Prediction of Mental Health of students Based on their Parental Bonding

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Abstract

Mental health is a critical issue that has raised fundamental challenges. Attachment parenting (child care and protection methods) can be effective on the psychological stressors and their consequences; hence this study aimed to predict the mental health of university students based on their parental bonding (2015). In this correlational study, 300 Nursing and Midwifery students of Bushehr University of Medical Sciences were selected using census method. For data collection, Goldberg and Hiller Mental Health Questionnaire and Parenting Bonding Instrument were used. Data were analyzed thorough analytical and descriptive statistics using SPSS 19. All predicting variables of Attachment Parenting had a significant relationship with subjects’ mental health; mother’s care (p<0.01, β=-0.452) and father’s care (p<0.01, β=-0.370) had a more effective role in predicting students’ mental health. Attachment parenting patterns can help predict child’s mental health in adulthood. Hence, informing parents from the impact of Attachment Parenting patterns in childhood on adult’s mental health is essential.

Keywords: attachment parenting, university students, mental health;

1. Introduction

Students especially those in late adolescence and early youth who become college freshmen, experience abundant stressful factors threatening their mental health due to their shifting nature of life (Mohammadzade et al., 2013:800). The students should be adapted to their first experience away from home. Satisfactory academic progress and adaptation to new environment at the same time make them encountering with great mental pressure which is a consequence of educational affairs, financial difficulties, lack of social experience necessary to deal with shortage of time and resolving interpersonal conflicts (Naamdar et al. 2014: 147). Therefore the students’ vulnerability to diverse difficulties put them in the state of being affected by psychological problems which causes mental health disorders (Mohammadzade et al., 2013:801). Deprivation of mental health leads to cognitive, emotional and behavioral inconsistencies during youth stage which accordingly disturb individual performance as a life-lasting phenomenon (ShayanNejad, 2011: 2). Thus insufficient consideration to the vital issue of student’s mental health may results in fundamental challenges (Naamdar et al. 2014: 148). Several disappointing statistical figures underline the necessity of more serious attention to the young vigorously active population of community. Approximately 11% of whole diseases involve psychological disorders. An estimated 16% of prevalence of mental disorders is
reported amongst students. Moreover some studies indicate that only 2.49% of observed students did not suffer from any symptoms of depression (Naamdar et al. 2014:148).

Researchers have cited numerous factors generating mental disorders among which parental bonding plays a significant role (Bahreini et al. 2013: 7). Bowlby’s first statement in 1960 emphasizes the importance of effective social and psychological performance in children. His famous hypothesis of bonding states that individual’s low capacity to establish healthy relationship and mental disorders is rooted in insecure parental bonding and childhood experiences. Accordingly Ainsworth et al. defined three bonding styles: 1) secure bonding 2) avoidant insecure bonding 3) anxious-ambivalent insecure bonding (Berek, 2009). Following Bowlby, Parker, Tailing and Brown who were inspired by his assumptions introduced two aspects of parental bonding. The first is the care parental bonding which reflects a warm, close and sympathetic relation in contrast to a cold, rejecting and neglecting behavior. The second is a controlling bonding covering the level of control exerted by parents which, in the most severe cases, leads to lack of independence in child development (Parker et al., 1979: 8).

The term “bonding” points to the close and sympathetic relationship between parents and children. The manifestation of this bonding provides a safe and secure basis for child to explore and dominate his surrounding environment (Babli, 1980). This preliminary and basic bonding develops the child’s understanding and his participation in future relations (Stevenson, 2005:199).

This cognitive and emotional aspect which is in fact influenced by the quality and form of parental bonding, sustains its consequences on adult’s emotional and mental means of compatibility (Bretherton, 1985:4). For that reason some researchers propose that withdrawal in adolescence takes its roots in rejecting parental bonding experiences in childhood (Bartholomae, 1990: 149). They also believe the insecure parental bonding through the experience of feeling worthless make the person interpret his failures as deficiency and incapability which indirectly brings about mental disorders (Ditomaso et al., 2003: 305). Another study shows that high level of mother care guarantees the lower probability of attempting suicide among children (Hashimoto et al. 2014:2015). The study by Lima et al. (2010) proves that over-care and over-protection bonding instruments make the girls more sensitive and increase the rate of depression as well as low self-confidence compared to the boys (Lima et al. 2010: 383). Besides Avagiano and Zafirropoulo (2008) report that inadequate care parental bonding along with over controlling result in depression symptoms, lack of self-confidence, introversion and emotional instability in children (Avagiano et al., 2008: 261).However Gerotmol et al. came to different conclusion. They found that the sample groups receiving higher levels of care and attention exhibit much severe depression symptoms which are more evident among men compared to women (Gerotmol et al., 2010:22).

The parental bonding as a variable in personal tendencies plays determinative role in development of personality disorders (Ahmadi et al., 2013: 215). The people in fact put the first steps in the way to personal and social accomplishments under the influence of family environment. The kind of inner family relationship has crucial impact on future relationships and personal consciousness (ShayanNejad, 2011: 2). The importance of consequences arising from family training methods and parent-child relations and their impacts on mental health introduces them as valuable subjects for research studies. On the other hand, few studies investigated Iranian youth mental health based on their parental bonding. In addition, in contradiction to the results of these studies, debates about the long-term effects of parental bonding styles; make it necessary to develop more studies in this regard. This study aims at determining and predicting the mental health of students based on their parental bonding.

Methodology
The present study is a correlational research implemented during 2015. The research population includes the whole 300 students from Department of Nursing and Midwifery in Boushehr University of Medical Sciences in 2015. Being single, educational affairs and tendency to participate in research were inclusion criteria. Being married and declined to participate in study were among exclusion criteria.

Data collection lasted a month (October 2015) and each questionnaire was to be completed in 15-20 minutes. The data collected using two instruments. The first is a 28-item form on public health designed by Goldberg and Hiller (1979) through factor analysis method on MMPI-2. The questions investigate the mental status of individuals during the last month including several signs such as abnormal feelings and few aspects of observable thoughts emphasizing the current time and situation. The instrument begins with questions related to physical symptoms followed by psychiatric questions. The 4-point Likert scale is applied for each question. The total point varies from...
0 to 84 while the lowest point indicates the most satisfactory mental health status. The validity and reliability of this instrument (Cronbach Alpha Coefficient 0.83) has been formerly estimated and validated (Fathi Ashyani, 2009).

The second instrument was Parental Bonding Instrument for adults older than sixteen years old. The parental bonding instrument is graded with 4-point Likert scale. The instrument includes 25 questions: 12 questions are about care (point scale from 0 to 36) and 13 questions are about overprotection (point scale from 0 to 39). Higher points in overprotection aspect and lower points in care aspect refer to problematic bonding. The validity and reliability of this instrument (Cronbach Alpha Coefficient 0.79 to 0.88 for parent form) has been formerly estimated and validated (Zarqam et al., 2012: 50).

In order to observe the research ethics and according to Declaration of Helsinki, the required licenses are obtained and informed consent forms are fulfilled by students. Researcher explained to samples the purposes and applications of study, absence of necessity to inscribe the first and family name and also the confidentiality of information.

The collected data are analyzed by SPSS software, edition 19 by descriptive and inferential statistics. The descriptive statistics are applied to determine the demographic properties, mental health and type of parental bonding. The chi-square test is applied to determine the students’ mental health based on parental bonding. The linear regression test is sued to determine the predicative ability of parental bonding patterns to measure the students’ mental health.

1.2 Findings
The research includes the majority of women cases so that 240 students (80%) of total samples (300) were girls in 21-25 age range. Two hundred thirty seven students (79%) were undergraduate and 159 (53%) were nursing students. Besides the majority of 236 students (78.7%) live with their families and 262 students (87.3%) are dormitory residents.

The students in this research were in favorable mental health status (23.52). The average points are in low distance from father-child instrument (25.34) and mother-child instrument (26.24) among students. The findings also indicate that father-child instrument (13.67) and mother-child instrument (13.81) are very close to each other among students. Table 1 shows the samples’ mental health based on parental bonding instruments. It is evident that the individuals with high level of parenta...
Table 2: Correlation Coefficient between Prediction Factors and Mental Health

<table>
<thead>
<tr>
<th>Prediction Variable</th>
<th>Mental Health (Criterion Variable)</th>
<th>R</th>
<th>P</th>
</tr>
</thead>
<tbody>
<tr>
<td>Mother care</td>
<td></td>
<td>0.385/0</td>
<td>0.000/0</td>
</tr>
<tr>
<td>Father care</td>
<td></td>
<td>0.374/0</td>
<td>0.000/0</td>
</tr>
<tr>
<td>Mother care</td>
<td></td>
<td>0.230/0</td>
<td>0.001/0</td>
</tr>
<tr>
<td>Father care</td>
<td></td>
<td>0.000/0</td>
<td>0.187/0</td>
</tr>
</tbody>
</table>

Table 3: Results of multiple regression analysis related to predictor variables with mental health using stepwise model

<table>
<thead>
<tr>
<th>Criterion Variable</th>
<th>Statistical Indicator</th>
<th>MR</th>
<th>RS</th>
<th>F</th>
<th>P</th>
</tr>
</thead>
<tbody>
<tr>
<td>Regression Coefficient</td>
<td>Intercept</td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Predictions</td>
<td>1</td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Mental health</td>
<td>1</td>
<td>0.752/0</td>
<td>0.148/0</td>
<td>7.52/51</td>
<td>0.000/0</td>
</tr>
<tr>
<td>P</td>
<td></td>
<td>0.55/42</td>
<td>2</td>
<td></td>
<td></td>
</tr>
<tr>
<td>β</td>
<td></td>
<td>0.240/0</td>
<td>0.175/3</td>
<td>0.002/0</td>
<td></td>
</tr>
<tr>
<td>t</td>
<td></td>
<td>0.452/0</td>
<td>0.168/0</td>
<td>0.054/30</td>
<td></td>
</tr>
<tr>
<td>P</td>
<td></td>
<td>0.370/0</td>
<td>0.000/0</td>
<td></td>
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</tr>
</tbody>
</table>
Discussion
This research aims to determine and predict the level of students’ mental health based on their parental bonding. The samples were in satisfactory mental status. The average points of mother care and father care aspects are not in far distance from each other which indicates that average points of mother care and father care aspects are very close to each other. Almost half of the study population experienced high level of mother care and the second half experienced lower level of attention. According to the research findings, the majority of students experienced high level of parental protection which signifies the problematic style of parental bonding in protection aspect. The students with higher level of parental care and lower level of protection exhibit exceeding mental health. The findings of this research are consistent with Avagiano and Zafiropoulo (2008: 261) and Hashimoto et al. (2014:2015). The analysis should also consider the cultural differences especially between traditional and modern societies.

The impact of cultural differences on child understanding of diverse parental bonding is observed in Gromol et al. study. It was implemented in 2010 with the purpose of investigating the parental bonding and self-esteem as strong predictors of depression symptoms on medical students and bears results different from present study. The samples were individuals suffering from depression who attempted suicide. The results show that the group receiving higher level of care reveals more severe depression symptoms which were more evident in men compared to women (Grotmol et al., 2010: 22). Similarly, the study by MohamadBozlanMostafa et al., (2010) which aimed to investigate the parental protection, personality, self-efficacy and depression among medical students came to the conclusion that there exist a negative relation between parental protection, extroversion, conscience and self-efficacy with depression and is consistent with the results of present study (Mostafa et al., 2010: 419).

The linear combination of predictor variables also reports 16% of mental health variance. Moreover the mother and father care, among all predictive variables, play more significant role in mental health. This finding is inconsistent with results of the study by EshaqRahimianBogard et al., (2008) on adults who experienced earthquake crisis. The study aimed to study the relation between parental bonding and mental health of adult survivors in Bam regions damaged by earthquake. They found that there is a positive significant correlation between secure bonding and mental health. However there is a negative significant correlation between rejecting and ambivalent bonding patterns and mental health. The results also show that secure, ambivalent and rejecting bonding patterns are able to significantly predict the mental health (RahimianBogard et al., 2008: 27). The study implemented by Mohebi (2011) with the aim of investigating the relations between bonding style and social protection on nurse mental health in state hospitals in Tehran shows that, among all the predictive variables of bonding style and social protection, the only bonding style are able to predict the nurse mental health which is in consistent with above-mentioned results (Mohebi, 2011: 1).

Conclusion
The findings of this research show that students with higher level of care and lower level of parental protection exhibit better mental health. Among the predictive variables, mother and father care are more effective to predict the mental health. The conclusion is that attention to parent-child relationship, educating parents of the constructive and destructive impacts of each behavioral pattern and public information on adjustment of parent-child relationships may improve the adults’ mental health that are the potential future promises of our country.

Like all other researches, we confronted some limitations. This study performed in southern of Iran. The cultural difference should be considered in generalizability the present study results to other cultures and environments. Also a qualitative research may present deeper information regarding the impacts of parents’ behavioral patterns on mental health of their children. It is suggested that further studies consider the impacts of parents’ behavioral patterns on mental health and also social and behavioral performance of children in other age group.

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References