Parent-Child Relationship and Depression among Adolescents in Selangor, Malaysia

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Abstract: *Depression is one of the internalizing problems that often goes unnoticed. It is commonly known as simply sadness and disappointment to life events encountered. Present research study aimed to investigate the relationship between parent-child relationship and adolescent depression.Results revealed that gender had positive significant relationship with adolescent depression. Family monthly income, father-child relationship and mother-child relationship were found to have negative significant relationship with adolescent depression.*

Keywords: *Adolescents, mother-child relationship, father-child relationship, depression*

I. Introduction

Emotional instability peak during adolescence (Whitlock & Schantz, 2008). It was due to adolescence's developmental struggling, including changes in puberty, physical, cognitive as well as emotionality (Nilzon& Palmerus, 1997). It is usually associated with poor adjustment and risk for future development (Santrock, 2012). Depression roses during adolescence (Davis-Kean, 2005). However, depression often goes unnoticed. Depression is an internalizing problem, with symptoms like fatigue, sleeping problem, loss of appetite, lack interest, disturbance thought and depressed feeling (Baron & Peixoto, 1991). The symptoms would lead to other problem, including lower grades, dropping from school, low self-esteem as well as externalizing problems (Dumont & Provost, 1999). It predicts adulthood depression too (Gayman, Turner, Cislo, & Eliassen, 2010).

In Malaysia, adolescents in between the age of 16 through 24 years old had recorded high prevalence in depression (National Mental and Morbidity Survey, 2011). There are numbers of factors contribute to adolescence depression, they are family factors, poor peer relationship, personality and cognitive (Eley, Liang, & Plomin 2004). Among all, family factors was the common variable used in understand adolescence depression. For instance, adolescents with depressed parents at greater risk to depression. Other than that, parents' marital conflict and emotional unavailable parents put adolescents at risk in developing depression based on the evidence from previous studies.

Parent-adolescent relationship is one of the factors leading to adolescent depressive. Parent-child relationship referring to parental availability, open communication, trust and support. Greater bonding between parents and child predict in lesser depressive symptoms (Heaven, Newbury, & Mak, 2004) and also associated with decreasing in externalizing problems (Briere, Archambault,& Janosz, 2013). Adolescence is in a period in facing with acute stress and parents are primary source of support and show understanding towards adolescents in helping to overcome challenges and develop positively. Nevertheless, Malaysian parents tend to employ harsh yet demanding parenting towards their offspring. That is, Malaysian parents set high expectation and strict rules on offspring and expecting full obedience from offspring according to Baumrind parenting styles (Baumrind, 1967). This parenting style is contradicting with the role of protective factor of parents where to provide support to their adolescence offspring.

Adolescent girls had higher rate of depression compared to the boys. The gender differences in adolescent depression suggested adolescent girl tend to develop negative inferences (McGuinness, Dyer & Wade, 2012) and amplify it. Girl also have the tendency to ruminate their depressive feelings (Nolen-Hoeksema & Girgus, 1994). Besides, girls developed depressive feeling more on the issues like body image dissatisfaction, self-disappointment, feelings of failure, difficulties in work and concentration, sadness, sleep problem and fatigue as well as health related worries. While, boys' were more on morning fatigue and mood along with anhedonia (Bennett, Ambrosini, Diana, Metz, & Rabinovich, 2005). On top of it, hormone change during puberty in girls was another possibility in placing girl adolescents vulnerable to depression (Hankin, 2006).Adolescents' age was found to associate with depression as well. As adolescents undergo individualization when they stepped away from childhood, they had to face a piling up of life events challenges. Older adolescents had greater depressive symptoms (Hamza & Willoughby, 2011). Cognitive immaturity

explained greater depressive symptoms in younger adolescent, 14 to 15 years old to be specifically that recorded higher prevalence of depression (Aunola & Nurmi, 2005).

Family monthly income could affect adolescents' depressive symptoms. Adolescents from lower social economic status or characterized with lower family monthly income experienced greater depression compare to adolescents from middle or higher social economic status families (Melchior et al., 2010; Goodman et al., 2003). It was due to adolescent from lower family monthly income reside in disadvantage neighborhood, which covers adverse environment and high crime contributed to adolescence depression (Tracy, Zimmerman, Galea, Mccauley, & Stoep, 2008). Parent's age was one of the family background which present research would like to look into.

Family factors increase depressive symptoms in adolescents. Not to mention, the relationship with parents, communication with parents and parental warmth were associated with adolescent depression. The association was explained by adolescent who had intimate relationship with parents reported to experience lesser depressive symptoms. Parental warmth was negatively associated with adolescents' depression (Stice, Ragan & Randall, 2004). Conflict family interaction was negatively correlated with depression in adolescents (Smetana & Daddis, 2002; Kerr, Stattin & Engels, 2008). Conflicting is characterized by less supportive related to adolescents' depression. Basically, absence of support and parental warm resulted in low bonding in parent-child relationship. Adolescents are prone to experience high depressive symptoms as adolescents grew in adverse family background (Sheeber, Hops & Davis, 2001). Parent-child relationship also characterized by parental responsiveness. Adolescent with parents who less likely to show responsive experienced high level depression (Boughton & Lumley, 2011).

The Present Study

Family is the environment system which adolescent spent most of their time with. The interaction between the family and adolescents is influential in predicting adolescent depressive symptoms. Bronfenbrenner's Ecological System Theory which developed by Urie Bronfenbrenner explained that individual development was influenced by the systems they encountered, no matter actively or passively. There are five systems, namely microsystem, mesosystem, exosystem, macrosystem and chronological system (Bronfenbrenner, 1979). Microsystem is the direct environment which individual interact with (Bronfenbrenner, 1979). Family, teacher, friends and neighbors are examples of the microsystems. The interaction between parents and adolescent could protect adolescent from poor outcome (Frojd, Kaltiala-Heino, & Rimpela, 2007). For instance, parent-child relationship found to relate with adolescents' depression (Moore, Kinghorn & Bandy, 2011). Poor parent-child relationship usually characterized by lacking of trust in between parents and child (Frojd et al., 2007). Child will develop and thrive if the parent-child interacts positively. Noteworthy to take note that, adolescents started detach from their parents. The shifting from dependent to independent influences interactive pattern between parents and adolescent as well as the dynamic of family system as a whole (Bowen, 1976). Hence, close bonding in parent-child relationship performed as secure base for the child to live their life with the support of their parents. Present study adopts the concept of Ecological System Theory in developing framework of the study, focusing on microsystem. The present study intended to look into the association between parent-child relationship,adolescent personal characteristics and family background with adolescent depression among adolescents in Selangor, Malaysia.

II. Method

Participants

There were 354 adolescents who residing in Selangor participated in the study. The adolescents were aged between 13 to 18 years old (M = 15.96 years old, SD = 1.24). The present study utilized multistage cluster sampling technique to recruit the participants. Most of them were male adolescents (62.3%). There were 48.2% of adolescents reported that their family monthly income is lesser then RM2500 (M = RM2239.87, SD = 1706.34). Adolescents who participated in present study have 87.5% of father (M = 47.6 years old, SD = 6.62) and 92.6% of mother (M = 44.0 years old, SD = 5.34) aged between 36 through 55 years old.

Procedure

Prior to data collection permission from Ministry of Education Malaysia, Selangor Educational Department, Ethics Committee for Research involving Human Subjects of Universiti Putra Malaysia (JKEUPM), and school principals were approved. Adolescents respond to the questionnaire after being briefing about the present study as well as private and confidential issues in the classroom. Adolescents handed-in back to the researcher before leaving the classroom.

Measures
The questionnaire in this study comprise of adolescents personal characteristics, family background and measures as follow.
Family Attachment and Family Bonding Scale:This scale developed by Michael in year 2002 was used to measure on both father-child and mother-child bonding. The questionnaire scale was rated by adolescent. There are 5 items of 3 likert scale, ranging from 1 (never true) to 3 (always true). The items cover "I share my thoughts and feelings with my parents" and "My parents tell me they are proud of me for things I have done". In this study thereliability for this scale for mother is 0.70 and father is .79.
Children Depression Index:Children Depression Indexwas used to assess adolescence depression, (Kovacs, 1985). It measured adolescent's depressive symptoms using 27-item based on the adolescent past two weeks experiences. Each statement came with 3 choices, such as "I am sad once in awhile", "I am sad many times" and "I am sad all the time". The reliability for the scale in this study is 0.89.

III. Results

Descriptive Statistics
Table 1 provided details on means and standard deviations among all study variables. Father-child relationship in present study had 11.97 mean score with a standard deviation of 2.07. The mean score for mother-child relationship was 12.43 with a standard deviation of 2.15. In addition, the mean score for adolescent depression was 38.79 and the standard deviation is 4.28. Overall, adolescence had moderate bonding with their parents.

Table 1 Descriptive Statisticsand Correlation of Study Variables

	Variables	Mean	SD	Father-Child Relationship	Mother-Child Relationship	Adolescent Depression
1	Gender			0.10	0.07	0.22*
2	Age	15.96	1.24	0.08	-0.15*	0.09
3	Father's Age	43.25	6.01	-0.04	0.05	0.10
4	Mother's Age	41.6	5.13	0.07	0.04	0.07
5	Family Monthly Income	2153	3.65	0.06	0.09**	-0.29**
6	Father-Child Relationship	11.97	2.07	1.00	0.23	-0.22*
7	Mother-Child Relationship	12.43	2.15		1.00	-0.27*
10	Adolescent Depression	38.79	4.28			1.00

*Note:*p<0.05, **p<0.01*

Correlation Analysis
Adolescents' age was found to have significant relationship with mother-child relationship (r = -0.15, p < 0.05), which indicated older adolescent perceived their relationship with mother lower compared to the younger. Nevertheless, there were no significant correction found in between adolescent gender to both father-child and mother-child relationship. Besides, adolescent's age shown no significant relationship to father-child relationship.Family monthly income had significant negative association with mother-child relationship (r = 0.09, p < 0.01). But no significant association reported for father-child relationship. The result indicating that adolescent who from higher household income had stronger bonding with their mother. Furthermore, both parents, father and mother's age did not found to significantly correlate with father-child as well as mother-child relationship.There was no significant association found in between adolescents' age and depression. However, adolescents' gender showed a significant positive relationship with depression (r = 0.22, p < 0.05), which indicating that adolescent girls experienced greater depressive symptoms. Father and mother' age were not reported to have significant relationship with adolescent depression. However, family monthly income was found to significant negatively correlated with adolescent depression (r = -0.29, p < 0.01). The result indicating that adolescent from higher monthly income experienced lesser depression.
Both father-child and mother-child relationship were found to have significant relationship with adolescent depression. The results shown negative correlation between father-child relationship (r = -0.22, p < 0.05) and mother-child relationship (r = -0.27, p < 0.05) with adolescent depression, which means adolescent who had close relationship with father and mother experienced in lesser depressive symptoms.

Predictors of Adolescents Depression
The result revealed in Table 2. According to the table, the model explained 32% of the variance in adolescence depression ($R^2 = 0.30$, F = 4.38, p < 0.01). Adolescence gender and mother-child relationship were significantly predicted adolescence depression. Mother-child relationship was found to best predict adolescence

depression among the variables (β = -0.21, p < 0.01). Meanwhile, adolescence gender was the second strong predictor to adolescence depression (β = 0.13, p < 0.05). These mean that mother-child relationship and gender were importantly explaining variation of adolescence depression.

Table 2 Multiple Regression Analysis for Adolescent Depression

Variables	Beta	Standard Error	*B*	*t*	*p*
Constant	1.42	0.54		2.49	0.02
Gender	0.27	0.07	0.13*	2.89	0.04
Family Monthly Income	0.11	0.05	-0.06	-1.05	0.41
Father-Child Relationship	0.00	0.09	-0.04	-0.12	0.25
Mother-Child Relationship	0.05	0.02	-0.21**	-3.32	0.00

Note: * p < 0.05, ** p < 0.01
$F = 4.38$; $R = 0.44$; $R^2 = 0.30$; Adjust $R^2 = 0.32$

IV. Discussion

Adolescents' age had significant positive relationship with mother-child relationship. It is due to the transition from being dependent to independent (Smetana, Campione-Barr & Daddis, 2004). They started to detach from the parents which lead to the finding that lesser bonding when adolescent grew. Family monthly income had significant negative association with mother-child relationship. The result indicating that adolescent who from higher household income had stronger bonding with their mother. It is due to the lesser financial stress (Chen & Berdan, 2006). Mother could focus more household and child care task compared to the dual income family. Father who is commonly known as the role of breadwinner placing their attention on work (Poon, Bonnie & Pittinsky, 2004) did not make significant differences for high or low income family.

Result indicated that adolescent girls experienced greater depressive symptoms. This finding supported most of the evidence from previous studies which suggesting adolescent girls tend to ruminate negative feeling and hormone changes during puberty (Nilzon& Palmerus, 1997). As for family monthly income, it was found to significant negatively correlated with adolescent depression. The result indicating that adolescent from higher monthly income experienced lesser depression. It is due to family with higher income provide their adolescent with better neighborhood (Leventhal, Waters, Kahler, Ray, & Sussman, 2009).

Both father-child and mother-child relationship were found to have significant relationship with adolescent depression. The results indicating adolescent who had stronger bonding with both father and mother experienced in lesser depressive symptoms. It is about the supportive from parents for the adolescents to pass through challenging transition life stage (Whitlock & Schantz, 2008). There are several limitation in this study and recommendations for future research are also discuss.The first limitation for present study is the small sample size. Small sample size was limited to generalize the findings to the intended population. It is recommended that future study to consider on larger geographic areas in the effort to generalize the findings on Malaysia adolescence context. Besides, present study employed self-report questionnaire. Self-report questionnaire is relatively subjectivity and not reliable as adolescent might not respond in reflecting the exact situation. Hence, data collection should consider multi sources, such as parents or teacher to get closer to reliable. Despite these limitations, present study contributed to the understanding of the depression among Malaysia adolescence. Malaysian adolescents could benefits from the findings as the results provided Malaysia authorities in making plan on prevention and intervention in dealing with Malaysian adolescence depression. A conclusion section must be included and should indicate clearly the advantages, limitations, and possible applications of the paper. Although a conclusion may review the main points of the paper, do not replicate the abstract as the conclusion. A conclusion might elaborate on the importance of the work or suggest applications and extensions.

V. Conclusion

The aim of present study was to determine the relationship between parent-child relationship and adolescence depression among adolescence in Selangor. Adolescence personal characteristics and family background were incorporated to examine their association with adolescence depression. The results of this study indicated that gender had significant positive relationship with depression. At the meantime, family monthly income, father-child relationship and mother-child relationship were having significant negative relationship with depression. Adolescent who have least bonding with their parents was more depressed. Besides, results indicated mother-child relationship was found to best predict adolescence depression among the variables

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