelings of being loved and accepted with a high degree of self-confidence and non-dependency (Hoffman, 1960). Father accepts and encourages their children in non-deviant families (Jain, 1986) and absence of fathering may promote delinquency among boys (Gregory, 1958). A few researches also study the role of mother and report that the warmth and affection of mothering is positively related to the calm, happy and co-operative behavior of children (Bagley and Schaefer 1960). Despite changing family roles during adolescence, the home environment and parents are still important for the behaviors and choices of adolescents. Most teenagers do not want to sever their relationships with their parents or leave their family behind. They want their parents to be expansive and flexible enough to accept their experiments and mistakes without rejecting them as people. Although they value their peer’s opinions on any social and personal matters, teenagers want and need their parent’s advice on the important issues of their lives (Brittain, 1963). Challenged by their children, parents often have to re-examine and adjust their feelings, expectations, and childrearing methods. When
their children want more freedom and independence, parents have to make important judgments about whether situations are safe and whether their child is trustworthy and competent. Parents of teenagers have to know how to be supportive without shifting their children’s developing sense of autonomy. The difficult task for the parents is to let go their children. Established pattern of interaction are breaking down and new ones are evolving.

1.5 Significance of the study

In the context of rapid social change being witnessed in India, it is suggested that there is a need to research the appropriate parenting models which may play a role in preventing mental disorders in early adolescence while also building resilience into adulthood, and thus, the researcher chose the current topic “A Study of Perceived Parenting in relation to Mental Health and Social Maturity among adolescents”.

1.5.1 Importance of the Study

1. It is, meritorious to study the initial years of life-span development, the adolescents, and the study chooses to focus on the said target group to understand the interplay of certain psychological processes from their angle. It supposes an underlying condition i.e. Individual productivity is the product of a sound mental, emotional social and psychological state.

2. The present study aims to thoroughly study the impact felt on mental health of adolescents and the effect it has on their intrapersonal and interpersonal lives, with focus on perceived parenting and social maturity.

3. The study is also hoped to arrive at some therapeutic conclusions that would aid parents and teachers in dealing effectively with their adolescent population.
4. The study places emphasis on the development of an individual’s integrity. It stresses the fact that if an individual is mentally healthy, then, he opens up for himself certain positive lifestyle changes viz. satisfactory interpersonal relationships, fulfilling interactions with significant others, improved quality of life, and a sense of achievement and striving to accomplish ambitions.

1.5.2 Application of the Study

1. The current study can contribute to existing research in several ways. The findings add to the research resource available in the Indian context especially in fields of mental health and its association with parental support and its perception.

2. The results of the study can be used to arrive at therapeutic modules suited to the needs of parents and adolescents. Parent sensitivity programs and workshops on parenting styles and their effectiveness can be conducted to aid parents. Adolescent targeted interventions also emerge as core focus areas.

3. It can be advised to school and college authorities to introduce topics such as ‘Building up Social Maturity’, ‘Effective Conflict Management’, ‘How to steer through fights?’, ‘I am responsible for what consequences I meet’, and ‘Maintaining Mental Health’ and the like under value education, skills for adolescence class, self improvement and personality development sessions.

4. Mental Health Education needs to be given prime importance and the study can help highlight the areas of concern. In the same light, mental health awareness camps, educative programs for the general public can be conducted.

5. The study will also help significant governing authorities to give mental health its due status and with the help of educational institutions and other agencies
to identify children and adolescents in need of mental health care early on and thereby initiate immediate therapeutic interventions.

A condition of mental ill health has grave repercussions: ineffective coping, adverse effects on work productivity, inappropriate emotional management, conflicting interpersonal relationships, poor conflict resolution strategies and impeded social maturity. Establishing and maintaining adequate mental health status for all, especially for the vulnerable adolescent phase is the need for the hour. At the national level, mental health policy has been the focus of Indian public health initiatives during last two decades. Currently India is implementing a national level program of integrating mental health with primary health care, the largest such effort in a developing world (Narender Kumar et al. 2005). Positive parent-child interactions pave the pathway for children's success. Positive parent-child interactions also empower parents, increase child compliance with directions, and create happier, more peaceful home environments. In sum, then, parent-child relationships marked by behaviors supportive of the youth and by positive feelings connecting the generations are associated with psychologically and socially healthy developmental outcomes for the adolescent. A strong parent-child relationship carved out by effective parenting as well as a fair congruent perception of the same by the adolescent is hence, important for adolescent personality integration, academic competence, mental health, social maturity, coping and resiliency and overall well being of the adolescents themselves.