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Parenting Styles, School Connectedness and Mental Health among Adolescents in Selangor, Malaysia

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Abstract

Adolescents are one of the largest groups that suffered from mental health problems in Malaysia. Since parents and school are vital figures in the development of adolescents, this study aimed to determine the relationship between parenting styles and school connectedness with mental health among adolescents in Selangor. The School Connectedness Scale (Jose, Ryan & Pryor, 2012), Parenting Style Scale (Gafoor & Kurukkan, 2014) and Warwick-Edinburgh Mental Well-being Scale (WEMWBS) (Tennant et al., 2007) were employed to assess the research variables. This cross-sectional study was conducted on 476 adolescents adopting a cluster random sampling method. The study revealed that responsive parenting style, control parenting style and school connectedness are positively correlated to mental health. However, the mental health level appeared to show no difference between male and female adolescents. The study findings also indicated that school connectedness is the strongest predictor in determining the mental health of adolescents. In sum, adolescents with a high level of perceived control parenting style and school connectedness were likely to have better mental health state. This study assists in dispensing a deeper understanding of contributing factors (i.e. parenting styles and school connectedness) as a vital role in the developmental process of adolescents' mental health.

Introduction

Mental health is one of the most important issues being debated now in the world. According to global statistics, a large amount of the world population suffered from mental disorders; depression (264 million), bipolar affective disorder (45 million) and schizophrenia (20 million) (World Health Organization, 2019). The latest statistics provided by the Institute for Public Health (2017) showed that mental illness is ranked as the second-highest health problem in Malaysia in which every one out of three people in Malaysia suffers mental illness. The seriousness of this issue agonizing people all over the country as it somehow impacts social peace and well-being.

Mental health might be affected by various aspects such as family emotional bonding, peers influence, home environment, school environment, religious belief and economic status. Bronfenbrenner (1994) explained his Ecological Systems Theory that among the five systems, the microsystem is the smallest and nearest system or environment to the child which consists of family, peers and school. The child will be most influenced by the interaction that he has with his parents and family members. Bandura (1971) strengthens this idea with his Social Learning Theory that posits children observe and imitate influential models such as parent behavior in their social environment. This explained that the behavior of parents in practicing parenting could be imitated by their children in dealing with daily life.

Parents are the essential socializing agents in the early stages of children's life which later will develop their personality and skills (Maccoby, 1992). Different patterns of parenting styles affect the child's development in various aspects such as self-esteem, personality, emotional and behavioral outcomes (Othman & Khairollah, 2013; Hoskins, 2014; Rosli, 2014). This is due to the value and principle practiced by the parents in nurturing their children such as discipline, warmth, trustworthiness, demandingness, and supportiveness. For instance, based on the previous study the Authoritarian (high control and low responsiveness) parenting style effectuated adolescents to poor social skills, low level of self-esteem and high level of depression which could bring to other psychological consequences in later stages of life (Hoskins, 2014).

In a different context, school is believed to be the institution that has direct involvement with adolescents which may affect their mental health and social development (Marin & Brown, 2008). School connectedness is elucidated as a student's belief toward the care of adults and peers in the school about their learning also about them as individuals (Centers for Disease Control and Prevention, 2009). The findings suggested that school connectedness is an important protective factor to reduce the student's engagement in adverse activities including substance use and violence. School connectedness is also implied to shield adolescents with numerous environmental risks from violent and nonviolent offending, and the influence of delinquent peers which indirectly protecting them from the negative developing environment (Sprott, Jenkins & Doob, 2005). Besides, statistics showed that adolescents are the largest sufferer among 424,000 children having mental health problems in this country (Institute for Public Health, 2020). This survey emphasized peer problems as a major contributor to this issue which explained the significance of school connectedness in addressing the mental health problems among adolescents. In the long term period, school connectedness is ascertained to reduce poor health outcomes later in adulthood life including emotional distress and probability of suicidal ideation (Steiner et al., 2019).

Even though a huge number of adolescents are reported to suffer from mental health problems, studies regarding adolescents' mental health in this country are somewhat neglected. The scarcity of studies regarding the association of parenting styles and school connectedness with the mental health of adolescents in Malaysia has urged this study to be embarked on. This is to benefit the related parties to employ the study findings as a foundation to implement intervention programs on enhancing the mental health of adolescents to ensure the well-being of these future leaders and generations. Considering the importance of family and school constitution on adolescents, this study focuses on

determining the parenting styles and school connectedness impact on the adolescents' mental health.

Methodology

Research Design and Sampling

A correlational research design was adopted to conduct the study. Self-administered questionnaires were used to obtain quantitative data related to the respondents' background and the variables of the study which were parenting styles, school connectedness and mental health. The present study applied cluster random sampling to select the sample that was secondary school students. Cluster random sampling is a two-stage sampling; in which the first stage was conducted by selecting clusters (districts) randomly from the target population, the second stage is where the sample of elements (secondary schools) was randomly chosen from the selected clusters. 476 respondents of secondary school students were participated in this study considering limitations from the authorities.

The current study was carried out in four secondary schools in Selangor. Institute for Public Health (2017) reported in the National Health and Morbidity Survey that Selangor is the second-highest ranked state in the anxiety issue and the highest prevalence state with stress and depression issues. The respondents of this study consist of 476 male and female secondary school students aged between 13 to 15 years old selected through cluster random sampling technique.

Instrumentation and Data Collection

A set of bilingual Malay-English versions of the self-administered questionnaire which comprised 4 parts: respondent's background, parenting styles, school connectedness, and mental health was used for data collection. The questionnaires were distributed to the respondents with the assistance of the school teachers.

Mental health. The revised version of Warwick-Edinburgh Mental Well-being Scale (WEMWBS) by Tennant and colleagues (2007) was used to measure the mental health level of the respondents aged above 13 years old. The scale consists of 14 items that measure the mental health of the respondent. The respondents were asked to respond using 5 point scale in which each point brings different frequency ranges from 1 (none of the time) to 5 (all of the time). The reliability value for the present study is 0.844.

Parenting Style. The Parenting Style Scale by Gafoor and Kurukkan (2014) was used to measure the respondent's parenting styles. It consists of 38 items that measure the levels of parental responsiveness and control towards their children. The respondents were required to respond to each of the items based on how the parents deal with them. The response was rated from 1 (very wrong) to 5 (very right). The reliability test for the present study resulted in a 0.949 value of Cronbach's alpha which indicated the high quality of scale in measuring the parenting style perceived by students.

School Connectedness. The School Connectedness Scale (Jose, Ryan & Pryor, 2012) was used to measure the school connectedness level perceived by the respondents. This scale consists of 6 items that assess the student-teacher relationship and sense of school community. These

6 items were being scored using 5-point scale of agreement ranges from 1 (strongly disagree) to 5 (strongly agree). The reliability value for the present study is 0.811.

Data Analysis

The data were analyzed by using Statistical Package for Social Science (SPSS) Version 22.0. There were three types of data analysis were used to analyze the obtained data. Firstly, the univariate analysis includes descriptive statistics such as percentage, mean, standard deviation and frequency, which are used to explain the demographic characteristics of the respondents (age and gender), parenting styles (responsive and control), school connectedness and mental health level of the respondents.

Secondly, a bivariate analysis was Pearson's Correlation and t-test. Pearson's Correlation was used to determine the significant relationship between two variables while t-test to determine the significant difference between the two studied variables. Lastly, the multiple regression analysis used to determine the factors uniquely predict the adolescents' mental health in this study.

Results of Analysis

Relationship between Parenting Styles and School Connectedness with Mental Health

Based on Table 1, the results presented that responsive parenting style was positively correlated to the mental health of the respondents (r = 0.418, p < 0.01) which explained an increase in the level of responsiveness in parenting practices lead to the higher level of mental health. On the other hand, the control parenting style was expressed to be positively associated with the mental health of the respondents in this present study (r = 0.508, p < 0.5080.01). This shows a higher level of control in parenting practices could promote the level of mental health of adolescents. Whereas, school connectedness was positively associated with the mental health of the respondents (r = 0.486, p < 0.01). The positive association specified that the school connectedness level increases along with the increment of the level of mental health. This explained that adolescents with higher school connectedness will acquire a better level of mental health.

Table 1

Variable	Mental health		
	r	р	
Responsive parenting style	.418**	.000	
Control parenting style	.508**	.000	
School Connectedness	.486**	.000	

Correlation between Parenting Styles and School Connectedness with Mental Health

Differences in Mental Health between Male and Female Adolescents

Table 2 shows the findings on the difference in mental health between male and female respondents. The result from the table shows that level of mental health was found to show an insignificant difference between male and female respondents (t = 2.56, p > 0.05).

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Differences in mental health between male and female respondents							
Variable	Mean		t	р			
	Male	Female					
Mental health	50.73	48.71	2.56	0.81			

Table 2

Predictors for Mental Health

Table 3 presented the findings on determining whether the factors in this present study uniquely predict the respondents' level of mental health. Based on the statistical results in Table 3, control parenting style and school connectedness were found to be significant predictors of mental health (F = 90.338, p < 0.05). Concisely, adolescents who perceived high control parenting style together with high school connectedness level were likely to have a higher level of mental health. The school connectedness in the present study appeared to be the strongest predictor of the mental health level. The adjusted R square indicated that 36.1% of the variance in mental health was explained by the model.

Multiple regression for mental health					
Variable	Mental health				
	В	SE.B	Beta, β		
Parenting style					
Responsiveness	.013	.023	.033		
Control	.137	.022	.348		
School connectedness	.689	.079	.349		
Adjusted R ²	.361				
F	90.338				

Table 3

Note: Mental health F(3,472) = 90.338, $p \le 0.05$

Discussion and Conclusion

In essence, the present study focused to determine the relationship between parenting styles (i.e. responsive and control) and school connectedness with the mental health of adolescents in Selangor. The results indicated that both responsive and control parenting styles were positively correlated with mental health. This explained that parenting styles with higher responsiveness and control promote the mental health of adolescents. These findings supported the concept of an authoritative parenting style that practices both a high level of responsiveness and control towards the children.

The current results are also parallel to the previous findings that revealed the positive association between authoritative parenting style and mental health (Zare, Bakhshipour & Hassanzadeh, 2014; Khodabakhsh, Kiani & Ahmedbookani, 2014). Also, an authoritative parenting style was found to be positively associated with psychological well-being {Formatting Citation}. Niaraki and Rahimi (2013) substantiated that adolescents raised by authoritative parents display better psychological health. Baumrind (1966) emphasized that these two elements (i.e. responsiveness and control) should be equally considered in applying the best parenting practices. Responsiveness and control in parenting incorporated affection, freedom and responsibility towards the children.

School connectedness was found to have a positive association with mental health in this study. In another term, an adolescent with a high level of school connectedness prone to have a better level of mental health. These current findings corresponded to the previous studies that suggested higher school connectedness levels promoted the level of mental health (Murnaghan et al., 2014; Oldfield, Humphrey & Hebron, 2016). Additionally, adolescents who feel more connected to the school were found to have a lower level of depressive symptoms, suicidal ideation, social anxiety along with higher self-esteem levels (Foster et al., 2017). This finding somehow depicted the positive effect of school connectedness as the most crucial protective factor in fighting depression (Lester & Cross, 2015). Apart from that, Murnaghan, Morrison, Laurence, and Bell (2014) revealed that a higher level of mental fitness in return is associated with higher school connectedness, creating a reciprocating cycle of advantages. In short, school connectedness plays a major role in protecting and improving mental health. Thus, society needs to concern about improving school connectedness levels to increase the well-being of an adolescent.

The t-test result showed that there was no significant difference in mental health between genders. Specifically, the mean score in mental health was not significantly different between male and female respondents. Nevertheless, the mean score for the level of mental health in males appeared to be higher than females. This was parallel to the previous studies that revealed male display higher level of mental health while the female has a higher risk of mental distress and anxiety (Institute for Public Health, 2017; Rezvan & D'Souza, 2017).

Multivariate analysis showed that only control parenting style and school connectedness were the significant predictors for the mental health of the respondents. Also, school connectedness was the strongest predictor for mental health followed by control parenting style. The finding indicated specifically that adolescents raised with high control parenting style together with high school connectedness tend to have a higher level of mental health. These findings supported the previous study that proved authoritative parenting was important to predict mental health (Khodabakhsh et al., 2014). However, the findings contrasted with the study by Lavasani, Bohanzadeh, Afzali, and Hejazi (2011) which found that authoritarian and permissive parenting style predicted the level of mental health. This variation in results might be influenced by other factors such as culture and socioeconomic of the study location. For instance, a particular parenting style might be a social norm that is practiced in a specific area which might not reflect their level of mental health.

Lester and Cross (2015) revealed that feeling connected to the school was a significant predictor of mental well-being. In line with that, school connectedness is identified to significantly predict the element of prosocial behavior in mental health (Oldfield, Humphrey & Hebron, 2016). Thus, school connectedness is one of the important elements assisting in buffering the vulnerability towards mental health risk as it is revealed that higher school connectedness is related to fewer symptoms of depression (Joyce & Early, 2014). Based on the results discussed above, school connectedness should be appraised in improving the mental health of adolescents as it is the strongest unique predictor in determining the level of mental health of adolescents in Selangor.

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INTERNATIONAL JOURNAL OF ACADEMIC RESEARCH IN BUSINESS AND SOCIAL SCIENCES

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