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Research Paper

Investigating the Role of the Relationship between the Quality of Parent-Child Relationship in Social Anxiety of Female high School Students in Tehran



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ABSTRACT

Objective Given that social anxiety is a high prevalence disorder that affects the social functioning of individuals and one of its essential consequences in children and adolescents is a severe school dropout. Therefore, the purpose of this study was to investigate the relationship between the quality of parent-child relationship in social anxiety of female high school students in the fifth district of Tehran.

Methods The present research method was descriptive-correlational and its statistical population included all-female high school students in the fifth district of Tehran. From this number, a sample of 348 people was selected by the available sampling method based on the Morgan table. Leibwitz (1987) and Pianta (1994) Parent-Child Relationship Scale were used to collect data and Pearson correlation coefficient was used to analyze the data.

Results The results showed that there is a significant negative correlation between the parent-child relationship and social anxiety ($P < 0.01$).

Conclusion Finally, considering the quality of the parent-child relationship in predicting social anxiety, the development of any program to improve the quality of the parent-child relationship can lead to the prevention or reduction of social anxiety in adolescents.

1. Introduction

Social anxiety is the most common disorder in the category of anxiety disorders, which refers to extreme fear or anxiety about one or more social situations or functions in which a person is exposed to the attention and attention of others. A person is afraid to behave in a way that causes him to be humiliated and ashamed or evaluated negatively (Farmer, 2015). For a person to be diagnosed with

social anxiety disorder, they must suffer from a great deal of discomfort, or the disease must lead to disruption to the normal routine of social, professional, educational, or other daily activities (American Psychiatric Association, 2013).

Students with social anxiety often try to avoid certain situations in which they may be evaluated by others and show signs of anxiety or behave in frustrated. Talking, eating, drinking in public, using the public toilet, and any activity that should be

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done in front of others makes them extremely anxious and can even cause a full-blown panic attack. In these situations, they believe will act in an embarrassing or humiliating manner (Rahmati, 2019). Increasingly, the consequences of social anxiety disorder in children and adolescents are associated with severe school dropout (Last and Strauss, 1990). This disorder is also associated with depressive disorder in adolescents (Essau et al., 1999). In this regard, Amiri (2016) showed is a significant relationship between social anxiety and academic motivation and students' exam anxiety. Also, Rozitalab research (2018) showed that social anxiety has a significant inverse relationship with achievement motivation and academic performance. Also, the dimensions of social avoidance had an inverse and significant relationship with achievement motivation and academic performance.

One of the variables that seem to play a role in adolescent social anxiety is the quality of parent-child relationships. Research has shown that the quality of communication between parents among a set of variables is the most critical factor related to children (Kahn, 2004). Abramson (2005) reports that parenting habits and adverse events in parents' lives affect children's cognitive development and self-esteem (Mezulis, 2006). By providing a suitable social environment, parents allow adolescents to meet their needs for competence, self-esteem, and a sense of belonging (Tanhay Rashvanloo and Hejazi, 2011); on the other hand, parents who are low in terms of the quality of relationships cause Psychological problems (anxiety, low self-esteem) occur in their children (Haj Yahyaiee and Beerwald, 2001), which eventually leads to the formation of social anxiety disorder in adolescents. In this regard, Hosseini's research in 2015 showed that authoritarian parenting methods have been able to affect shyness significantly and can predict it. Also, there is a significant difference in the level of social anxiety between negligent parenting styles and dictatorial parenting styles, and the moderate social anxiety in casual parenting style is more than dictatorial style and more than authoritarian style. Also, another study in this field showed that the course of parent-child interaction treatment programs has reduced school anxiety and reduced school phobia scores in children with severe anxiety (Mokhtari, Dartaj, Delavar, and Haji Alizadeh, 2020).

Although social anxiety disorder typically begins in adolescence (Schneier, Johnson, Horning, Liebowitz, and Wiseman, 1992). Limited studies have

investigated social anxiety disorder in Iranian adolescents. These results show that social anxiety disorder in childhood and adolescence has caused significant problems in the functioning of individuals. On the other hand, due to the limited studies conducted in this field and also since social anxiety disorder usually begins in adolescence and is associated with psychological disorders and behavioral problems, to better understand the cause and persistence of this disorder In Iranian adolescents, the present study aimed to investigate the role of the relationship between the quality of parent-child relationship in social anxiety of female high school students in Tehran's fifth district.

2. Materials and Methods

The present research was quantitative in terms of approach and applied in terms of purpose and field in terms of data collection and descriptive-correlational implementation method. The statistical population included all-female high school students in the fifth district of Tehran, the total number of which was 5323 people, of which 357 people were selected as the sample size using Morgan table and available sampling method. The following tools were used to collect data:

Liebowitz Social Anxiety Scale: The Liebowitz Social Anxiety Scale was developed in 1987 by Michael Liebowitz. This scale has 24 terms for people over 18 and two subscales of performance anxiety (13 terms) and social situations (11 terms). Each phrase is graded separately for fear (0 to 3, at all, low, moderate, severe) and avoidant behavior (0 to 3, never, rarely, often, always) (Baker et al., 2002). Therefore, this test gives a score of general social anxiety and scores on the four scales of performance fear, performance-avoidance, social panic and social avoidance. Cronbach's alpha coefficient method was used to evaluate the reliability of this test. The overall alpha coefficient was reported to be 0.95, the alpha coefficient of the performance anxiety subscale was 0.82 and the alpha coefficient of the social anxiety subscale was reported to be 0.91. To assess convergent validity, this test was compared with the Social Interaction Anxiety Scale (Mattick and Clark, 2007). The correlations ranged from 0.40 to 0.77. The observed correlations were lower on the Social Anxiety Scale and ranged from 0.31 to 0.72 (Mattick and Clark, 2007). Anxious subjects scored higher than non-anxious subjects on this scale.

Atri Fard et al.'s study in the Iranian sample shows that the validity of the LSAS-SR retest and its subscales is in the range of 0.76 to 0.84 their internal consistency (Cronbach's alpha) is in the range of 0.73 to 0 LSAS-SR convergent validity with other scales of social anxiety including Social Interaction Anxiety Scale (SIAS), Social Panic Scale (SPS), Social Panic Questionnaire (SPIN), Negative Fear Scale (BFNE) Scale and Frequency Scale Subtle and intelligent avoidance (SAFE) is also acceptable (0.46 to 0.94) (Atri Fard et al., 2012).

Child-Parent Relationship Quality Questionnaire: This questionnaire was first designed by Pianta in 1994 and consisted of 33 items that measure parents' perceptions of their relationship with the child. This scale includes areas of conflict, closeness, dependency, and overall positive relationship (sum of all areas). The Child-Parent Relationship Scale is a self-report questionnaire, and its scoring is based on the Likert scale (from a grade of 1 not true to a score of 5). This scale has been used to measure the parent-child relationship at all ages (Tajrishi, Ashuri, Afrooz, Arjmandnia and Ghobari Bonab, 2015). This questionnaire was translated by Tahmassian in 2007 and its content validity has been reported by desirable experts. Abarshi, Tahmassian, Mazaheri and Panaghi (2009) obtained the reliability of this questionnaire through Cronbach's alpha. The

reliability of the areas of conflict, closeness, dependence and overall positive relationship was reported to be 0.84, 0.74, 0.0, 0.61 and 0.86, respectively. Driscoll and Pianta (2011) in Cronbach's alpha study reported this questionnaire in each of the components of conflict, closeness, dependence and overall positive relationship 0.75, 0.74, 80.69 and 0.0, respectively. This scale includes the domains of conflict (17 items), proximity (10 items), dependence (6 items) and the overall positive relationship (sum of all areas), each with a Cronbach's alpha coefficient of 0.84, respectively. 0.69, 0.46 and 0.80 have been reported. In this questionnaire, high scores in each subscale indicate a positive parent-child relationship.

In the present study, descriptive statistical indices such as central indices (mean, mode, median) and dispersion indices (standard deviation, variance) were used to examine the characteristics of the subjects. Pearson correlation test was used to analyze the data and test the research hypothesis. SPSS 22 software was also used for data analysis.

3. Results

At the level of descriptive statistics, nine subjects were excluded due to high data loss and the analysis was performed with 348 subjects. Gender All subjects were girls a high school students and their mean age was 16 years and standard deviation 2.30.

Table 1. Descriptive indicators of parent-child relationship quality variables and social anxiety and their components

Variables	Number	Minimum	Maximum	Mean	Standard deviation
Parent-child relationship	348	37	136	78.43	20.30
Conflict	348	17	68	32.02	10.73
Proximity	348	10	46	27.46	9.20
Dependence	348	5	30	18.93	6.87
Social anxiety	348	67	134	106.18	12.80
Performance anxiety	348	32	75	54.33	7.91
Social status	348	32	65	51.85	7.32

As Table 1 shows: the mean and standard deviation of the parent-child relationship variable (78.43 and 20.30, respectively), the absolute value of skewness and elongation in the parent-child relationship variable and its components is less. It is 2, it can be said that the attribute distribution is not much different from the normal distribution, or in other words, it is a normal distribution. In this variable, the higher the score of the conflict component, the less conflict the person has,

and vice versa. Also, the mean and standard deviation of social anxiety were 106.18 and 12.80, respectively. Given that the absolute value of distortion and strain in social anxiety and its components is less than 2, it can be said that the distribution of the adjective is not much different from the normal distribution, or in other words, the distribution is normal. Also, according to the significance level of Kolmogorov-Smirnov test $P > 0.05$, research variables are normal.

Table 2. Matrix of correlation coefficients between research variables

Variables	Parent-child relationship	Social anxiety
Parent-child relationship	1	
Social anxiety	- 0.20 **	1

*P< 0.05 **P< 0.01

As shown in Table 2, there is a significant negative correlation between the parent-child relationship and social anxiety ($r = -0.20$, $P < 0.01$).

4. Discussion and Conclusion:

This study aimed to investigate the relationship between the quality of parent-child relationship in social anxiety of female high school students in the fifth district of Tehran.

The results of the correlation coefficient showed that there is a negative and significant relationship between the quality of the parent-child relationship and social anxiety. This means that the higher the quality of the parent-child relationship, the lower the social anxiety. In this regard, the results of some studies are in line with the results of the present study (Hosseini, 2015; Mokhtari et al., 2020; Shahni et al., 2017; Sadri Damirchi et al., 2018).

In explaining the role of the quality of the parent-child relationship in social anxiety, it can be said that the fundamental factor in the formation of the relationship with oneself and others is the person's experiences in infancy and childhood concerning the primary caregiver. They are affected. The parent-child interaction is the first representation of the child's world of communication and the vital relationship for creating security and love. Children need to interact with their parents, pay attention to their behaviors, and get to know the social structure of the world around them through interaction with their parents. This interaction is essential to the child's development; Therefore, it can be said that the increase in conflict between mothers and children is associated with an increase in anxiety symptoms, and in particular, this scale is a positive predictor of generalized anxiety symptoms and social anxiety in children and adolescents Saturnian (2016). Also, it seems that the relationship is based on the inability of the mother to respond to the needs of the child and lack of sensitivity to the basic needs of the child as the mother's emotional and physical inaccessibility to the child. In other words, this conflict, which is opposed to positive relationships, indicates a negative and conflicting relationship between mother and child. Therefore, its association with anxiety symptoms, including social

anxiety, can be justified.

One of the limitations of the future research is the length of data collection tools, which led to participants' fatigue in answering research questions and bias in research results. Therefore, it is suggested in future research Use the short form of measuring instruments. Also, the statistical population was limited to female students in the fifth district of Tehran and its generalization to other schools should be made with caution. Therefore, it is suggested that this research be conducted in other schools and at other levels of education, as well as in the male student community. Because of the above, it is practically suggested that parenting training courses be implemented for parents to reduce control and create a suitable structure in the family, to maintain warm and good relationships, as well as to identify and diagnose health. Students' mental health should be addressed by mental health tests and the creation and implementation of organizational strategies to strengthen mental health and reduce anxiety and stress. It is also suggested that communication skills training courses be provided to students to reduce their social anxiety.

5. Ethical Considerations

Compliance with ethical guidelines

All ethical principles are considered in this article. The participants were informed about the purpose of the research and its implementation stages. They were also assured about the confidentiality of their information and were free to leave the study whenever they wished, and if desired, the research results would be available to them.

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Authors' contributions

All authors have participated in the design, implementation and writing of all sections of the present study.

Conflicts of interest

The authors declared no conflict of interest.

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