



Section 2. Social psychology

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THE RELATIONSHIP BETWEEN PARENTING STYLE AND RELUCTANCE TO GETTING HELP WITH MENTAL DISORDERS

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Abstract

This report investigates the relationship between various parenting styles and the willingness to seek help for mental health issues. We used data from Parental Authority Questionnaire (PAQ; Buri, 1991) from a survey of 300 participants. This study explores how the parenting styles experienced during childhood - authoritative, authoritarian, and permissive - impact individuals' willingness to seek mental health support in adulthood. The Mental Help Seeking Intention Scale (MHSIS; Hammer, 2018) is used in order to quantitatively measure the participants' willingness to seek help in the survey. Through descriptive and statistical analysis, we found significant correlations between parenting styles and mental health outcomes. Those who experienced permissive parenting style was related with a greater willingness to seek help, while those who experienced authoritarian and authoritative styles were associated with a reduced propensity to seek mental support. These outcomes underline the lasting influence of childhood experiences on mental health practices in adulthood. In this study, we also explored how demographic factors, such as age, gender, and socioeconomic status, could influence the willingness of seeking mental assistance. Some limitations of this study include but not limited to the constraints of online survey, selection bias, as well as the reliability of data source. **Keywords:** Parenting styles, Mental health, Survey Analysis, Childhood influence

Adolescent Mental Health and Subsequent Parenting: a Longitudinal Birth Cohort Study

Adolescents who exhibit conduct problems are more likely to develop coercive parenting styles. Studies suggest that most adolescent mental health issues and subsequent parenting styles are likely led by limited educational qualifications and poor socioeconomic status. However, severe adolescent emotional problems, including depression and anxiety disorder, did not affect later parenting practices. However, this study's limitations are based on the lack of data variety, which refers to the adolescent mental health data only coming from teachers' assessments of the survey members' behavior, not including information from the parents or the children themselves. On the other hand, results from teachers' assessments have been proven to be more accurate regarding adolescents' functional impairment and future delinquent behavior than other data and assessments based on parents and children.

Parenting Style and Youth Outcomes in the UK

There are research studies suggesting that parenting practice results in educational outcomes. For example, a study conducted by Astone and McLanahan showed that students' educational outcomes would be better if parents want their children to graduate from college by paying attention to their school works. Parents supervise their children's schoolwork or simply talk to them at least once a week. However, according to Astone and McLanahan's analysis, these parenting practices only explain little of the gap in educational attainment between children from intact and non-intact families (Astone & McLanahan, 1991). In addition, an analysis paper based on the National Educational Longitudinal Study, the author McNeal, Jr shows that students' drop-out rates are lower if parents communicate with their children in terms of educational matters and monitor their children's behavior (McNeal, 2012). However, the results seem less consistent with achievement scores. According to the results, parenting practices such as parent-child discussion is associated with higher achievement scores, but parenting practices like parental monitoring and parental involvement in parent-teacher associations (PTAs) are linked to lower scores. Therefore, McNeal concluded that parental involvement is more salient for behavioral than for cognitive outcomes. He also suggested that parental involvement has stronger effects for white and more affluent students.

In addition to non-educational outcomes linked to parental involvement, during a study conducted by Barnes and Farrell, higher levels of parental support and monitoring are associated with lower levels of substances use including alcohol, drug, and also delinquent behaviors among adolescents (Barnes & Farrell, 1992). On the other hand, another study con-

ducted by Ennett reported that parent-child communication about drug and alcohol use is not associated with the initiation of smoking or drinking among adolescents. In addition, evidence from a longitudinal study of adolescent sexual behaviors is rather equivocal. The conductor of this study report that parental monitoring and good parent-child communication is linked to lower initiation rates of oral sex among adolescents, but these types of parenting practices about sex is associated with higher initiation rates.

Overall, the inconsistency of these studies' results might came from the relatively small number of studies conducted, and partially inconsistency of the local nature of their sample data. In order to adjudicate these differences, there is a need of using a nationally representative sample of a reasonable size to examine the association between parenting practice. Following this statement, Kiernan and Huerta use data from the Millennium Cohort Study to show that parent's action of reading books to their children is associated with higher cognitive development of children at the age of three (Kiernan & Huerta, 2012). Also, they proved that parent's disciplinary style is associated with child's behavioral problems.

Child Development Psychology: Three-Fold Typolopy of Parenting Style

Child development psychologists work on studying parenting style and their covariates. Baumrind proposes a three-fold typology of parenting style, which divides parenting styles into authoritative, authoritarian, and permissive. Authoritative parenting style controls their child's activities in a "rational issue-oriented way". They usually communicate with their children and encourage their children to communicate with them in order to give their children "the reasoning behind the parental policy," and they would solicit "the child's objections when the child refuses to comform". As a result, an authoritative parent does exert firm control over the child, but does not control the child in with restrictions. On the other hand, authoritarian parents force their child to obey to their policy. They value obedience and "favor punitive, forceful measures" when parent-child conflict arises. Finally, a permissive parenting style means to putting the parent in

a place where himself or herself is a resource for the child to use if they want. They do not actively hold the responsibility for monitoring and shaping the child's ongoing and future behavior.

Parenting Styles and Mental Health Outcomes

Parenting styles play a significant role in shaping a child's mental health outcomes. Different parenting approaches can have varying effects on a child's emotional well-being and psychological development. Authoritative parenting, characterized by warmth, clear boundaries, and open communication, tends to foster positive mental health outcomes in children. Children raised by authoritative parents often exhibit higher self-esteem, emotional resilience, and are better equipped to handle stress and challenges.

On the other hand, authoritarian parenting, with its emphasis on strict rules and discipline without much emotional warmth, may lead to negative mental health consequences. Children raised in authoritarian households might develop feelings of anxiety, low self-esteem, and difficulties expressing their emotions due to the lack of emotional support and autonomy.

Permissive parenting, characterized by leniency and few demands, can also influence mental health outcomes. Children raised in permissive environments may struggle with self-regulation and exhibit impulsive behaviors, leading to challenges in emotional regulation and mental well-being.

Neglectful or uninvolved parenting, where caregivers are disengaged and fail to meet their child's emotional needs, can significantly impact mental health. Children who experience neglect may develop attachment issues and feelings of abandonment, and are at a higher risk of developing mental health disorders such as depression and anxiety.

Factors Influencing Comfort with Getting Help for Mental Health Problems

Several factors contribute to an individual's comfort level with seeking help for mental health problems. Firstly, the presence of a supportive and understanding social network can positively influence one's willingness to

seek assistance. When individuals feel they can confide in friends or family members without judgment, the stigma associated with mental health diminishes, promoting a more open attitude towards seeking help.

Secondly, education and awareness play a crucial role in shaping comfort with mental health support. Access to information about mental health, its prevalence, and the effectiveness of treatment options can empower individuals to take action and seek professional help when needed. Reducing misconceptions and increasing mental health literacy can lead to a more accepting attitude towards mental health treatment.

Moreover, cultural beliefs and attitudes towards mental health can impact an individual's willingness to seek help. Societies that prioritize mental well-being and view seeking therapy or counseling as a sign of strength rather than weakness tend to have higher rates of help-seeking behaviors.

Additionally, the accessibility and affordability of mental health services are crucial factors. When mental health services are easily accessible and financially feasible, individuals are more likely to seek help without hesitation. Reducing barriers to access, such as stigma, cost, and availability, can greatly improve comfort levels with seeking help for mental health problems.

Ultimately, promoting open conversations about mental health, normalizing help-seeking behaviors, and creating a supportive environment can lead to greater comfort and acceptance of mental health support, ultimately contributing to improved well-being for individuals and communities.

Method:

1. Participant

A total of 300 participants were involved in this study through online survey. The sample consisted of individuals aged between 21 and 77 years old, with a mean of 40 and an even distribution of race.

2. Survey design

The survey was designed to focus on discovering the relationship between parenting styles and methods and willingness to seek out help for mental health concerns. We used a self-administered questionnaire that included demographic questions (age, gender,

major, etc.) and a set of Likert-scale questions designed to measure the variables under investigation.

The Parental Authority Questionnaire (PAQ; Buri, 1991) assessed the parenting style that the participants grew up with. The PAQ consists of 30 statements for each parent, each requiring respondents to rate their agreement on a scale from 1 (strongly disagree) to 5 (strongly agree). These statements equally represent permissive, authoritarian, and authoritative/flexible parenting styles. Scores for each style were separately calculated by summing up the individual scores. Mother's and father's scores were treated distinctly, and for each participant, the higher score from each parent determined their classification.

The Mental Help Seeking Intention Scale (MHSIS; Hammer, 2018) was also used in the survey in order to determine the participants' willingness to seek help if they experienced mental health concerns, which includes questions such as "If I had a mental health concern, I would intend to seek help from a mental health professional." From answering three questions with a scale from 1 (extremely unlikely) to 7 (extremely likely), the resulting mean score is calculated by adding the scores for all three items and then dividing by three.

3. Data analysis

In this study, we used quantitative data analysis methods to investigate the relationship between parenting styles and the help-seeking behaviors for mental health. The abovementioned survey dataset was analyzed to determine the respondents' parenting styles and to assess their possibility for seeking mental health assistance. We also analyzed several demographic variables to explore the impact of age, gender, education level, and race/ethnicity on respondents. Statistical analyses, such as descriptive analysis, frequency distributions, and various plots, were utilized to analyze the data. Below is the analysis done in Python 3.9 using Pycharm Professional IDE.

- Classify Parenting Styles: We used the scores for different parenting styles to classify respondents by the dominant parenting style they have experienced;
- Analyze Willingness to Seek Mental Assistance: Examine the respondents' willingness to seek help for mental

- health concerns based on their responds;
- Demographic Analysis: Assess how demographic factors (e.g. age, gender, education, race) are related with parenting styles and willingness to seek mental health assistance;
- Relationship Analysis: Explore the relationship between the classified parenting styles and the willingness to seek help for mental health issues.

4. Limitations

In online surveys, participants may misinterpret questions, and researchers have limited opportunities to provide clarification, potentially affecting the quality of responses. Online surveys rely on participants who have access to the internet and are willing to take part. This may lead to a selection bias where certain groups, such as older individuals or those with limited internet access, are underrepresented in the sample, affecting the generalizability of the findings.

Results

A total of 300 participants engaged in the online survey, reflecting a diverse range of individuals aged between 21 and 77 years, with a mean age of 40. The sample exhibited an even distribution across different racial backgrounds.

The survey aimed to investigate the association between parenting styles and the willingness to seek help for mental health concerns. Utilizing the Parental Authority Questionnaire (PAQ; Buri, 1991), participants were classified into distinct parenting styles based on their responses to 30 statements for each parent. These statements covered permissive, authoritarian, and authoritative/flexible parenting styles. Mother's and father's scores were calculated separately, and each participant was categorized based on the higher score from each parent.

To gauge participants' willingness to seek help for mental health concerns, the Mental Help Seeking Intention Scale (MHSIS; Hammer, 2018) was employed. This scale comprised three questions, such as "If I had a mental health concern, I would intend to seek help from a mental health professional." Participants responded on a Likert scale

ranging from 1 (extremely unlikely) to 7 (extremely likely). The mean score was calculated

by summing up scores for all three items and dividing by three.

Figure 1: Distribution of willingness to seek mental health assistance

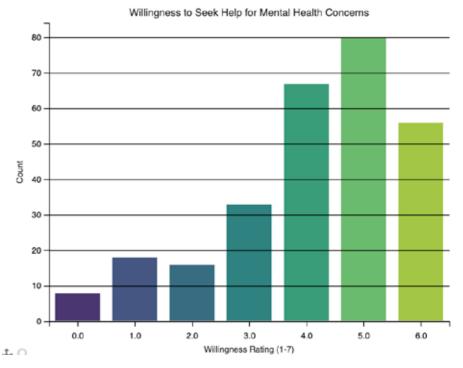


Figure 1 shows the distribution of willingness ratings among respondents. With many participants have a moderate to high willingness to seek help (ratings \geq 4.0). This sug-

gests that a significant portion of the sample might be open to seeking professional help for mental health issues.

Figure 2: Distribution of parenting styles; 0: authoritative, 1: permissive, 2: authoritarian

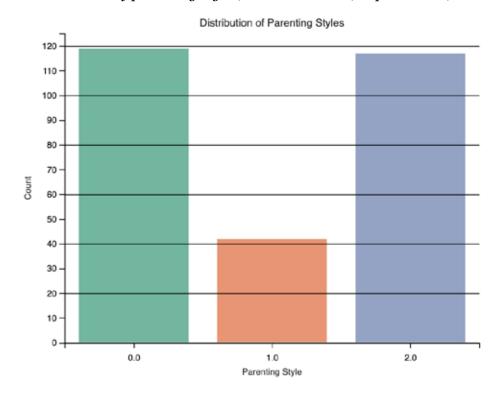


Figure 2 shows the parenting styles among respondents. The sample contains a mix of parenting styles, with a notable presence of author-

itarian and authoritative styles. This distribution shows that comparatively few respondents have experienced permissive parenting styles.

Figure 3: Relationship between parenting styles and willingness to seek mental help; 0: authoritative, 1: permissive, 2: authoritarian

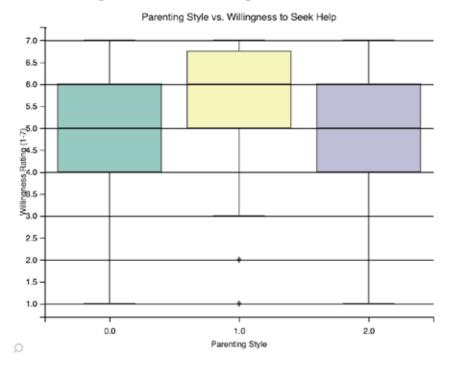


Figure 3 shows the relationship between parenting styles and respondents' willingness to seek mental help. The comparison between parenting styles and willingness to seek help indicates that those who have experience permissive parenting styles are more likely to seek mental help (i.e. having higher willingness score).

Figure 4: Relationship between gender and willingness to seek mental help; 0: male, 1: female, 2: others, 3: prefer not to answer

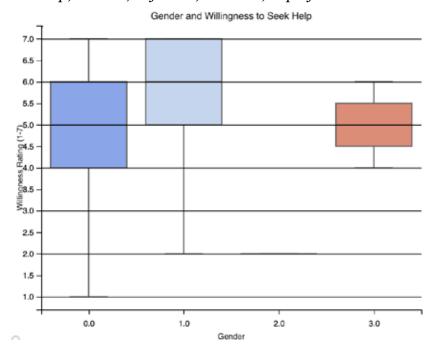


Figure 4 shows the relationship between the demographic variable gender and respondents' willingness to seek mental help. The box plot suggests that compared to males, females are more likely to seek mental assistance (i.e. have higher willingness score).

In conclusion, this study reveals that male and whose who have experienced permissive parenting styles are more likely to seek mental health assistance. In addition, it is essential to acknowledge the limitations of the study. Our survey introduce the possibility of participant misinterpretation of questions, with researchers having limited opportunities for clarification. The reliance on internet access may result in a selection bias, potentially underrepresenting certain groups, such as older individuals or those with limited internet access, impacting the generalizability of the findings. Despite these limitations, the study provides valuable insights into the relationship between parenting styles and the reluctance to seek help for mental disorders.

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