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### Brief report

# Dimensions of parenting among mothers and fathers in relation to social anxiety among female adolescents



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#### ABSTRACT

Social anxiety is the most common anxiety disorder among youth; theoretical and empirical work suggest specific parenting behaviors may be relevant. However, findings are inconsistent, particularly in terms of maternal as compared to paternal effects. In the current study, we evaluated the indirect effects of perceived psychological control on the relation between anxious rearing behaviors and child social anxiety among 112 community-recruited girls (ages 12–15 years). In addition to self-report, adolescent participants completed a laboratory-based social stress task. In line with hypotheses, results indicated indirect effects of psychological control on the relation between anxious rearing behaviors and child social anxiety in maternal but not paternal models. Findings are discussed in terms of their theoretical and empirical implications for clarifying the role of parental relations in adolescent social anxiety.

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Social anxiety disorder is a common and often debilitating condition that typically emerges during adolescence (Kessler et al., 2005). Parental anxious rearing behaviors, which involve articulation of fears and anxieties, particularly those relevant to child activities (e.g., doing something independently; Muris, Meesters, & van den Berg, 2003), may play a role. Little is known, however, about pathways through which anxious rearing behaviors may relate to child social anxiety.

Although parents' own anxiety is weakly related to controlling behavior (e.g., Hudson, Doyle, & Garr, 2009), theoretical accounts link anxious rearing style, characterized by child-oriented anxious apprehension, and efforts to control the child's behavior (Ginsburg & Schlossberg, 2002). In other words, parents' worries about the activities and welfare of their child may correlate with the use of psychologically controlling tactics. Indeed, extant work suggests that parental characteristics like separation anxiety are linked to child well-being via psychological control (Soenens, Vansteenkiste, Duriez, & Goossens, 2006). Soenens, Vansteenkiste, and Luyten (2010) contend that self-determination is promoted by "autonomy-supportive" environments (e.g., freedom to make choices). In contrast, psychologically controlling parenting behavior (e.g., guilt induction), may incite children to behave in ways that do not accord with their true desires, which negatively impacts social functioning. Evidence links parental psychological control with child social anxiety (Greco & Morris, 2002; Morris & Oosterhoff, 2016.) Thus, indirect effects of psychological control on the relation between anxious rearing and adolescent social anxiety may be expected.

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Further, adolescent perception of maternal versus paternal parenting behavior as it relates to social anxiety requires more investigation. Bögels, van Oosten, Muris, and Smulders (2001; age range 8–18 years) found that maternal overprotectiveness was more predictive of child social anxiety than paternal factors, but no differences in coded parenting behaviors between mothers and fathers of socially anxious children have also been observed (Hummel & Gross, 2001; age range 9–12 years). Mixed findings may be due to limited paternal participation, inconsistent measures of psychological control, and differences in the way psychological control is expressed by mothers and fathers (Soenens et al., 2010).

This study was designed to evaluate hypothesized indirect effects of psychological control on the relation between anxious rearing behavior and child social anxiety as measured by social anxiety symptoms and anxious reactivity to a social stress task. A real-time social stress task was utilized to reduce retrospective self-report biases (e.g., memory; affect; Nisbett & Ross, 1980).

#### 1. Method

#### 1.1. Participants

The sample included 112 girls (12–15 years;  $M_{\rm age} = 14.38$ , SD = 1.15) locally recruited from a Southwest region of the United States. Table 1 summarizes demographic information.

#### 1.2. Measures

All measures utilized are psychometrically strong. *Psychological control* was assessed via the Psychological Control Scale-Youth Self-Report (Barber, 1996). *Anxious parenting* was indexed using the Anxious Parenting Scale (Muris et al., 2003), which included items such as "Your parents are afraid when you do something on your own" and "Your parents warn you of all possible dangers". *Social anxiety symptoms* were assessed via the Revised Child Anxiety and Depression — Social Phobia subscale (RCADS — SP; Chorpita, Yim, Moffitt, Umemoto, & Francis, 2000). Participants rated *anxiety elicited by the social stress task* by rating current anxiety from 0 (*Not at all*) to 10 (*A lot*) immediately pre- and post-task.

#### 1.3. Procedure

Written guardian consent/child assent were obtained, and participants completed a self-report battery and a Modified Trier Social Stress Test (Kudielka, Hellhammer, & Kirschbaum, 2007; Yim, Quas, Cahill, & Hayakawa, 2010). Participants were told they would complete a 5min speech to be evaluated by a researcher. They were given 3 min to prepare.

**Table 1** Demographic Information.

| U 1                    |      |
|------------------------|------|
|                        | %    |
| Race                   |      |
| Caucasian/White*       | 74.1 |
| African American/Black | 11.6 |
| Asian American         | 7.1  |
| Native American        | 2.7  |
| Other                  | 0.9  |
| Ethnicity              |      |
| Non Hispanic/Latino    | 85.7 |
| Hispanic/Latino        | 12.5 |
| Year in School:        |      |
| 6th Grade              | 5.4  |
| 7th Grade              | 13.4 |
| 8th Grade              | 16.1 |
| 9th Grade              | 39.3 |
| 10th Grade             | 21.4 |
| 11th Grade             | 3.6  |
| Ever Been in Therapy:  |      |
| Yes                    | 19.6 |
| Currently in Therapy:  |      |
| Yes                    | 6.3  |

*Note.* n=112. Percentages do not add to 100 as adolescents were able to select more than one race. Four participants declined to identify their race. Two participants declined to identify their ethnicity.

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