

**Research Article**

## PARENTING AND MENTAL HEALTH: WHERE HAVE WE GONE WRONG

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### ABSTRACT

Parents play an irreplaceable role in the lives of their children. This vital relationship positively impacts a child's physical, mental, and emotional well-being. Contemporary research in the biological and social sciences has greatly emphasized the role of faulty parent child interaction patterns in the genesis of the abnormal behaviour exhibited by human beings. A variety of psychiatric disorders like schizophrenia, bipolar disorder etc. has been causally linked to poor or faulty parenting. This review focuses on patterns of faulty parenting and its impact on mental health.

**Key Words:** Parenting, Communication, Psychiatric Disorders

### INTRODUCTION

Parenting is a difficult job and a juggling act no matter what. No parent is perfect and they are likely to make some mistakes, both big and small, while they raise their children. This is just a normal part of parenting and isn't likely to have lasting psychological effects on children, as long as such mistakes are not repeated frequently. However, consistently poor parenting can have negative consequences during childhood and beyond.

Excessive levels of stress, resulting from suboptimal parenting in the early years, can seriously disrupt the child's developing nervous system and stress hormone regulatory systems, damaging the developing brain architecture and chemistry (Shore, 2004). These effects influence the child's neuro endocrine response to threat, resulting in infants who are 'insecurely attached' to their caregivers and at increased risk of problems with peer and intimate relationships (Sroufe, 1995) of future mental illness and of abnormalities of cardiovascular and immune functioning (Shore, 2004; Sroufe, 1995; Repetti *et al.*, 2002; Surtees *et al.*, 2003; Luecken and Lemery, 2004; Bell and Belsky, 2007; Weich *et al.*, 2009).

Genetic studies have demonstrated that the quality of parenting influences the phenotypic expression of individual genes which carry risk for mental disorders (Perry, 2002; Brown and Shaw, 2004).

#### **Patterns of Faulty Parenting**

Several types of specific parent child patterns appear with great regularity in the background of children who show emotional disturbances and other types of family development. Some of these patterns are:

**Overprotection:** Maternal overprotection or "MOMISM" strangulates a child's growth. Overprotective mothers may watch over their children constantly, protect them from the slightest risk, overly cloth and medicate them and take decisions on their behalf at every opportunity and often includes excessive physical contact. Such maternal reactions appear to represent a compensatory type of behaviour in which the mother attempts to gain satisfaction through her contact with the child that normally should have been obtained in her marriage. Such children are denied the much-needed opportunities for reality testing and development of essential competencies. Consequently they become overanxious and shy or may have excessive fears or throw temper tantrums.

Jenkins *et al.*, (1968) found that there were youngsters characterized, as "over anxious" were likely to have an over familiarizing over protective mother (Jenkins *et al.*, 1968).

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**Restrictiveness:** The restrictive parents rigidly enforce strict rules and standards and give the child little autonomy for growing in his own way. While restrictiveness may foster well-controlled, socialized behaviour, but it also tends to nurture fear, dependency, submission, repressed hostility and some dulling of intellectual striving.

**Rejection:** It is manifested in various ways like – by physical neglect, denial of love and affection, lack of interest in the child's activities and achievements, failure to spend time with the child, and lack of respect for the child's right and feelings as a person. In a few cases it also involves cruel and abusive treatment. Studies show that parental rejection tends to foster low self – esteem, feeling of insecurity and inadequacy, retarded conscience and general intellectual development, increased aggression and inability to give and receive love. It has been seen that a large proportion of these parents have themselves been the victims of parental rejection.

(a) Maccoby and Levin (1957) found cold and rejecting mothers who at that time reported, persistent bed-wetting, aggressiveness and slow conscience development in their children (Maccoby and Levin, 1957).

(b) Hurley *et al.*, (1965) found parental rejection to be associated with diminished intelligence during the early school year. He concluded that an unpleasant emotional climate and discouragement had a general inhibiting and suppressing effect on child's intellectual development and functioning (Hurley *et al.*, 1965).

(c) Pringles *et al.*, (1965) concluded that many children had serious difficulty, in give and take of affection due to parental rejection (Pringles *et al.*, 1965).

(d) Pozmanski Found parental rejection to be key factor among children suffering from excessive fears and aggression (Poznansky, 1973).

**Over Permissiveness and Indulgence:** It includes allowing too much freedom of behaviour. Sometimes one or both the parent caters to the child's slightest whims and in doing so fail to teach and reward desirable standards of behaviour. Overly indulged children are characteristically spoiled, selfish, inconsiderate and demanding. High permissiveness and low punishment at home correlates positively with antisocial and aggressive behaviour. Such children are often rebellious.

**Unrealistic Demands:** Some parents place excessive pressures on their children to live up to unrealistically "high standards. Under such sustained pressure there is little room left for spontaneity or development as an independent person. No matter how hard the child tries, he seems to fail in the eyes of his parents and ultimately in his own eyes. That leads to pain, frustration and self-devaluation. Too often the parents don't take into consideration the capabilities and temperament of each child. In other instances parental demands are unrealistically low and parents don't care what the child does as long he stays out of trouble. It was found that the children of such parents were significantly lower in both achievement and self-esteem (Leiblich, 1967; Cooper, 1967).

**Faulty and Inconsistent Discipline:** Parents have been particularly confused during recent years about appropriate forms of discipline. Inconsistent discipline makes it difficult for the child to establish stable values for guiding his behaviour. They then become more resistant to punishment and to extinction of their aggressive behaviour. There is high correlation between consistent discipline and later delinquent and criminal behaviour. At present discipline is thought of more positively as providing needed structure and guidance for promoting healthy growth on the part of the child. The parent should make it clear that it is the child's behaviour, which is disapproved, and not the child as a person.

**Communication Failure:** Parents can discourage a child from asking questions and in other way fail to foster the "information exchange" essential for healthy personality development for e.g., helping the child develop a realistic frame of reference and essential competencies. Some parents are too busy with their own concerns then to listen to their children and try to understand the conflicts and pressures they are facing. As a consequence, these parents often fail to give needed support and assistance during crisis periods. Other parents may have forgotten that the world often looks different to a child and that rapid social changes can lead to a communication gap between the generations. One extreme pattern of

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pathological communication that conveys contradictory message has been referred by Bateson (1960) as the double bind. Parents may convey one message by their words and another by their behaviour. Another damaging communication pattern involves contradicting or undermining the child's statements and conclusions, so that he is left confused and devalued as a person.

**Undesirable Parental Models:** Since children tend to observe and imitate the behaviour of their parents, it is apparent that parental behaviour can have a highly beneficial or detrimental effect on the way a youngster learns to perceive, think, feel or act.

- Parents become undesirable models if they have faulty reality and value assumptions. A parent who is emotionally disturbed, addicted to alcohol or drugs, or otherwise maladjusted may also serve, as an undesirable model.

- Neurotic behaviour in the mother might lead to over anxious neurotic child.

Abusers tend to come from families in which they themselves have been rejected and mistreated.

Undesirable parental models are an important reason why mental disorders, delinquency, crime and other forms of maladaptive behaviour tend to run in families.

### **Faulty Parenting and Psychiatric Disorders**

#### **Schizophrenia**

**Double bind (Bateson et al., 1956):** It emphasizes on giving the child incompatible messages. For e.g. a mother may overtly tell her child to come to her, whilst conveying by manner (avoiding a physical embrace) and tone of voice that she rejects him. The theorists hypothesized that repeated exposure to such a dilemma generates or aggravates the schizophrenic state.

**Schism and skew (Ruth and Theodore, 1957):**

They systematically studied the characteristics of schizophrenic families using a psychoanalytic oriented psychodynamic perspective. Their main emphasis was on the triadic and dyadic relationships in the families. In one type of family, there is a prominent power struggle between the parents, and one parent gets overly close to a child of the opposite sex. In other type of family, a skewed relationship with one parent involves a power struggle between the parents and results in one parent yielding to other's eccentricities.

**Pseudomutuality and Pseudohostility (Lyman Wynne and Margaret singer, 1958):** They described families in which emotional expression is suppressed by the consistent use of a pseudomutual or pseudohostile verbal communications. That suppression results in the development of verbal communication that is unique to that family and not necessarily comprehensible to anyone outside the family, problems arise when the child leaves home and has to relate to other people.

Jacob concluded "schizophrenic families communicate with less clarity and accuracy than do normal families (Jacob, 1973).

**Communication Deviance:** It is a measure that reflects the inability of the parent to establish and maintain a shared focus of attention during transaction with the child. The studies by Doan west, Goldstein, Rodnicle and James have found communication deviance to be characteristic of parents of schizophrenics and in one study to be predictive of onset of schizophrenic spectrum disorders (Doane et al., 1981).

**Affective Climate (Nathan Ackerman 1969):** In schizophrenic families, the climate and emotional interchange at the surface represent a sharp contrast with what goes on emotionally in depth. On the level of family façade is the impression of stability, internally a quality of affective deadness persuades the family, the interpersonal relationship lack vitality, are robot like and ritualized (Acherman, 1970).

**"Schizophrenogenic" Mother:** Schizophrenic mothers have been characterized as rejecting, dominating, cold, over protective, and impervious to the feelings and needs of others. While verbally such a mother may seem accepting basically she rejects the child. At the same time she depends on him rather than her spouse for her emotional satisfaction and feeling of completeness as women. For this reason she tends to dominate, possessively over protect, and smother the child keeping him dependent on her. The child is

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deprived of a clear-cut sense of his own identity, distorting his views of himself and his world, and causing him to suffer from pervasive feelings of inadequacy and helplessness.

#### **Mood Disorders**

Psychoanalysts have suggested that childhood deprivation of maternal affection through separation or loss predisposes to depressive disorders in adult life. There is more support for the proposal that depressive disorder in later life is associated with parental separation; the main factors here appear to be parental discord.

Increased affective morbidity in adult life whereas children separated from their parents as a result of marital problems or divorced subsequently have increased rates of depression (Tennant, 1998). Patients with severe depressive disorders, patients with neurotic depression remember their parents as having been less caring. Both none caring and overprotective parenting styles are associated with non –melancholic depression in adult life (Parker, 1970).

Mothers with post natal depression may manifest a rearing style characterized by neglect and emotional indifference. This could lead to long term deleterious effects on self-esteem and attachment style in child increasing the risk of depression in subsequent generation.

#### **Childhood Disorders**

Many investigations document that antisocial behaviour in parents is often associated with externalizing disorders in children such as delinquency or conduct disorder (Blanc and Loeber, 1993).

### **CONCLUSION**

The sincerity of parents in discharging responsibility towards children, understanding their needs and interests, creating a nurturing and stimulating home environment, developing an effective communication pattern and healthy exchange of emotions will reflect in the development of child as a healthy human being later on. Parenting is hugely important to children, parents and society. Parenting is therefore coming to be recognized as one of the most important remediable determinants of future health, particularly mental health.

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