#70 PAPER 96 -
STUDY ON THE INFLUENCE OF PARENTAL STYLE REGARDING THE INCIDENCE OF DEPRESSIVE MANIFESTATIONS AMONG YOUNG PEOPLE WITH MENTAL DISORDER

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Abstract
The motivation for conducting this research was to highlight the importance of family environment and parenting style, in the personality development of persons diagnosed with mental deficiency and preparing them for a proper adaptation to the environment. This paper presents results of the study on the impact that parenting style can have on depressive episodes among young people with mental disorder.

Keywords: mental deficiency, parenting style, depression

1. THEORETICAL SUPPORT

a) Mental disorder is understood as a global deficiency, that significantly influence the socio-professional adaptation, degree of competence and personal and social autonomy, affecting the whole personality: structure, form and intellectual, emotional, psychomotor, behavioral adaption development. (Ghergut, 2005).

People with mental disorder have specific characteristics that can be grouped on three coordinates: first, referring to the emotional effects, as a result of the way they perceive the world; second, needs and desires felt in connection with the social environment and as response to the environment. Previous studies (Vartic, 2013) show that the emotional effects of world perception include: anxiety, depressive and regressive tendencies, feelings of weakness, isolation, discouragement, self-delusion tendency, replacement of reality with illusion.

Some people with mental disorder have a high degree of anxiety as a result of repeated failures in action and on relational level, they also feel excluded, marginalized, unaccepted and unloved. Restrictions on the subjects’ freedom of action imposed by the external environment and their own abilities are some of the causes of this phenomenon, which is being felt as frustrating. The subjects’ access to a large number of activities is being limited, considering that they are unable to cope. Society's attitude towards their condition is hostile and they manifest as such. This situation has severe implications on their whole personality, expressed on various forms of behavior, among which the most common are negative attitudes to the requests, noncooperation, loss of self-esteem, tasks avoiding attitudes.

b) According to Tudose (2011), "affectivity represents the overall mental qualities that reflect the subjective reflection of the consistency between the inner and outer reality, regarded as dynamic and continuous process". (Tudose, 2011). Affectivity (from which depression derives) is, according to Anitei (2010), a set of conditions or subjective experiences that reflect human relationships with the surrounding world and the extent to which its internal needs are satisfied or not. In fact, affectivity is man’s most subjective element, being a psychological process directly linked to the personality of the individual, which is manifesting dynamically and continuously, resonating with two realities: environmental and personal (Grecu, 2007).

According to Tudose, Tudose & Dobranici (2011) depression is defined as a basal mood crash, when the unpleasant, sad and threatening feelings are underlined and updated.

According to Doron & Parot (2006), depression is defined as one as the oldest and most common pathologies (being present at about 5-10% of the globe population). Moreover, depression is considered a collapse of the basal mood, by updating unpleasant, sad and threatening feelings.

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According to ICD-10, the nosological classification of a depressive episode is based on certain symptoms, of which at least four must be present for a period of at least two weeks. In one of the classic models of depression, developed by Beck, depressed individuals are characterized by a negative self-image, negative beliefs on others and about the future. (Beck 1991 cited in Grecu, 2007). Thus, we can see that the first two elements are directly related to models of self and of the others, patterns built during childhood.

Following studies that have had the role of examining the relationship between early interactions with parents and psychopathological disorders in adult life, revealed the idea that parenting styles characterized by overprotection, reduced emotional warmth, and non-contingent parental responsiveness can significantly influence the pathology development (Grecu, 2007).

McGinn et al. (2005) studies results showed that people who claim that their parents were abusive or neglectful, also reported higher levels of depression. "The people, who claimed to have been reared by uncaring and overprotective mothers for the needs of the child, were more depressed and anxious than those who had differently characterized the parenting style of the mother." (Cretu, 2007)

c) "Most authors believe that the parenting style represents a children general pattern of growing, defined as a combination of both emotional warmth and control given to the child." (Bonchis, 2011)

The first axis refers to indicators that show the limits and constraints on children's activities and responsibilities assigned to them by parents and also the manner in which parental control is being practiced, the applied and verified rigor regarding the compliance with the imposed rules, which relate to parental control. The second axis refers to indicators reflecting the degree of engagement of parents in children's activities, the offered support, the time spent and responsiveness to their needs and emotional state, which relate to parental support. (Stănciulescu, 2002).

The child perception in terms of educational style in which he evaluates his family educational climate and the way his own assessments influence his behavior, is less studied. The child interprets differently than his parents, the educational style of his own family, and this perception, whether it corresponds to reality or not, influences his reactions and his psycho-social development. This perception depends on many factors such as age, gender and education level.

2. RESEARCH OBJECTIVES:

a) O1: Studying the influence of maternal parenting style and family environment on the occurrence of depressive symptoms, and the risk of decompensation, with a mild or moderate depressive episode on young people with mental disorder.

b) O2: Studying the use of imaginary life and fantasy as a method of "coping" by young people with mental disorder.

3. RESEARCH HYPOTHESES:

H1. Maternal parenting style directly influences the occurrence of depressive disorder in young people with mental disabilities, in the sense that permissive or authoritarian parenting styles positively influence the occurrence of depressive symptoms.

H2. The occurrence of depressive episode in youth with mental disorder directly affects the use of fantasy and imaginary life as a method of coping, in the way that young people with richer depressive symptomatology will use more imaginary elements in real life.

4. RESEARCH METHODOLOGY

Participants: Fifty young people with moderate degree of mental disorder, aged 20-30 years. The youngsters were chosen from two associations that deal with socio-professional integration of people with disabilities in Bucharest and Ilfov.

The methods of investigation - tools
a) The speech evaluation sheet
b) Beck Depression Inventory (BDI)
c) Hamilton Depression Rating Scale
d) Draw a Person Test
e) Family Drawing Test
f) Semi-structured interview
5. RESULTS

1. Testing H1 hypothesis and psychological interpretation of results

Testing H1 hypothesis: "maternal parenting style directly influences the occurrence of depressive disorder in young people with mental disabilities, in the sense that permissive or authoritarian parenting styles positively influence the emergence of depressive symptoms" was achieved by correlating the researcher’s all data obtained as a result of applying the projective tests and questionnaires, using descriptive statistics and psychological interpretation.

<table>
<thead>
<tr>
<th>Valid</th>
<th>Frequency</th>
<th>Percent</th>
<th>Valid Percent</th>
<th>Cumulative Percent</th>
</tr>
</thead>
<tbody>
<tr>
<td>Lack of depression</td>
<td>20</td>
<td>40,0</td>
<td>40,0</td>
<td>40,0</td>
</tr>
<tr>
<td>Mild depressive disorder</td>
<td>20</td>
<td>40,0</td>
<td>40,0</td>
<td>80,0</td>
</tr>
<tr>
<td>Moderate depressive disorder</td>
<td>10</td>
<td>20,0</td>
<td>20,0</td>
<td>100,0</td>
</tr>
<tr>
<td>Total</td>
<td>50</td>
<td>100,0</td>
<td>100,0</td>
<td></td>
</tr>
</tbody>
</table>

Thus, it can be seen in Table 1 that 30 of the 50 young people diagnosed with mental disabilities, aged 20-30 years, show depressive disorder (mild and moderate).

<table>
<thead>
<tr>
<th>Valid</th>
<th>Frequency</th>
<th>Percent</th>
<th>Valid Percent</th>
<th>Cumulative Percent</th>
</tr>
</thead>
<tbody>
<tr>
<td>Permissive parenting style</td>
<td>20</td>
<td>40,0</td>
<td>40,0</td>
<td>40,0</td>
</tr>
<tr>
<td>Democratic parenting style</td>
<td>30</td>
<td>60,0</td>
<td>60,0</td>
<td>100,0</td>
</tr>
<tr>
<td>Total</td>
<td>50</td>
<td>100,0</td>
<td>100,0</td>
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It can be seen in Table No. 2 that maternal parenting styles met among the tested subjects are: democratic and permissive parenting style. After testing, in regards to the tested subjects, none of the parents has adopted an authoritarian parenting style, although there is still the possibility of dissimulation (parents ticked answers that society would consider acceptable).

Correlating the obtained data, it can be seen that 20 subjects with deficiencies, out of the 30 who suffer from depressive disorder have parents who have adopted a permissive parenting style (it was assumed that, democratic parenting style is the most desirable to development and adaptation to the environment, for young people diagnosed with mental disabilities).

Given the aforementioned information and analyzing the results, we can conclude that the hypothesis "maternal parenting style directly affects the occurrence of depressive disorder in young people with mental disabilities, in the sense that permissive or authoritarian parenting styles positively influence the emergence of depressive symptoms" was disproved.

It is important to note that numerous studies have highlighted the importance of family in children's development. The reason, for this hypothesis wasn’t validated, may be that subjects are young people aged 20-30 years, this being young-adult category. Thereby, the reasons and causes of depressive symptoms in these subjects are, after correlating the obtained data, lack of affection and intimacy in couple and the need for affection and appreciation.

Other fact that can be observed as a result of data analyze is that all fifty subjects are experiencing depression, and feelings of inadequacy or inferiority. These experiences may be caused by addiction of the subjects to the parent, guardian or caregiver, regardless of the level of autonomy of each young man.

The empirical research hypothesis H1: " maternal parenting style directly affects the occurrence of depressive disorder in young people with mental disabilities, in the sense that permissive or authoritarian parenting styles positively influence the occurrence of depressive symptoms" was invalidated and cannot conclude or prove the direct influence of maternal parental style on the incidence of decompensation with a depressive episode (mild or moderate) by young people with mental disabilities, which have been psychologically tested.

2. Testing the hypothesis H2 and psychological interpretation of the results: "The occurrence of depressive episode in youth with mental disabilities directly affect fantasy and imaginary life as a coping method, meaning that young people with richer depressive symptomatology use more imaginary items in real life" was achieved by correlating the researcher’s whole amount of data obtained by applying projective tests, questionnaires and
structured interviews and conversation, but also through observational method and case study, using descriptive statistics and psychological interpretation.

After analyzing the results, the hypothesis "the occurrence of depressive episode in young people with mental disabilities directly affects the use of fantasies and imaginary life as coping method, meaning that young people with richer depressive symptomatology use more imaginary elements in real life " it was confirmed.

Subjects with richer depressive symptomatology tend to overcome the difficulties encountered in real life and to fulfill primary needs and necessities (of affection and belonging) using their own imaginary life, creating specific fantasies. Thus, some of the subjects adapt through soap operas’ characters, while others fantasize about various couple relationships.

It was proved that out of the 50 subjects participating in the present study, 40 of them have had a relatively rich imaginary life and an ability to create stories and fantasies.

It is well known that the line between fantasy and reality faded for many people with mental disabilities, they easily confusing fantasy or imaginary events and characters (in movies, shows or cartoons) with real people or events.

6. CONCLUSIONS

a) Maternal parenting style may influence to some extent the degree of depression in young people with mental disabilities, but there is a significant correlation between negative parenting styles (authoritarian or permissive) and occurrence of depressive episode.

b) The study on young participants with mental disabilities who experience a richer depressive symptomatology shows, that they will seek ways of adapting to the environment, using fantasy and their own imaginary life.

The study provides qualitative data regarding the specific emotional-behavioral manifestation of this category of persons, required for theirs psychological counseling and their families, for a better integration in social life and for increasing the quality of their life.

7. REFERENCES