

## Investigating the Relationship between Parenting Styles and Behavioral Disorders of Children in Shiraz Pre-School Centers in 2010-2011 School Year

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### ABSTRACT

The present study investigated the relationship between parenting styles and behavioral disorders in 5 to 6 year old beginners in Shiraz through a correlation method. The population under study included all pre-school students in Shiraz. The sample under study consisted of 160 students (80 females and 80 males) selected through random cluster sampling method. The data were collected by the use of Parenting Style Questionnaire developed by Mariana Winter Batom and Behavioral Disorders Questionnaire by Rater. Then the collected data were analyzed through Pearson coefficient. The results of the study indicated that there is a significant and positive relationship between parenting styles and children's behavioral disorders. In addition, an assessment of boys' and girls' behavioral disorders found that boys have a higher means score than girls ( $p < 0.01$ ,  $t = 2.48$ ). Furthermore, independent learning accounted for the maximum variance of disorders.

**KEY WORDS:** parenting styles, behavioral disorders, pre-school period

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### INTRODUCTION

Family is a place where emotional and psychological security is provided for household members (Sabet, 2003). Each family employs a particular parenting style affected by cultural, social, political, and economic factors (Hardy *et al.*, 1993). Parental attitudes, beliefs, and behaviors represented in family patterns and parental styles are important factors in the development of children's personality and the establishment of their moral characteristics and in avoiding mental and behavioral disorders. The literature on behavioral disorders indicates that most families employ undesirable educational practices resulting in fear, paranoia, anxiety, feelings of dissatisfaction and lack of confidence in children (Alizadeh, 2002). The way parents treat their children may increase the risk of incidence of emotional and behavioral problems in children. In addition, conduct problems, drug abuse, social aversion behavior, and delinquency among children originate from parenting style. (Sander, Ralph, Thompson, Gardiner, 2005). In addition, the results of a study by Webster (2008) suggest that parental support and involvement is one the most important control factor that may lead to behavioral disorders. Bamerind (1967 and 1971, cited in Diaz, 2005) has introduced authoritarian, authoritative, and submissive parenting styles with positive and negative outcomes related to behavioral disorders. According to Diaz (2005) when the parental parenting style adopted by parents is inappropriate in terms of components such care, and relations, and structure, an improper development context is provided, resulting in behaviors labeled as negative behaviors. However, when such components are appropriately adopted they will increase positive behaviors that are generally associated with authoritative parenting style. Children in broken and disadvantaged families with conflict between parents and those families that have lost their breadwinner show more behavioral disorders. This is why behavioral disorders are today among major problems faced by families in all countries received many researchers' and scholars' attention. Therefore, as behavioral disorders in childhood may result in negative consequences on children's development and personality and even their future performance. Investigating the relationship between parenting styles and behavioral disorders in pre-school children is of high importance. As a result the present study has been carried out to explore the problem.

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## RESEARCH METHODOLOGY

Given the research objectives and hypotheses, the present study has employed a correlative research design. The population under study included all pre-school children in Shiraz during 2010-2011 School Year. The research sample was selected through random cluster sampling method. To do so, a school was chosen for each of all four education regions in Shiraz (4 schools in total) and in each school, 40 students, including two pre-school classes (20 boys and 20 girls) were selected as the sample under study, totally amounting to 160 students. Then the parenting style questionnaire was filled in by mothers and Rutter's behavioral disorder questionnaire was completed by mothers and teachers.

### Instruments

**Parenting style questionnaire:** This questionnaire was constructed by Mariana Winter Batom (1953) which measures the triple parenting style (independent learning, mastery learning, and care learning). Bagheri (1993) has reported the validity of the questionnaire as 83% and its reliability equal to 40% and 92% through the use of halving technique and Cronbach's alpha for the entire questionnaire, respectively. The scales of independence learning (41% and 86%), mastery learning (40% and 80%), and care learning (19% and 73 %) were reported by Bagheri (1993).

**Behavioral disorders questionnaire:** To assess children's behavioral disorders, a questionnaire developed by Rutter (1967) were employed which includes 30 items, measuring aggression, anxiety, social aversion, ostentation, school dropout, and all behavioral disorders. Yousefi (1998) determined the validity of the instrument through factor analysis as equal to +21% to - 12% -, suggesting that all items were valid at  $P < 0.001$ . Besides, the reliability of the instrument was determined as 90% through retest method by Yousefi (1998).

## FINDINGS OF THE STUDY

As Table 1 indicates, independent learning is positively and significantly associated with aggression ( $r = 0.17$  &  $P < 0.03$ ), anxiety ( $r = 0.21$  &  $P < 0.006$ ), social aversion ( $r = 0.24$  &  $P < 0.002$ ), ostentation ( $r = 0.32$  &  $P < 0.001$ ), and all behavioral disorders ( $r = 0.28$  &  $P < 0.001$ ). Besides, it was noted that there is a positive and significant relationship between mastery learning and social aversion ( $r = 0.21$  &  $P < 0.006$ ). Care learning is also positively and significantly related to anxiety ( $r = 0.19$  &  $P < 0.01$ ), social aversion ( $r = 0.26$  &  $P < 0.001$ ), ostentation ( $r = 0.23$  &  $P < 0.003$ ), and behavioral disorders ( $r = 0.21$  &  $P < 0.006$ ).

**Table 1: Results of Pearson correlation test to determine the relationship between parenting styles and children's behavioral disorders**

Variables	Parenting styles			
	Independent learning	Mastery learning	Care learning	
Disorders	Aggression	0.06	0.06	0.09
	Anxiety	0.1	0.1	0.19**
	Social aversion	0.21**	0.21**	0.26***
	Ostentation	0.12	0.12	0.23**
	School dropout	0.03	0.03	0.04
	Normal disorders	-0.015	-0.015	0.07
	Total scores of behavioral disorders	0.11	0.11	0.21**

$[0.001 \leq P < 0.01]$        $[*** = \leq P < 0.05]$        $[** = \leq P < 0.01]$

Table 2 shows a comparison of behavioral abnormalities between male and female students. As it can be seen, there is a significant difference between the two groups with regard to aggression ( $t = 2.86$  &  $P < 0.005$ ). Male students gained a higher mean score on this component than female students. There is also a significant difference between the two groups concerning behavioral disorders ( $t = 2.48$  &  $P < 0.01$ ), with a higher mean score for male students than that obtained by female students.

**Table 2: Results of t-test to determine the differences between behavioral disorders and its components in the two groups**

Dimensions	Gender	Frequency	Means	SD	t	df	Level of significance
Aggression	Male	80	3.65	3.09	2.86	158	0.005
	Female	80	5.30	4.14			
Anxiety	Male	80	2.05	2.42	1.85	158	NS
	Female	80	2.81	2.78			
Social aversion	Male	80	0.94	1.23	0.41	158	NS
	Female	80	1.02	1.43			
Ostentation	Male	80	2.03	1.65	1.11	158	NS
	Female	80	2.33	1.76			
School dropout	Male	80	0.57	0.90	0.77	158	NS
	Female	80	0.70	1.14			
Normal disorders	Male	80	0.45	0.87	0.82	158	NS
	Female	80	0.56	0.87			
Behavioral disorders	Male	80	9.69	7.37	2.48	158	0.01
	Female	80	12.73	8.09			

To examine the predictive power of parenting styles, stepwise regression test was used. As it can be seen in Table 3, only learning independence has come into play and with a correlation coefficient of 40%, it can predict 16% of the variance in behavioral disorders.

**Table 3: Stepwise regression test to determine effects of parenting styles on behavioral disorders**

Factors	R	R <sup>2</sup>	F	P	B coefficient	Beta coefficient	t	Sig. level
Independent learning	0.40	0.16	15.01	0.0001	1.27	0.23	3.22	0.002

## DISCUSSION AND CONCLUSION

Findings of the present study on the relationship between parenting styles in children with behavioral disorders suggested that independent learning is positively and significantly associated with aggression, anxiety, social aversion, ostentation, and the total score of all behavioral disorders, indicating that if mothers expect their children's independence at higher ages and not allow them to express their opinions and ideas, children are more likely to show behavioral disorders. Mastery learning style is positively and significantly related to social aversion, suggesting that the expectation of children's mastery at higher ages will lead to more social disorders. Care learning has also a positive and significant relationship with anxiety, social aversion, ostentation, and the total score of behavioral disorders but no relationship has been observed in other dimensions, which is in line with Tehrani Doust, *et al.*, (2008), Dorudgar (2005), Mowlavi (2005), Pellerin (2008), Prioyer (2007), and Diaz (2005). To explain these findings, it should be noted that when children are born they are as a blank tablet regarding the type of behavior that they may show. Later on at other stages of life, the roles created by parents and other persons on these tablets will form the quality of behaviors exposed by the child. As a result, parents should be very careful about the educational practices they use as components such as inappropriate performance, thoughts, techniques, attitudes and values employed by parents provide an unsuitable context for children in which they will grow up and, therefore, creates negative behaviors in children. In addition, the future of children who are grown up through improper practices maybe exposed to risk compared to their peers who have undergone proper education practices. Such children will show less adaptability to living conditions in the future. Several studies conducted in this field confirm the existence of such a relationship. Dorudgar (2005), for instance, has pointed out it is more likely that authoritarian parenting styles result in the formation of more behavioral disorders and irrational thinking in children. Mowlavi (2005) has suggested that parenting styles based on parents' independence, dependence, strictness, or leniency may cause behavioral disorders in children. Similarly, Tehrani Doust, *et al.*, (2008) demonstrated that the quality of parenting styles exert a great impact on the formation of behavioral and emotional disorders in children. They also believe that instructing parents on how to raise their children constructively is very helpful in reducing their behavioral problems. Tehrani (2008) suggests that useful instructional interventions can improve parents' performance in various activities. In addition to above-mentioned findings, research outcomes indicate that children whose parents are responsive and controlling are more likely to gain high scores on behaviors such as taking social responsibility, independence, and progress (Pellerin 2008). In addition, if parents' responsibility taking is increased along with intimacy (i.e. the two components absent in the submissive style) it will lead to a reduction in childrens' behavioral disorders (Prioyer, 2007). Other objectives of the present study included a comparison of behavioral

disorders in male and female students. The findings of the study suggest that aggression is significantly different between the two groups and the mean score for male students is higher than that of female students. There was also a significant difference in total scores related to behavioral disorders between the two groups, with males having a mean score higher than that of females. However, no significant relationship was observed in other dimensions between the two groups. The findings are consistent with those noted by Roslefs (2006) and Zilgman (1999). It is difficult to explain why male student showed more behavioral problems than female students. A possible explanation is related cultural attitudes as boys are more valued than girls in Iranian culture and boys are perceived as powerful, strong, challenging, and independent in the society. Parents, generally, employ stricter practices in their attitude and behavior towards girls as they believe that girls are more flexible and vulnerable than boys. These behaviors and attitudes are established in boys and cause behavioral disorders for them. Besides, parents get along with boy's behavioral problems more easily than with girls'. For instance, they believe that aggressive behavior is more natural to be exposed by boys than by girls. Based on what has been said, it can be concluded that employing appropriate educational practices by parents can reduce behavioral disorders in children. As a result, it is recommended that to hold training workshops in hospitals and public centers to inform pregnant mothers about the use of proper parenting styles to prevent the spread of behavioral abnormalities in children. Holding such workshops in kindergartens and preschool centers can increase inexperienced teachers' and trainers' knowledge on various inappropriate educational and training practices and behavioral abnormalities resulting from such practices to raise a generation of healthy children to build the future of the country.

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