



Family dysfunction and anxiety in adolescents: A moderated mediation model of self-esteem and perceived school stress

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ARTICLE INFO

Action Editor: Michelle K. Demaray

Keywords:

Anxiety

Family dysfunction

Moderated mediation model

Adolescents

ABSTRACT

This 18-month longitudinal study examined a moderated mediation model addressing the psychosocial mechanisms that account for the association between family dysfunction and anxiety. A sample of 847 Chinese early adolescents (M age = 12.96 years, $SD = 0.67$) completed questionnaires assessing family dysfunction, self-esteem, perceived school stress, and anxiety on three occasions at 6-month intervals. After gender and socioeconomic status were included as covariates, the results revealed that family dysfunction was significantly associated with adolescents' anxiety. Moreover, self-esteem partially mediated the relation between family dysfunction and anxiety, and perceived school stress moderated the mediation process in the family dysfunction to anxiety path and in the self-esteem to anxiety path. The findings suggested that both social contextual factors (e.g., family dysfunction and school stress) and self-system factors (e.g., low self-esteem) are risk factors for increased anxiety levels in adolescents. Limitations and practical applications of the study were discussed.

1. Introduction

Many young adolescents take an important step along their academic journey by entering middle school. In China, this first step occurs after six years in the typically more secure and familiar environment of elementary school. At the end of the six years, young adolescents are introduced to the world of middle school, where students perceive more pressure to succeed and adapt to new academic loads, school expectations, teaching practices, and social relationships (Duchesne, Ratelle, & Roy, 2012). These changes, representing risk factors, appear to increase the likelihood of adolescent psychological problems, such as emotional disorders (Ma, 2012).

Recent research has shown that anxiety, which is characterized by widespread and persistent fear and worry, is more prevalent than other emotional disorders during adolescence (Ollendick, King, & Muris, 2002). Furthermore, the World Health Organization (WHO) lists anxiety disorder in its high priority list of resource allocation because of its frequency of occurrence and degree of associated impairment (World Health Organization, 2003). Surveys of Chinese middle school students indicate that the prevalence of anxiety disorders ranges from 7%–16% (Xu & Deng, 2016). Studies also have shown that not only is adolescent anxiety associated with concurrent adjustment problems, it also appears to impede future adaptive psychosocial development (Maldonado et al., 2013). For example, higher levels of anxiety predict subsequent psychiatric problems (e.g., depression and conduct disorders), and also have

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a significant, negative impact on the daily lives of adolescents through decreased school attendance, academic achievement, and academic self-efficacy (Ingul & Nordahl, 2013; Owens, Stevenson, Norgate, & Hadwin, 2012). Thus, it seems essential to understand fully the determinants of individual differences in reports of anxiety in order to help early adolescent students adapt effectively to their changing circumstances as early as possible.

1.1. Theoretical framework

Bronfenbrenner's bioecological systems theory (Bronfenbrenner, 1979) offers a useful framework to consider the development of anxiety in youth. The theory posits that a child's development must be understood through the interaction between the child and the environment, including interactions between various environmental systems (e.g., family-school interactions). Given that the family provides the earliest environmental context for the socialization of children, family experiences should play a foundational role in children's psychological development. Indeed, Xie, Xie, Zhang, and Zhang (2008) found that Chinese middle school students reporting higher levels of family dysfunction experienced more emotional problems, such as tension, anxiety, and other negative emotional experiences (see also Chorpita & Barlow, 1998). However, the extant research base has been limited in that the majority of prior research on the relation between family dysfunction and anxiety has been based on cross-sectional studies (Spokas, Rodebaugh, & Heimberg, 2008; Yahav, 2007), with a paucity of longitudinal studies reported in the literature.

The extant research on the role of the family in the development of anxiety in adolescents has also been limited because previous research has focused mainly on the direct effects of family dysfunction, with little attention being paid to elucidating indirect psychosocial influences. Thus, longitudinal investigations of possible psychosocial mediators that represent the mechanisms through which external, environmental experiences are translated into internal, psychological phenomena (e.g., anxiety) appear warranted.

The family environment as a key microsystem that not only directly influences adolescent internalizing and externalizing behavior problems, but it also indirectly influences behavior problems through the individual self-system (Chen & Luo, 2016). Self-esteem is one of the core components of the individual self-system. Self-esteem is affected by family factors as well as affects adolescents' emotional health (Chen & Luo, 2016; Harter, 2012). Based on the existing literature, we expected that self-esteem would mediate the association between family dysfunction and anxiety among adolescents.

Chinese students spend longer school hours during adolescence than at earlier ages, which yields more interactions with peers and teachers, as well as heavier schoolwork burdens (Hofferth & Sandberg, 2001). These increases can expose students to greater interpersonal and/or academic stress. Consistent with this notion, Xu and Deng (2016) found that interpersonal stress and academic stress were the most commonly reported negative features of Chinese students' lives in middle school, both of which can lead to the development of adolescents' anxiety. Furthermore, previous research has suggested that under conditions of troubled interactions with peers and teachers and academic stress, adolescents experiencing higher levels of family dysfunction experience more negative emotions and behavior (Jin, 2005; Zhang, 2015). Thus, perceived school stress would be expected to moderate the direct link between family dysfunction and anxiety.

From a developmental-contextual perspective, developmental outcomes in adolescence can be explained by the interplay between social contexts and the individual characteristics of adolescents (Lerner & Castellino, 2002). Previous studies have revealed that adolescents' perceptions of school climate indirectly influenced individual differences in adolescent outcomes (Loukas & Murphy, 2007). For example, Loukas and Robinson (2004) found that perceptions of a positive school climate protected at-risk adolescents from experiencing elevated levels of emotional and behavioral problems. In addition, Xu and Deng (2016) found that perceived school stress mediated the relation between school climate and emotional problems. It thus seems reasonable to expect that school stress would moderate the influence of individual difference variables on adolescents' emotional problems. Moksnes, Moljord, Espnes, and Byrne (2010) found that after experiencing high levels of stress, lower self-esteem individuals showed more negative emotions and maladaptive behaviors than higher self-esteem individuals. Based on the aforementioned literature, we expected that adolescents' perceptions of school stress would moderate the direct and indirect links between family dysfunction and anxiety.

1.2. Family dysfunction and anxiety

The McMaster Model of Family Functioning (MMFF) suggests that a positive family environment is necessary for the healthy development of physical, psychological, and social aspects of family members (Epstein, Bishop, & Levin, 1978). The MMFF proposes that the family system is comprised of six key dimensions of functioning, including Problem Solving, Communication, Roles, Affective Responsiveness, Affective Involvement and Behavior Control (Epstein, Baldwin, & Bishop, 1985). Family dysfunction refers to a family system that does not facilitate appropriate functioning in one or more of the six dimensions (Mousavi, 2004).

Numerous studies have demonstrated that family dysfunction is a major risk factor in relation to adolescents' anxiety, especially students in early puberty, whose need for autonomy has been awakened, leading to more conflict with their parents (Dooley, Fitzgerald, & Giollabhui, 2015; Fang, 2005). For example, Suveg, Zeman, Flannery-Schroeder, and Cassano (2005) found that parental discouragement of emotional expression has been found to be associated with higher levels of anxiety in children. Moreover, according to family function theory (Miller, Ryan, Keitner, Bishop, & Epstein, 2000), the quality of the family environment, parental over-control, and the relations between parents and children have been associated with the formation of anxiety. In addition to such direct associations, a series of studies have further identified mediators to explain underlying mechanisms in the link between family dysfunction and anxiety (Wu, 2012).

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