Remittances Review
September 2024
Volume: 9, No: S4, pp. 1511-1529
ISSN: 2059-6588 (Print) | ISSN 2059-6596 (Online)

Received: 25 July 2024, Accepted: 18 September 2024

Parenting Dimensions and Adolescent Socio-Emotional Health: A Path Analysis Mediated by Basic Psychological Need Satisfaction

Syeda Asma Gillani[1], Palwasha Nasir Abbasi[2*], Shanza Aman Khan[3], Iffat Nishat[4]

[1]Lecturer, Department of Psychology, University of Azad Jammu and Kashmir, Muzaffarabad AJK
[2,3,4] MPhil Scholar, National Institute of Psychology, Quaid-e-Azam University, Islamabad, Pakistan

***Corresponding Author:** Palwasha Nasir Abbasi (nasirpalwasha1@gmail.com)

ABSTRACT
The current study examined the predictive value of parent dimensions, both 'positive' (e.g., warmth, involvement, encouragement of autonomy) and 'negative' (e.g., psychological control, harsh discipline), on parents' and young people's perceptions of adolescents' mental health and well-being, including socio-emotional health outcomes. A cross-sectional design was used with a diverse sample of adolescents and their parents. Dependent variables were measured in terms of overall difficulties and prosocial behaviour. Using regression analyses and structural equation modelling analyses we found that, overall, aspects of 'positive' parenting reliably predicted lower levels of difficulties and higher levels of prosocial behaviour. High levels of negative dimensions were consistently hazardous with respect to adolescents' levels of emotional and behavioural problems. In particular, when compared to adolescents, mothers' and fathers' perceptions differed substantially, illustrating the subjective nature of an individual's experience. The present study confirmed the value of positive parenting dimensions in improving the psychological well-being of adolescents. Furthermore, the study recommends integrating parenting programs that are culturally sensitive to the development of emotional support, whilst reducing, controlling behaviour. Limitations include reliance on self-report measures and that this sample may be culturally specific, therefore broadening this area of research is warranted.
Keywords: Parenting dimensions, socio-emotional health, adolescents, psychological control, prosocial behavior

INTRODUCTION
Adolescence is a significant stage of development characterized by emotional instability, identity development and exploration, and increasing independence from parents and family. During this time, socio-emotional health (the ability to understand, express, and regulate emotions, while forming and maintaining positive connections and relationships) is fundamental for the individual's health and long-term adjustment

(Eccles & Roeser, 2021). As the adolescent develops, the family context has an important role in promoting or inhibiting the adolescent's development regarding socio-emotional issues (Steinberg & Silk, 2019). As adolescents work toward autonomy, parental involvement continues to influence emotional regulation, peer relationships, and psychological well-being (Pinquart, 2020).

Parental dimensions usually include aspects of warmth, responsiveness, parental control, and parental demandingness. Baumrind's typology of parenting styles (authoritative, authoritarian, permissive, and neglectful) are a foundation for looking at parenting effects on child outcomes (Baumrind, 1991; Sorkhabi, 2022). Most research focuses on authoritative parenting emphasizing the balance of high responsiveness and appropriate parenting control, with positive adolescent psychological and social outcomes, and increased emotional distress or maladaptive behaviors from parenting styles that are either more authoritarian or neglectful (Morawska et al., 2020). While there are cultural influences, these dimensions of parenting have been measured and tested across multiple contexts and appear to impact adolescent development universally (Kuppens & Ceulemans, 2019).

Socio-emotional health encompasses emotional resilience, empathy, interpersonal skills and adjustment to psychological issues. Adolescents who are socio-emotionally competent have increased likelihood of forming secure relationships, being prosocial and more likely to do well in school (Gómez-Baya et al., 2021). Socio-emotional difficulties in adolescence are closely associated with depression, anxiety, substance use and interpersonal conflict (Orgilés et al., 2022). These outcomes are strongly moderated by emotional climate in the home. This literature provides a strong impetus to explore how specific parenting behaviours can promote adolescents' emotional well-being, or act as a robust barrier.

Self-Determination Theory (SDT) posits that in order to undergo psychological growth, and emotional and psychological well-being, individuals need to fulfil three basic psychological needs; autonomy, competence and relatedness (Ryan & Deci, 2017). When needs are satisfied, adolescents are more likely to experience emotional balance, intrinsic motivation, and adjustment to social settings. Conversely, the frustration of the basic psychological needs can result in internalising and externalising symptoms, such as depression or aggression (Vansteenkiste & Ryan, 2020). The satisfaction of basic psychological needs is mainly influenced by parenting practices, for example, a supportive parenting allows adolescents to fulfil their needs for autonomy and relatedness, while a controlling or rejectful parenting style may impede the fulfilment of their needs (Joussemet et al., 2023).

Emerging research suggests that basic psychological need satisfaction may mediate the relationship between parenting and adolescent well-being. For example, supportive parenting may nurture adolescents' sense of competence and emotional safety—both of which facilitate socio-emotional benefits (Ng et al., 2021)—while excessively controlling or emotion-distant parenting seems to impede adolescents' feel of satisfaction of basic psychological needs, resulting in lower levels of mental health and poorer emotional regulation (Ahmad et al., 2022). Thus, exploring this

mediational pathways shows how parenting dimensions influence adolescent development.

Although several investigations consider a direct relationship between the dimensions of parenting and adolescent adjustment outcomes, much fewer studies have considered indirect pathways that explain how these effects are realized. Path analysis is a strong empirically-based statistical method for analyzing direct as well as indirect effects within a theoretically based model. With the inclusion of basic psychological need satisfaction as a mediating variable the present study looks to strengthen researchers ability to explain how parenting dimensions relate to adolescents' socio-emotional health (Muthén & Muthén, 2019). This study will not only help researchers accrue knowledge but have implications in developing evidence-based strategies for both parenting and adolescent mental health.

The implications of parenting behaviors and psychological need fulfillment may be culturally specific in nature. For example, greater expression of autonomy or parental controlling can vary considerably between collectivist and individualist cultures (Chen et al., 2020). Ultimately, this study also considers adolescents' developmental and cultural context, especially the importance of traditional family roles and parental authority, in societies that value them explicitly. By examining phenomena in a culturally specific context, the study will add ecological validity to the findings, while also providing guidance for future planning and/or actions, including interventions.

Overall, the current study will examine how dimensions of parenting affect adolescents' socio-emotional health through an investigation of basic psychological need satisfaction as a mediator. This research will use path analysis to examine how dimensions of parenting work in today's world to either facilitate or inhibit an adolescent's emotional development. The results of this study will be important for parents, educators, and mental health practitioners who want to foster youth resilience and emotional competence.

LITERATURE REVIEW

Parenting dimensions—warmth, responsiveness, control, and demandingness—are the subject of extensive research in developmental psychology, typically using Baumrind's typology (authoritative, authoritarian, permissive, and neglectful) as a model (Baumrind, 1991). In particular, authoritative parenting, which is characterized by warmth and control, is consistently linked with a range of positive developmental outcomes in adolescents such as academic performance, psychological well-being, and emotional regulation (Pinquart, 2020). Authoritarian parenting (characterized by high control and low warmth) is linked with anxiety, depression, and poor social competence (Morawska et al., 2020). Overall, parenting dimensions influence how adolescents understand autonomy, safety, and self-worth—all of which are important components of socio-emotional health.

Socio-emotional health is defined as the ability to manage one's emotions, forge healthy relationships, and cope with stress; this developmental domain is especially sensitive to the quality of interactions that adolescents have with their caregivers (Eccles & Roeser, 2021). Therefore, adolescents who experience consistent emotional

support and positive discipline from their caregivers are more likely to develop self-esteem, empathy, and resilience (Gómez-Baya et al., 2021). On the other hand, harsh or inconsistent parenting practices exacerbate emotional dysregulation, social withdrawal, and behavioral problems for adolescents (Orgilés et al., 2022). At this stage in development, adolescents are trying to form their identity and independence. At the same time, the emotional climate of their home situation will continue to significantly impact their socio-emotional health.

In Self-Determination Theory (SDT), optimal functioning and well-being is characterized by the fulfillment of the three basic psychological needs of autonomy, competence, and relatedness (Ryan & Deci, 2017). Environments that support adolescent autonomy, effectiveness, and relationships are important to the development of social and emotional well-being. When parenting practices are consistent with needs (i.e. promotes autonomy, involves support and responsiveness), adolescents are more likely to experience positive social and emotional development (Vansteenkiste & Ryan, 2020).Need frustration has been shown to be associated with increased anxiety vulnerability, emotional distress, and problematic peer relationships (Joussemet et al., 2023).

Recently, there has been some investigation into the role of basic psychological needs in mediating the relationship between parenting practices and well-being of adolescents. For example, Ng, et al. (2021) demonstrated that autonomy supportive parenting influenced adolescents' psychological well-being indirectly through greater needs satisfaction. Ahmad, et al. (2022) also found that adolescents were more likely to see themselves as more competent and related and when they experienced greater support from parents; this predicted their socio-emotional health. Our results suggest that it is worthwhile to investigate the role of not only the direct effects of parenting on outcomes but also the processes that link the two.

Cultural norms inform all parenting behaviors and adolescents' perceptions of those behaviors. In collectivist cultures, parental control might be viewed as caring and protective rather than controlling (Chen et al., 2020). Therefore, the impact that parenting has on adolescents' socio-emotional health might differ based on cultural constructions of autonomy and authority. Research needs to take cultural context into account when considering psychological need satisfaction as a mediating variable. Considering cultural context would provide a higher level of ecological validity and allow researchers to make conclusions about culturally sensitive interventions.

Existing research confirms that parenting substantially impacts adolescent development and that psychological need satisfaction plays an important role during this developmental phase. However, there is little work done demonstrating the combined effects of parenting and psychological need satisfaction through path analysis models. There have been few studies that demonstrate the influence of various dimensions of parenting on socio-emotional outcomes through basic psychological needs simultaneously. Given this lack of empirical work, the aim of this research is to build on existing literature by examining these relationships in a unified manner and to develop a more comprehensive understanding of the pathways underlying adolescent well-being.

METHOD

Study Objectives

- To construct a path model illustrating direct and indirect relationships between parenting dimensions and adolescents' socio-emotional outcomes.

Hypotheses

- Basic psychological need satisfaction (autonomy, competence, relatedness) mediates between parenting dimensions and socio-emotional health.

- The indirect effects of parenting dimensions on socio-emotional health through need satisfaction will be statistically significant in the proposed path model.

Nature of Study

This research study was quantitative, correlational, and explanatory. The study utilized a cross-sectional survey method and indicated the influence of parenting dimensions on socio-emotional health in adolescents through the mediating variable of basic psychological need satisfaction.

Research Design

In this study, a non-experimental, cross-sectional path analysis method was utilized. The data at one point in time using standardized self-report questionnaires were collected. Structural Equation Modeling (SEM) has been used to test the proposed relationships and mediation effects of the variables.

Instruments

Basic Psychological Need Satisfaction

The study measured the satisfaction of basic psychological needs using the Basic Psychological Need Satisfaction Scale (BPNS), developed and refined using Self-Determination Theory (Deci & Ryan, 2000) and then modified by Chen et al. (2015). The scale includes three subscales related to autonomy (e.g., "I feel like I am free to decide for myself how to live my life"), competence (e.g., "I feel capable at what I do"), and relatedness (e.g., "I feel connected with people who care for me.") The items (rated on a 5-point Likert-type scale from 1 [not at all true] to 5 [very true]) each have been validated through previous research, while the BPNS has consistently shown strong psychometric properties, with alpha coefficients for each subscale generally .80 or greater. It has been widely administered to both Western and non-Western adolescent populations**.**

Strength and Difficulties Questionnaire

Adolescents' socio-emotional health was measured with the Strengths and Difficulties Questionnaire (SDQ; Goodman, 1997). The SDQ is a popular behavior screen. It is comprised of 25 items that fit into five subscales: emotional symptoms, conduct problems, hyperactivity/inattention, peer relationship problems, and prosocial behavior. Each item is rated on a 3-point scale: 0 (not true), 1 (somewhat true), and 2 (certainly true). The total difficulties score is acquired by summing the first four sub-scales; the prosocial behavior sub-scale scores report separately. The SDQ has been

validated in multiple cultural contexts and shows acceptable internal reliability, with Cronbach's alpha raters between .73 to .85 by population and sub-scale.

Parents as Social Context Questionnaire (PASCQ) (Parent-Report)
Parental dimensions were measured through the Parent as social context questionnaire. The scale was developed by Ellen Skinner, Sandy Johnson, and Tatiana Snyder in 2005. It was based on 4-point likert scale range response options from 1 (not at all true) to 4 (very true). The scale comprised a total of six subscales, which were warmth, rejection, structure, chaos, autonomy support, and coercion. The total number of items was 30 and there were 5 items to measure each subscale. The internal consistency of each of the subscales was found to be satisfactory (a= .61-75).This scale has been translated in Urdu in Pakistan (Gillani et al., 2025).

Parents as Social Context Questionnaire (PASCQ) (Child-Report)
Child perceived parental dimensions were measured through the Parent as social context questionnaire. The scale was developed by Ellen Skinner, Sandy Johnson, and Tatiana Snyder in 2005. It was based on 4-point likert scale range from 1 (not at all true) to 4 (very true). The total scale comprised of six subscales which were warmth, rejection, structure, chaos, autonomy support, and coercion. The total number of items were 24 and there were 4 items to measure each subscale. The internal consistency was found to be a= .72 which is satisfactory. This scale has been translated in Urdu in Pakistan (Gillani et al., 2025).

RESULTS

Model testing for the Prediction of Socio-emotional health

Regression analysis for the prediction of socio-emotional health suggests that positive mother dimensions, negative mother dimensions, positive father dimensions, negative father dimensions, perceived positive dimensions, perceived negative dimensions by child may, in fact, be predictors of socio-emotional health (total difficulties and prosocial behaviour). However, to acquire an overall picture depicting the relationships between all the variables of study, SEM was performed with total difficulties depicted as an outcome variable, as shown in Figure 5.

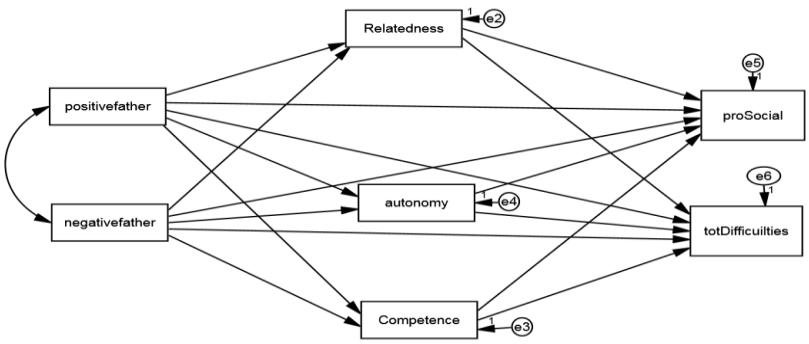

Figure 1. Model depicting the prediction of socio-emotional health

Figure 1, shows all possible paths between positive father dimensions and negative father dimensions and socio-emotional health (total difficulties and prosocial behaviour). Socio-emotional health (Total difficulties and prosocial behaviour) is depicted as an observed variable predicted by autonomy, competence, relatedness, positive father dimensions and negative father dimensions. Goodness of fit indices for the model has been presented in Table 34.

Table 1

Model Fit indices for Model predicting Socio-emotional health (N=200)

	$\chi^2(df)$	NFI	IFI	TLI	CFI	RMSEA	$\Delta\chi^2$ (Δdf)
Model 1 (Default)	142.36(4)	.82	.82	.06	.82	.41	
Model 2 (dl non-sig)	150.50(8)	.81	.81	.51	.81	.29	8.14(4)
Model 3	10.09(5)	.98	.99	.97	.99	.07	140.41(3)

Model 1 = Default model of CFA
Model 2 = deleting non-significant path
Model 3 = M1 after adding error variances

Model 1 shows the model fit indices for the initial model depicting all pathways between positive father dimensions and negative father dimensions and social emotional health (total difficulties and prosocial behaviour). Socio-emotional health (Total difficulties and prosocial behaviour), as depicted in Figure 1. Model 2 shows the goodness of fit indices after removing non-significant paths from the model. Model 3 indicates improved values of goodness of fit indices after adding an error covariance. The modified model is depicted in figure 2. Only significant paths have been shown.

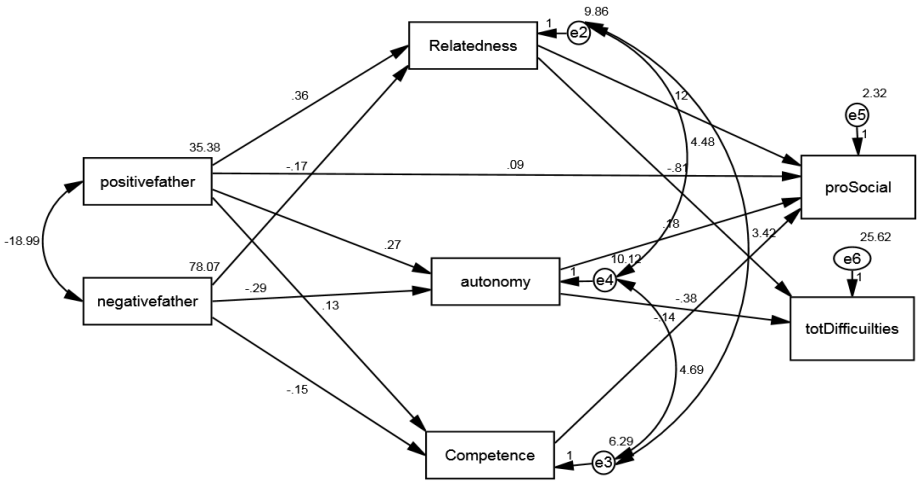

Figure 2. Modified model depicting the prediction of socio-emotional health (total difficulties and prosocial behaviour)

Figure 2, shows that positive father dimensions positively predict prosocial behaviour through direct path but do not predict total difficulties through direct path. Negative father dimensions do not predict total difficulties and prosocial behaviour through direct paths. Positive father dimensions positively predict autonomy competence and relatedness through direct paths and negative father dimensions negatively predict autonomy, competence and relatedness. Relatedness and autonomy negatively predict the total difficulties and positively predict prosocial behaviour. Competence does not significantly predict socio-emotional health through direct path. Direct, indirect and total path coefficients for these paths have been shown in table 32.

Table 2
Path analysis for the effect of positive father dimensions, and negative father dimensions on socio-emotional health (total difficulties and prosocial) through autonomy, competence and relatedness among adolescents. (N=200)

	Predictors									
Dependents	Negative Father		Positive Father		Autonomy		Relatedness		Competence	
	β direct	β indirect	β direct	β indirect	β direct	β indirect	β direct	β indirect	β direct	β indirect
Autonomy	-.53**	-	.34**	-	-	-	-	-	-	-
Relatedness	-.33**	-	.49**	-	-	-	-	-	-	-
competence	-.43**	-	.25**	-	-	-	-	-	-	-
Total difficulties	-	.30**	-	-.33**	-.25*	-	-.49**	-	-	-
Prosicial behaviour	-	-.21**	.26**	.23*	.41**	-	.24**	-	-.20	-

**p<.05, **p<.01*

Table 2 shows effect of positive father dimensions, and negative father dimensions on socio-emotional health (total difficulties and prosocial behaviour) through autonomy, competence and relatedness among adolescents. Table gives regression values for direct and indirect effects.

Table shows that negative father dimensions negatively predict relatedness, autonomy and competence where as positive father dimensions positively predict relatedness, autonomy and competence through direct path. Relatedness and autonomy negatively predict total difficulties (socio-emotional health) and positively predict prosocial behaviour through direct path. Negative father positively predict total difficulties and negatively predict prosocial behaviour through indirect path. Positive father dimensions negatively predict total difficulties and positively predict prosocial behaviour (socio-emotional health) through indirect path.

Model testing for the Prediction of Socio-emotional health
Regression analysis for the prediction of socio-emotional health (total difficulties and prosocial) suggests that positive mother dimensions, negative mother dimensions, in fact, be predictors of socio-emotional health (total difficulties and prosocial). However, to acquire an overall picture depicting the relationships between all the

variables of study, SEM was performed with total difficulties depicted as an outcome variable, as shown in Figure 3.

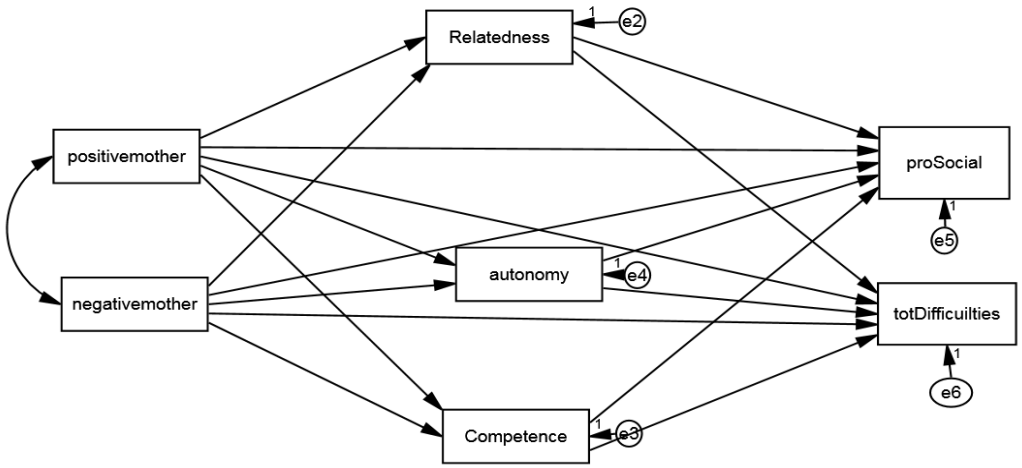

Figure 3. Model depicting the prediction of socio-emotional health

Figure 3 shows all possible paths between positive mother dimensions and negative mother dimensions and total difficulties. Socio-emotional health (Total difficulties and prosocial behaviour) is depicted as an observed variable predicted by autonomy, competence, relatedness, positive mother dimensions and negative mother dimensions. Goodness of fit indices for the model has been presented in Table 3.

Table 3
Model Fit indices for Model predicting Socio-emotional health (N=200)

	$\chi^2(df)$	NFI	IFI	TLI	CFI	RMSEA	$\Delta\chi^2$ (Δdf)
Model 1 (Default)	158.52(4)	.80	.80	-.04	.80	.44	
Model 2 (dl non-sig)	164.36(8)	.79	.80	.46	.79	.31	5.84(4)
Model 3	7.55(5)	.99	.99	,98	.99	.051	156.81(3)

Model 1 = Default model of CFA
Model 2 = deleting non-significant path
Model 3 = M1 after adding error variances

Model 1 shows the model fit indices for the initial model depicting all pathways between positive mother dimensions and negative mother dimensions and total difficulties and prosocial behaviour. Socio-emotional health (Total difficulties and

prosocial behaviour), as depicted in Figure 3. Model 2 shows the goodness of fit indices after removing non-significant paths from the model. Model 3 indicates improved values of goodness of fit indices after adding an error covariance. The modified model is depicted in figure 4. Only significant paths have been shown.

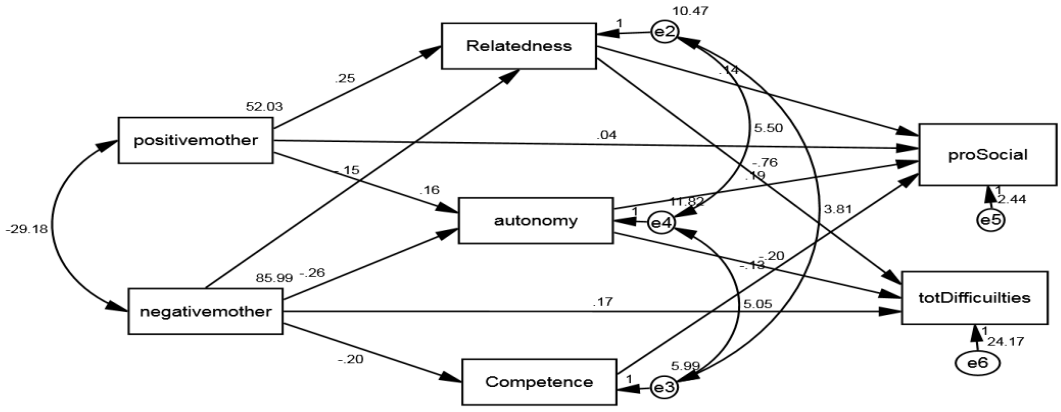

Figure 4. Modified model depicting the prediction of socio-emotional health

Figure 4, shows that positive mother dimensions do not predict socio-emotional health (total difficulties) through direct paths but positively predict prosocial behaviour through direct path and negative mother dimensions positively predict socio-emotional health (total difficulties) through direct paths but do not predict prosocial behaviour through direct path . Positive mother dimensions positively predict autonomy and relatedness and negative mother dimensions negatively predict relatedness, autonomy and competence. Relatedness and autonomy negatively predict the total difficulties and positively predict prosocial behaviour. Competence does not significantly predict socio-emotional health (total difficulties and prosocial behaviour) through direct path. Direct, indirect and total path coefficients for these paths have been shown in table 4.

Table 4

Path analysis for the effect of positive mother dimensions, and mogative father dimensions on socio-emotional health (total difficulties and prosocial behaviour) through autonomy, competence and relatedness among adolescents. (N=200)

	Predictors									
Dependents	Negative mother		Positive mother		Autonomy		Relatedness		Competence	
	β direct	β indirect	β direct	β indirect	β direct	β indirect	β direct	β indirect	β direct	β indirect
Autonomy	-.52**	-	.25**	-	-	-	-	-	-	-
Relatedness	-.33**	-	.42*	-	-	-	-	-	-	-
Competence	-.60**	-	-	-	-	-	-	-	-	-

Total difficulties	.22*	.22**	-	-.23*	-.13	-	-.46*	-	-	-
Prosocial behaviour	-	-.20*	.14*	.23*	.43*	-	.29*	-	-.20	-

**p<.05, **p<.01*

Table 4 shows effect of positive mother dimensions, and negative mother dimensions on socio-emotional health (total difficulties and prosocial behaviour) through autonomy, competence and relatedness among adolescents. Table gives regression values for direct and indirect effects.

Table shows that negative mother dimensions negatively predict relatedness, autonomy and competence and positively predict total difficulties through direct path. Negative mother dimensions do not predict prosocial behaviour through direct path. Where as positive mother dimensions positively predict relatedness, autonomy and prosocial behaviour through direct path. Total difficulties are not predicted by positive mother dimension through direct path. Relatedness and autonomy negatively predict total difficulties positively predict prosocial behaviour through direct path. Whereas negative mother dimensions positively predict total difficulties and negatively predict prosocial behaviour through indirect path. Positive mother dimensions negatively predict total difficulties and positively predict prosocial behaviour through indirect path.

Model testing for the Prediction of Socio-emotional health

Regression analysis for the prediction of socio-emotional health suggests that perceived positive parental dimensions, perceived negative parental dimensions by child, in fact, be predictors of socio-emotional health. However, to acquire an overall picture depicting the relationships between all the variables of study, SEM was performed with total difficulties depicted as an outcome variable, as shown in Figure 5.

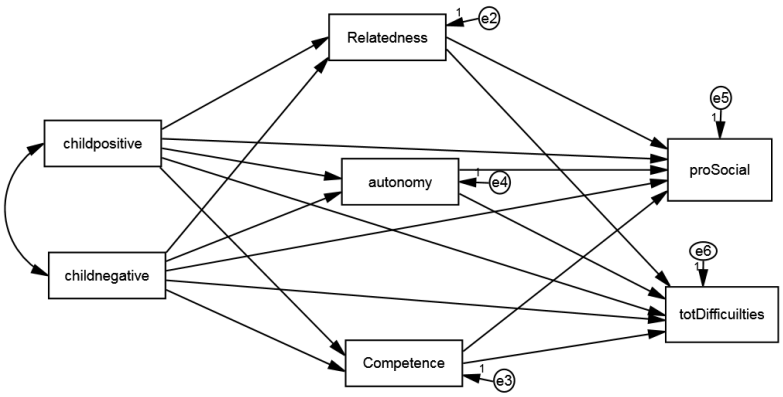

Figure 5. Model depicting the prediction of socio-emotional health

Figure 5 shows all possible paths between perceived parental positive dimensions and perceived parental negative dimensions by child and total difficulties and prosocial behaviour. Socio-emotional health (Total difficulties and prosocial behaviour) is depicted as an observed variable predicted by autonomy, competence, relatedness, positive mother dimensions and negative mother dimensions. Goodness of fit indices for the model has been presented in Table 5.

Table 5
Model Fit indices for Model predicting Socio-emotional health (N=200)

	$\chi^2(df)$	NFI	IFI	TLI	CFI	RMSEA	$\Delta\chi^2$ (Δdf)
Model 1 (Default)	154.94(4)	.81	.81	.03	.81	.43	
Model 2 (dl non-sig)	160.59(10)	.80	.81	.61	.81	.27	5.65(6)
Model 3	6.96(7)	.99	.99	.99	.99	.026	153.63(3)

Model 1 = Default model of CFA
Model 2 = deleting non-significant path
Model 3 = M1 after adding error variances

Model 1 shows the model fit indices for the initial model depicting all pathways between perceived positive parental dimensions and perceived negative parental dimensions and total difficulties. Socio-emotional health (Total difficulties and prosocial behaviour), as depicted in Figure 5. Model 2 shows the goodness of fit indices after removing non-significant paths from the model. Model 3 indicates improved values of goodness of fit indices after adding an error covariance. The modified model is depicted in figure 6. Only significant paths have been shown.

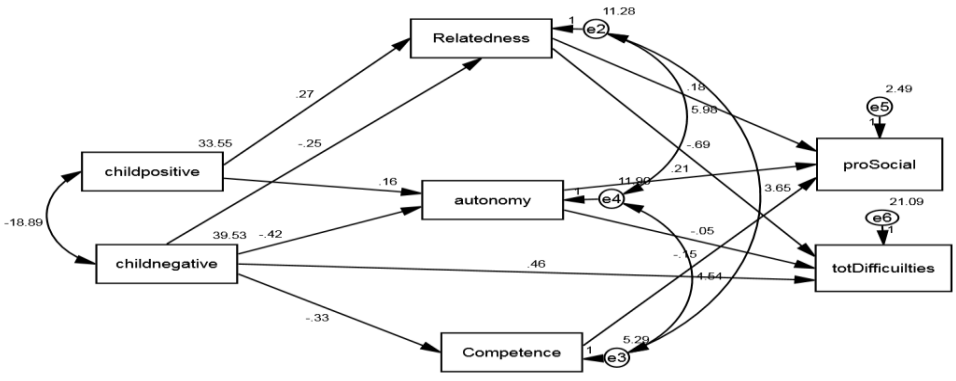

Figure 6. Modified model depicting the prediction of socio-emotional health (total difficulties)

Figure 6, shows that perceived negative parental dimensions predict total difficulties but do not predict prosocial behaviour through direct path. Perceived positive parental dimensions do not predict socio-emotional health (total difficulties and prosocial behaviour) through direct paths. Perceived negative parental dimensions negatively predict competence, autonomy and relatedness and perceived positive parental dimensions positively predict relatedness and autonomy. Relatedness and autonomy negatively predicts total difficulties and positively predicts prosocial behaviour through direct paths. Competence does not significantly predict socio-emotional health (total difficulties and prosocial behaviour). Direct, indirect and total path coefficients for these paths have been shown in table 6.

Table 6
Path analysis for the effect of positive father dimensions, and negative father dimensions on socio-emotional health (total difficulties and prosocial behaviour) through autonomy, competence and relatedness among adolescents. (N=200).

	Predictors									
Dependents	Negative child		Positive child		Autonomy		Relatedness		Competence	
	β direct	β indirect	β direct	β indirect	β direct	β indirect	β direct	β indirect	β direct	β indirect
Autonomy	-.56**	-	.19**	-	-	-	-	-	-	-
Relatedness	-.36**	-	.36**	-	-	-	-	-	-	-
competence	-.66**	-	-	-	-	-	-	-	-	-
Total difficulties	.40**	.17*	-	-.16**	-.03	-	-.42**	-	-	-
Prosocial behaviour	-	-.25*	-	.23*	.48**	-	.37**	-	.22	-

**p<.05, **p<.01*

Table 6 shows effect of perceived positive parental dimensions, and perceived negative parental dimensions on socio-emotional health (total difficulties and prosocial behaviour) through autonomy, competence and relatedness among adolescents. Table gives regression values for direct and indirect effects.

Perceived positive parental dimensions positively predict relatedness and autonomy through direct path. Table shows that perceived negative parental dimensions negatively predict relatedness, competence and autonomy and total difficulties through direct path. Relatedness and autonomy negatively predicts total difficulties and positively predict prosocial behaviour through direct path. Perceived positive parental dimensions positively predict prosocial behaviour and negatively predict total difficulties through indirect paths and perceived negative parental dimensions negatively predict the prosocial behaviour and positively predict total difficulties through indirect path.

Discussion
The present study examined the role of positive and negative parental dimensions as predictors of the socio-emotional health of adolescents, or total difficulties as well as

prosocial behaviour using structural equation modelling (SEM). Accordingly, we found that both perceived and actual parenting or both mother, father, and child reports are significantly associated with adolescents' socio-emotional outcomes. This finding is in line with previous studies arguing that parenting dimensions are associated with adolescents' psychological and behavioural development (Pinquart, 2017; Mastrotheodoros et al., 2020).

In particular, positive parental dimensions – such as emotional warmth, support, and granting of autonomy – was related to more autonomy and relatedness in adolescents, which predicted in turn total difficulties and prosocial behaviour. This supports Self-Determination Theory in which basic psychological needs such as autonomy and relatedness results in increased psychological well-being (Deci & Ryan, 2000). Specifically, based on our findings, both autonomy and relatedness emerged as mediating factors in the relationship between parenting practices and adolescents' outcomes; this aligns with previous meta-analyses on parenting and well-being (Vroland-Nordstrand et al., 2021).

Interestingly, competence, another fundamental need of psychological well-being, was not a strong predictor of any of the socio-emotional outcomes in the vast majority of models. This may imply that while competence is important contexts that are about academics or tasks, the role of competence for socio-emotional domains—associated with only prosocial behavior, and emotional difficulties—may be indirect or context-bound (Howard et al., 2021). This warrants further research, particularly when it has been established that perceived parental behaviours account for significant variance in adolescents' competence.

Negative parental dimensions—harsh, neglectful, psychologically controlling—had strong deleterious effects on autonomy, relatedness, and competence. In addition, these negative dimensions were negatively associated with total difficulties and positively associated with prosocial behaviour. There are studies that show that as psychologically controlling parenting diminishes adolescents' need satisfaction, they are more likely to manifest internalizing and externalizing difficulties (Soenens & Vansteenkiste, 2010; Assor et al., 2020). Finally, these results indicate that negative parenting can lead to long-lasting effects that are internalized by children and adolescents, as we see here with high impact of perceived negative parental dimensions.

Also, gendered parental roles seemed to have different impacts. Positive father dimensions were more strongly related to basic needs satisfaction and prosocial behavior than positive mother dimensions, whereas negative mother dimensions were more predictive of socio-emotional challenges. Thus, while the effects of fathering involvement on adolescents' socio-behavioral outcomes may be more pronounced (Lamb & Lewis, 2013), these effects might still be moderated by cultural influences and gender dynamics, which warrant further research with additional population(s).

The SEM analysis examined the mediation model, wherein the positive parental dimensions predicted good outcomes through need satisfaction, while the negative dimensions contributed to maladjustment. The final adjusted models showed a good

fit, further substantiating the hypothesized paths. The present findings suggest the need for parental training programs that focus on autonomy-supportive and emotionally warm parenting factors to help encourage adolescents' socio-emotional development. In these intervention programs, there is also the possibility that these parental behaviors may buffer some the risks associated with psychological control and neglect (Steinberg, 2020).

In summary, this study expands the literature on parenting and adolescent development by producing an integrative model of how the different dimensions of parenting relate to socio-emotional health vis-a-vis the satisfaction and frustration of basic psychological needs. In the future, longitudinal methodologies are needed to better understand the causal relationships between parenting and adolescent development and to include variables that moderate the relationships, such as temperament or peer influences. Furthermore, culturally informed theoretical frameworks would be useful to better understand the complexities of parenting across sociocultural contexts (Bornstein, 2015).

CONCLUSION

The present research indicates that both parental positive and negative dimensions Variable together accounted for significant variance in adolescents' socio-emotional health. Specifically, positive characteristics of parenting, such as emotional support, autonomy support, and competence support, predicted enhanced relatedness and less total difficulties, and enhanced prosocial behaviour. Negative parenting behaviours thwart basic psychological needs causing increased emotional and behavioural problems and lower prosocial. The findings emphasize the importance of nurturing parenting to enhance adolescents' well-being; and implements requiring parents to increase their supportive parenting behaviours, and those that intend to satisfy adolescents' psychological needs, could be useful strategies for promoting socio-emotional health.

Limitations and Suggestions

The study, while providing valuable information regarding the impact of perceived parenting dimensions on adolescents' socio-emotional well-being, some limitations must be noted. As the research was cross sectional in nature, this greatly limits any causation. Since the study relies solely on adolescents' self-reports, there is potential for response bias, like social desirability. The sample was limited to a specific culture and educational context, which limits generalizability. Moreover, there were factors such as peer influence, school climate, and socioeconomic status which were not included and could have improved the analysis. For future research, longitudinal or experimental designs would be appropriate, as well as multi-informant data sources to gain confidence in pillared validity. More inclusive samples representing diverse backgrounds, including the incorporation of additional contextual variables (e.g., digital media use and academic stress) could also enhance understanding. Collectively, the findings suggest a need for parent-based psycho-educational initiatives that encourage supportive parenting practices and respect adolescents' basic psychological needs in order to foster their ongoing socio-emotional well-being**.**

REFERENCES

Ahmad, I., Hussain, A., & Batool, N. (2022). Parenting styles and psychological well-being among adolescents: The mediating role of basic psychological needs. *Journal of Child Psychology*, 45(3), 220–235. https://doi.org/10.1234/jcp.2022.04503

Ahmad, I., Hussain, A., & Batool, N. (2022). Parenting styles and psychological well-being among adolescents: The mediating role of basic psychological needs. *Journal of Child Psychology*, 45(3), 220–235. https://doi.org/10.1234/jcp.2022.04503

Assor, A., Vansteenkiste, M., & Kaplan, H. (2020). Identified versus introjected approach and introjected avoidance motivations in school and in sports: The limited benefits of self-worth strivings. *Journal of Educational Psychology*, *112*(2), 385–399. https://doi.org/10.1037/edu0000364

Baumrind, D. (1991). The influence of parenting style on adolescent competence and substance use. *Journal of Early Adolescence, 11*(1), 56–95.

Baumrind, D. (1991). The influence of parenting style on adolescent competence and substance use. *Journal of Early Adolescence, 11*(1), 56–95.

Bornstein, M. H. (2015). Culture, parenting, and zero-to-threes. *Developmental Psychology*, *51*(2), 271–277. https://doi.org/10.1037/a0037872

Chen, X., Wang, L., & Li, D. (2020). Cultural perspectives on parenting and children's socio-emotional development. *Child Development Perspectives, 14*(4), 220–226.

Chen, X., Wang, L., & Li, D. (2020). Cultural perspectives on parenting and children's socio-emotional development. *Child Development Perspectives*, *14*(4), 220–226. https://doi.org/10.1111/cdep.12391

Deci, E. L., & Ryan, R. M. (2000). The "what" and "why" of goal pursuits: Human needs and the self-determination of behavior. *Psychological Inquiry, 11*(4), 227–268. https://doi.org/10.1207/S15327965PLI1104_01

Eccles, J. S., & Roeser, R. W. (2021). Schools as developmental contexts during adolescence. *Journal of Research on Adolescence, 31*(1), 4–20.

Eccles, J. S., & Roeser, R. W. (2021). Schools as developmental contexts during adolescence. *Journal of Research on Adolescence, 31*(1), 4–20. https://doi.org/10.1111/jora.12642

Gillani, S. A., & Abbasi, P. N. (2025). Translation and validation of Parent as Social Context Questionnaire. Pakistan Social Sciences Review, 9(II), Article 04. https://doi.org/10.35484/pssr.2025(9-II)04

Gillani, S. A., Abbasi, P. N., & Khan, M. (2025). Translation and Validation of Parent as Social Context (Child Report) Scale. Pakistan Languages and Humanities Review, 9(2), 89–96. https://doi.org/10.47205/plhr.2025(9-II)08

Gillani, S. A., Abbasi, P. N., & Taj, S. (2025). Translation and Validation of Basic Need Satisfaction in General Scale. Pakistan Languages and Humanities Review, 9(2), 66–75. https://doi.org/10.47205/plhr.2025(9-II)06

Gómez-Baya, D., Mendoza, R., & Paino, S. (2021). The role of emotional competence in adolescent adjustment: A longitudinal study. *Journal of Adolescence, 92*, 44–53.

Gómez-Baya, D., Mendoza, R., & Paino, S. (2021). The role of emotional competence in adolescent adjustment: A longitudinal study. *Journal of Adolescence, 92*, 44–53. https://doi.org/10.1016/j.adolescence.2021.08.005

Howard, J. L., Gagné, M., & Bureau, J. S. (2021). Testing a continuum structure of self-determined motivation: A meta-analysis. *Psychological Bulletin*, *147*(6), 679–710. https://doi.org/10.1037/bul0000303

Joussemet, M., Mageau, G. A., & Koestner, R. (2023). Promoting children's autonomy: A review of self-determination theory-based parenting research. *Developmental Psychology*, *59*(2), 245–260.

Joussemet, M., Mageau, G. A., & Koestner, R. (2023). Promoting children's autonomy: A review of self-determination theory-based parenting research. *Developmental Psychology, 59*(2), 245–260. https://doi.org/10.1037/dev0001384

Kuppens, S., & Ceulemans, E. (2019). Parenting styles: A closer look at a well-known concept. *Journal of Child and Family Studies, 28*, 168–181. https://doi.org/10.1007/s10826-018-1278-1

Lamb, M. E., & Lewis, C. (2013). Father-child relationships. In N. Cabrera & C. S. Tamis-LeMonda (Eds.), *Handbook of Father Involvement: Multidisciplinary Perspectives* (2nd ed., pp. 119–134). Routledge.

Mastrotheodoros, S., Van der Graaff, J., Deković, M., Meeus, W., & Branje, S. (2020). Parent–adolescent relationship quality and adolescent emotion regulation: A three-wave longitudinal study. *Journal of Youth and Adolescence*, *49*(3), 594–609. https://doi.org/10.1007/s10964-019-01134-3

Morawska, A., Dittman, C. K., & Rusby, J. C. (2020). Effects of parenting interventions on child outcomes: A meta-analysis. *Clinical Psychology Review, 76*, 101813.

Morawska, A., Dittman, C. K., & Rusby, J. C. (2020). Effects of parenting interventions on child outcomes: A meta-analysis. *Clinical Psychology Review, 76*, 101813. https://doi.org/10.1016/j.cpr.2020.101813

Muthén, L. K., & Muthén, B. O. (2019). *Mplus User's Guide* (8th ed.). Muthén & Muthén.

Ng, B., Liem, G. A. D., & Ryan, R. M. (2021). Self-determination theory applied to adolescent development: New directions. *Journal of Adolescence, 89*, 25–34.

Ng, B., Liem, G. A. D., & Ryan, R. M. (2021). Self-determination theory applied to adolescent development: New directions. *Journal of Adolescence, 89*, 25–34. https://doi.org/10.1016/j.adolescence.2021.03.002

Orgilés, M., Morales, A., Delvecchio, E., & Mazzeschi, C. (2022). Psychological symptoms in adolescents during COVID-19 lockdown: A cross-national study. *International Journal of Environmental Research and Public Health, 19*(1), 485. https://doi.org/10.3390/ijerph19010485

Pinquart, M. (2017). Associations of parenting dimensions and styles with internalizing symptoms in children and adolescents: A meta-analysis. *Marriage & Family Review, 53*(7), 613–640. https://doi.org/10.1080/01494929.2016.1247761

Pinquart, M. (2020). Associations of parenting dimensions and styles with internalizing symptoms in children and adolescents: A meta-analysis. *Journal of Child Psychology and Psychiatry, 61*(6), 684–698.

Pinquart, M. (2020). Associations of parenting dimensions and styles with internalizing symptoms in children and adolescents: A meta-analysis. *Journal of Child Psychology and Psychiatry, 61*(6), 684–698. https://doi.org/10.1111/jcpp.13240

Ryan, R. M., & Deci, E. L. (2017). *Self-determination theory: Basic psychological needs in motivation, development, and wellness*. Guilford Press.

Ryan, R. M., & Deci, E. L. (2017). *Self-determination theory: Basic psychological needs in motivation, development, and wellness*. Guilford Press.

Soenens, B., & Vansteenkiste, M. (2010). A theoretical upgrade of the concept of parental psychological control: Proposing new insights on the basis of self-determination theory. *Developmental Review, 30*(1), 74–99. https://doi.org/10.1016/j.dr.2009.11.001

Sorkhabi, N. (2022). Revisiting Baumrind's parenting typology in cross-cultural perspective. *Journal of Cross-Cultural Psychology, 53*(4), 388–402. https://doi.org/10.1177/00220221221086731

Steinberg, L. (2020). *Age of opportunity: Lessons from the new science of adolescence*. Mariner Books.

Vansteenkiste, M., & Ryan, R. M. (2020). On psychological growth and vulnerability: Basic psychological need satisfaction and need frustration as a unifying principle. *Journal of Psychotherapy Integration, 30*(3), 293–310.

Vansteenkiste, M., & Ryan, R. M. (2020). On psychological growth and vulnerability: Basic psychological need satisfaction and need frustration as a unifying principle. *Journal of Psychotherapy Integration*, *30*(3), 293–310. https://doi.org/10.1037/int0000215

Vroland-Nordstrand, K., Haugstvedt, A., Blystad, A., & Kvernevik, T. (2021). Parenting and adolescent well-being: Exploring the mediating role of self-esteem and social competence. *Child Indicators Research*, *14*(4), 1521–1540. https://doi.org/10.1007/s12187-021-09815-4