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# PARENTING STYLES AND FAMILY STRUCTURE: THE OVERLOOKED CONCEPTS IN ADHD

Shazia Malik<sup>1\*</sup>, Roomana Zeb<sup>2</sup>, Samar Sadiq<sup>3</sup>

1\*PhD Scholar, Department of Psychology, University of Peshawar
 E-mail: shaz\_malik@hotmail.com
<sup>2</sup>Assistant Professor, Department of Psychology, University of Peshawar
 Email: roomazeb@uop.edu.pk
<sup>3</sup>Associate Professor, Govt. Girls Degree College Abbottabad,
 Email: Samarclinicalpsy@hotmail.com

\*Corresponding author: Ms. Shazia Malik and Dr Roomana Zeb
\*Department of Psychology, University of Peshawar, E-mail: shaz\_malik@hotmail.com
roomazeb@uop.edu.pk

#### Abstract

The present study focused on the moderating effect of family structure between impulsivity in children and Attention Deficit Hyperactivity Disorder (ADHD), as well as the role of parental styles in ADHD. Parenting Styles and Dimensions Questionnaire (PSDQ; Batool, 2013) and Disruptive Behavior Disorder scale (DBD, Loona & Kamal, 2002) were applied on 200 participants (n=100 parents of ADHD children & n=100, parents of typically developing children). It was assumed that family structure will moderate between child impulsivity and ADHD which was approved by the result. The second assumption stated significant differences in parenting styles used by parents of ADHD children and typically developing children. Results indicated that Parents of ADHD children exercised authoritarian style more than authoritative, and permissive parenting styles while the reverse was true for usually developing children. The study findings suggest the including familial context in understanding ADHD may help the parents of such children to positively manage their child's conduct.

Keywords: ADHD, parenting styles, family structure, impulsivity

## Introduction

Family is group of individuals tied together either due to blood relation or law (Whall, 1986, p. 241). Family as a social organization impacts children in their cultural, social and moral behaviours (Day, 2002). Parents are the basic building block of family and good parenting entails better health, wellbeing and biological and emotional growth (Gage et al., 2006). Stable parent-child relationships are at the core of a child's physical and mental health. Kimble, (2014) suggested that a child's character building is greatly affected by parent-child communication.

Developmental psychologists highlighted the parental influence on children via parental styles they exercise. Parenting styles are the practices parents use in raising their children. It encompasses the demands parent's make from their child, the rules set for them, expectations from the children, and the way discipline is exercised (Baumrind, 1991). Maladaptive discipline used by the parents may shatter the child's personality (Gau & Chang, 2013).

Baumrind (1960) by studying preschool-age children recognized three parenting styles, namely, authoritative, authoritarian and permissive (Baumrind, 1991). The authoritative parenting style, presents high behaviour control and responsiveness on the part of the parents. Being democratic in nature, this style permits parents to be more responsive and nurturing with their children even when they fail to meet the expectations. Baumrind (1978) suggested that Western experts recommend authoritative parenting as the most preferred style. As parents like their children to show assertiveness, be more socially responsible, self-controlled, and cooperative, authoritative parenting has proven to show positive outcomes like high self-esteem, high academic achievement, better social skills, and precise emotional control (Sanvictores, and Mendez, 2021).

On the contrary, authoritarian parenting is a strict parenting style that places high expectations to comply the parental rules and regulations, while discouraging open dialogue with parents. Authoritarian parents are restrictive and punitive asking children to follow the directives and praise parental work and effort (Santock, 2007). Authoritarian parents hold high expectations but do not explain the reasons for the rules set. They are less responsive to their children's needs. Children receiving this type parenting style show less social competence as always following commands instead of choosing between alternatives themself (Baumrind, 1968).

On the opposite pole to authoritarian parents, permissive parenting style lack high expectations, they have fewer rules and boundaries and it is at the disposal of children to follow rules. These parents show warmth, are lenient and do not turn down children requests as they do not want to disappoint their children (Robinson, Mandleco, Olsen, & Hart, 1995). The consequences of the permissive parenting style lays in between the other two parenting styles as they are less stern than the authoritarian but not as precise as authoritative parents.

Apart from parenting style the family life i.e., living either with both or single parent also exert influence on children development (Kuppens & Ceulmans, 2019). A stable family structure provides security and stability that the children need for healthy development (Sandstrom & Huerta, 2013). In a research by Mooney, Oliver and Smith (2009) a collapse in the family structure through divorce, death, or separation, may hampers the child's ability to function normally. Disrupted or discorded families give rise to single parenting who then have to manage through limited finances, time and availability for children (Mooney, Oliver & Smith, 2009). Parental conflicts may give rise to behavioral, developmental and educational challenges in children. In a stressful family environment both parents and children are at a risk of physical and mental health problems (Baker et al, 2003). One of such risk for children is Impulsivity and Attention Deficit Hyperactive disorder (ADHD). For example, broken families may pave the way for impulsivity. Although it is part of children's growing up to explore, push boundaries, and break rules it is challenging to spot when the child crosses the boundary between a normal developmental ill-behavior to a serious tract of impulsivity (Barkley, 2014).

Barkley (2014) described impulsivity as failing in exercising behavioral control. Impulsivity is one of the diagnostic features of ADHD. Acts of impulsive children precede their thinking, which results in quick but wrong answers; or crossing the streets carelessly. Their impulsivity don't let them wait what they want or for their turn. While upset they won't hesitate snatching a food or toy from another child (APA, 2013). According to diagnostic statistical manual (2013) impulsivity is serious if it endangers the child safety or when the child makes serious troubles at home or school. Most common signs of impulsivity include interrupting parents, impatience, inappropriate communication, and putting oneself in danger.

Impulsive children are more vulnerable to oppositionality, hostility and conduct disorder than other children (Ackerman, Brown, & Izard, 2003). Impulsivity in children is often studied through parent and teacher ratings of disruptive behavior. A common cause of impulsive acts can be attention deficit hyperactive disorder (Campbell, 2006). ADHD encompasses difficulty to stay focused and attentive on tasks, along with too much physical activity (hyperactivity). ADHD is usually treated through medication and behaviour therapy to reduce impulsivity and improve attention. According to the DSM-5 TR (American Psychiatric Association, 2000) ADHD accounts

for about 3% - 7% of school age children. Hasson and Fine (2012) found more prevalence of ADHD among males than females.

Literature suggests a strong association between parenting styles and child's behavioural issues, for example, Aunola and Nurmi (2005) investigated mother's parenting styles along with display of love and affection towards the child. They concluded that mother exert behavioural and psychological control over the children, especially in five years olds, parenting is linked to the child's later internalizing and externalizing behaviours. Internalizing behaviour include emotional or behavioural issues like anxiety and depression (Akhter et al., 2011), whereas, externalizing issues are manifested through ADHD and conduct problems (Akhter et al., 2011). Parenting styles may contribute towards some of these behavioural problems, like display of maladaptive discipline may deteriorate a child's personality (Gau & Chang, 2013).

Johnston (1982) reported mothers of children with ADHD as ruling, less obliged and not communicating than mothers of typically developing children. Such children, as a consequence show more defiant and negative behaviours (as cited in Wood, 2007). Jiménez-Barbero, et al, (2016) examined parental role in affecting externalizing behavior of children. They found a significant association between children externalization and high impulsivity, strong attitudes toward violence, and inconsistent parental styles in combination to gender and age differences. Moghaddam, et al, (2013) proposed that parents resort to a different parenting styles if the child is ADHD. The results showed that parents of ADHD children scored less on permissive and authoritarian parenting than the normal group, while, no significant differences existed between the two groups on authoritative parenting. Additionally, age, gender and parent's education were also studied as the contributory factors in ADHD and significant difference was found with reference to parenting styles.

Researches also delved into family factors that may counteract oppositional defiant symptoms of impulsive children (Frick et al., 1992). Their findings reveal that parental styles, surveillance and control are linked to a child's behavioural problems (Pettit et al., 2001). Till yet scant researches have investigated the moderating impact of family structure on impulsivity (Johnston & Mash, 2001). Although impulsivity has biological underpinnings which proves its relationship with oppositional defiant disorder symptoms, (Gadow et al., 2004), there can still be other related factors (e.g., parenting styles and family structure) that needs to be explored. The paradox for the parents of impulsive children is that when they exercise discipline it may lead to negative parental behaviours, which further increases oppositional defiant disorder in children (Reid, Patterson, & Eddy, 2002). It can be stated that child impulsivity in combination with maladaptive parenting styles may foster ODD features like stubborness, negativism, defiance, arguing with adult, disobeying social rules and norms etc. Paidipati and Deatrick (2014), concluded that family cohesiveness and communication patterns may have a significant impact on ADHD outcomes. Similarly, Muñoz-Silva et al. (2017) stated that children who experienced high levels of conflict and/or lack of support may struggle to manage impulsivity and ADHD symptoms in their family situations. Furthermore, research reveals family structure (normal versus broken) that is children raised by both parents living together or reared by a single parent might impact the link between impulsivity and ADHD in children (Montejo et al., 2015). These studies stress the multifaceted relationship between family structure, child impulsivity, and ADHD, featuring the significance of looking at the larger family context when designing treatment plans for children with ADHD. For the treatment of ADHD, family is important, so proper guidelines should be provided to the parents to manage the impulsivity and hyperactivity of their child. This study investigates that parent of ADHD children use different parenting style in child rearing practices. This will help to understand the contributory factors behind the disorder and helps in treating ADHD and associated issues of the children.

## **Research Hypotheses**

1. Family structure (single VS both parents) will moderate the relationship between impulsivity in children and ADHD.

2. Parents of children with ADHD will use different parenting styles as compared to parents of normal children.

## **METHOD**

# Sample

The sample of the present study consisted of 200 parents (n= 100 of ADHD & n= 100 normal children). Data from the parents of normal children was gathered from schools of Abbottabad and Mansehra through convenience sampling. Parents of children with ADHD were approached through purposive sampling by a referral from Clinic of Women Institute of Learning and Jinnah International Hospital Abbottabad. The parental sample included mothers and father of single parents (through divorce, death, separation) and dual parent households. Single parents were 75 and dual parents were 125.

#### **Instruments**

# Parenting Styles and Dimensions Questionnaire (PDQ, )

The Urdu Parenting styles and dimensions questionnaire (PSDQ, Batool and Mumtaz, 2013) comprise of 32 items measuring three parenting styles i.e., Authoritative, Authoritarian and Permissive. As a 5-point Likert scale, it gives a self-report measure of parenting used by mothers and fathers. Authoritative parenting style is assessed through warmth/acceptance, reasoning and autonomy granting. The authoritarian style includes verbal hostility, physical coercion, and nonreasoning. The permissive parenting is measured through indulgence. Alpha coefficients of the Urdu version from .40 to 0.84 (Akhter, Hanif, Tariq & Atta, 2011).

# **Disruptive Behavior Disorder Rating scale**

The Urdu Disruptive Behavior Disorder (DBD; Loona & Kamal, 2002) scale comprise of 42 items with four response options from 0 to 3. It is a Parent/Teacher rating scale which measures symptoms of ADHD including Inattention, Hyperactivity/ Impulsivity, Conduct disorder and Oppositional Defiant Disorder. The split-half reliability of Urdu version of DBD (0.91) shows high reliability.

## **Procedure**

The above mentioned forms were applied on the parents in an individual setting. Parents of normal children (n=100) were approached in schools in Mansehra and Abottabad, whereas, parents of children with ADHD were identified and approached in Jinnah International Hospital, Clinic of Women Institute of Learning Abbottabad as well as different private clinics of Mansehra. The sample comprised of 104 mothers and 96 fathers. Data was collected from the parent who brought the child for treatment if he/she fulfilled the criteria for sample selection. The participants were briefed about the study and an informed consent was taken. Initially screening was done to rule out impulsivity in normal children, after that the study scales were applied on the parents. Confidentiality was ensured and participants were thanked for their cooperation.

# **Results**

**Table 1** Psychometric Properties of Disruptive Behaviour Disorder Rating Scale and Parenting Style Dimensions Questionnaire

Scale	No. of items	M	SD	Range	Cronbach's α
DBDRS	32	50.05	16.51	1-104	.95
PSDQ	42	77.93	12.05	32-160	.88

Note. DBDRS=Disruptive Behaviour Disorder Rating Scale; PSDQ= Parenting Style Dimensions Ouestionnaire

Table 1 shows that both DBDRS and PSDQ) have high (.95 & .88) reliability.

**Table 2** Family Structure as a moderator between Impulsivity and ADHD

Variables	Model 1			Model 2		
Variables	В	В	SE	В	β	SE
Constant	22.89***		.21	24.05***		.22
HI	13.34***	.97***	.22	13.46***	.99***	.23
FS	.01	.001	.22	.02	002	.22
$HI \times FS$				.47*	$.036^{*}$	.21
$\mathbb{R}^2$	.95			.94		
$\Delta R^2$				.001		

*Note.* N=200; HI=Hyperactive Impulsivity; FS= Family Structure \*\*\*p < .001. \*p < .05

Table 2 illustrates the moderation of family structure between impulsivity and ADHD. Model 1 had a R² value of.95, indicating that the predictors explained 95% of the outcome, with F (2,197) = 1985.60, p<.001. The study found that impulsivity ( $\beta$ =.97, p<.001) and family structure do not predict ADHD ( $\beta$ =.001, p>.05). Model 2 had an R-value of.94, indicating that the predictors accounted for 94% of the outcome variation (F (3, 196) 1351.34, p<.001). The analysis found that ADHD was positively predicted by child impulsivity ( $\beta$ =.99, p<.001), family structure ( $\beta$ =.002, p>.05), and impulsivity x family structure ( $\beta$ =.03, p<.05). The  $\Delta$ R2 value of.001 indicated a 1% difference in variance between models 1 and 2, with  $\Delta$ F (1,196) = 4.86, p<.05. The results indicate that family structure moderates the relationship between child impulsivity and ADHD.

**Table 3** Comparison of Parental styles between parents of ADHD and Normal Children

CD				D	Cohen's d	
SD	M	SD	-t(198)	Ρ	Colleil S a	
5.52	29.20	2.76	4.92	.000	.69	
7.01	13.50	4.02	19.57	.000	2.77	
2.39	9.30	.46	22.94	.000	3.24	
	5.52 7.01	5.52 29.20 7.01 13.50	5.52 29.20 2.76 7.01 13.50 4.02	5.52       29.20       2.76       4.92         7.01       13.50       4.02       19.57	5.52       29.20       2.76       4.92       .000         7.01       13.50       4.02       19.57       .000	

*Note*. PS=Parenting Style

Table 3 showed significant mean differences in all parenting styles (t(200) = 4.92. p<.001) between parents of ADHD and normal children. Findings reveal parents of normal children using authoritative parenting more as compared to parents of ADHD children who used the other styles more.

#### **Discussion**

The present study focused on the moderating effects family structure exerts on the link between children's impulsivity and ADHD. The study elucidates the complex association of family environment viz a viz parenting styles and the effect it has on the conduct and development of children. The results offer new insight about ADHD and its relation with parenting styles and family structure.

Table 1 offers the psychometric properties of the scales indicating high reliability of the measures used in the present study. Table 2 represents the moderation of family structure on the association between child impulsivity and ADHD. In Model 1, examined the impacts of impulsivity on ADHD first which showed it significantly predicted ADHD. However, the second variable, family structure did not show a significant effect on ADHD symptoms. While entering the interaction between family structure and child impulsivity in Model 2, suggested that family structure impacted the connection between impulsivity and ADHD symptoms. The results of the present study can be related to the study conducted by Chu et al., (2012) who concluded that family dynamics impact the emergence of ADHD symptoms. Likewise, Paidipati and Deatrick (2014), stated that cohesiveness among family members and their communication patterns affects ADHD outcomes. Muñoz-Silva et al. (2017), found that children experiencing higher levels of conflict or who lack support struggle

more to deal with impulsiveness and ADHD features. Additionally, literature proved that being brought up by both parents versus being raised by a single parent might affect the association between impulsivity and ADHD (Montejo et al., 2019). The above findings reveal the intricate relationship between family structure, child impulsivity, and ADHD features, stressing the importance of seeing the larger family context when dealing with ADHD children. Single parents are more stressed as they have to deal with so many tasks alone so they use authoritarian o permissive parenting style which may lead to impulsivity in a child.

The second hypothesis of the study stated that parenting styles will differ with reference to raising ADHD versus normal children. Table 3 shows the different parenting styles practiced by parents of children with ADHD (hyperactive-impulsive) and parents of normal children. The results indicate significant mean differences in authoritative parenting style which is mainly used by parents of normal children, whereas parents of ADHD children scored higher on authoritarian, and permissive. Sanvictores and Mendez, (2021) also demonstrated that parenting styles, especially authoritative parenting, significantly impacts the development of impulsivity in children. Milevsky, et al (2007), studied parenting styles with reference to psychological issues in high school students. Results proved that children who experienced authoritative parenting style showed high self-esteem, satisfaction with life, and were at a lower risk of depression as compared to children brought up with other parenting styles. As authoritative parents allow their children to express their opinion and these parents express warmth and nurturance to their children which helps them to lead a healthy life style.

As the results showed parents of children with ADHD manifested higher scores on authoritarian parenting styles compared to typically developing children. These findings are consistent with previous (Johnston & Mash, 2001; Chronis-Tuscano et al., 2011), which revealed that authoritarian parenting is linked with high impulsivity particularly in children with ADHD. Children raised by authoritarian parents are not encouraged to explore independently, so they never learn to set their own rules and standards and become impulsive (Lansford et al., 2009).

Likewise, in permissive parenting styles the differences between the two groups were evident, i.e., the parents of children with ADHD scored higher on permissive parenting style than parents of normal children. Lengua and Kovacs (2005) concluded that permissive parenting may increase middle childhood adjustment issues. Tung et al. (2014) also found that exercising permissive parenting may exasperate or preserve ADHD symptoms in children.

Similarly on uninvolved parenting style, parents of ADHD children scored significantly higher than parents of normal children. Earlier studies also suggest that uninvolved parenting may be more common among parents of ADHD children. For example, Johnston and Mash (2001) stressed certain hardships that ADHD families bear, like increasing parental participation in child rearing.

The findings of the present study are supported by a meta-analysis (Barkley et al., 2002), which reported that authoritarian and permissive parenting styles were related with greater levels of ADHD symptoms than authoritative parenting. Likewise, Johnston and Mash's (2001) conducted a longitudinal study on children with ADHD and found that uninvolved parents developed more ADHD symptoms in their children over time.

## Conclusion

The present study shed light on the complex relationship between parenting styles, family structure, and child impulsivity with reference to ADHD. The present research studied family structure as a moderator between impulsivity and ADHD symptoms. The results supported the assumption that although impulsivity predisposes individuals to ADHD but family structure may moderate this relationship. Living either with a single parent or both parents may counteract the influence of impulsivity on ADHD. The findings reveal taking familial context in consideration while dealing with ADHD children is important. Additionally, significant differences were found in parenting styles used by parents of ADHD and normally developing children, particularly, authoritative parenting styles was more common in parents of normal children as compared to parents of children with ADHD, who exercised authoritarian and permissive parenting styles.

# **Limitations and Suggestion**

- 1. The present study used cross-sectional research design which lacks the establishment of cause and effect links. Longitudinal studies of parenting styles, viz-a-viz family structure and ADHD would offer explanation to the temporal patterns that arise between these variables.
- 2. The present research relied only on parental responses to measure the parenting styles and child impulsivity which may predispose biases in the data, like social desirability. Future studies should also include child self-reports to have a more thorough assessment of parenting styles.
- 3. Parental impact can be only one of the sources along with peer relations, educational setting, and the like. Future studies should incorporate diverse sources for a better understanding of ADHD.

# **Implications**

The research findings emphasize a multidisciplinary teamwork in dealing with the complex issues of ADHD by devising an appropriate treatment plan, parental education, and research related to ADHD management. Inclusion of Family therapy in an intervention may improve communication patterns, and parenting skills, to create more conducive family environment in ADHD management. Policymakers in Pakistan can utilize these findings in establishing support services and programs to promote family-centered approaches with reference to managing children issues.

## References

- 1. Ackerman, B. P., Brown, E., & Izard, C. E. (2003). Continuity and change in levels of externalizing behavior in school of children from economically disadvantaged families. *Child development*, 74(3), 694-709. Retrieved from https://www.ncbi.nlm.nih.gov/pmc/articles/PMC3066087/#R30
- 2. Akhter, N., Hanif, R., Tariq, N., & Atta, M. (2011). Parenting styles as predictors of externalizing and internalizing behavior problems among children. Pakistan *Journal of Psychological Research*, 26(1), 23.
- 3. American Psychiatric Association. (2000). Diagnostic and statistical manual of mental disorders: DSM-IV-TR. Washington, DC.
- 4. Baker, B. L., Blacher, J., Crnic, K. A., & Edelbrock, C. (2002). Behavior problems and parenting stress in families of three-year-old children with and without developmental delays. *American journal on mental retardation*, 107(6), 433-444. https://doi.org/10.1352/0895-8017(2002)107<0433:BPAPSI>2.0.CO;2
- 5. Barkley, R. A. (Ed.). (2014). *Attention-deficit hyperactivity disorder: A handbook for diagnosis and treatment*. Guilford Publications. Chicago. Retrieved from https://www.ncbi.nlm.nih.gov/pmc/articles/PMC3066087/#R30
- 6. Barkley, R. A., Fischer, M., Smallish, L., & Fletcher, K. (2002). The persistence of attention-deficit/hyperactivity disorder into young adulthood as a function of reporting source and definition of disorder. *Journal of abnormal psychology*, *111*(2), 279. https://psycnet.apa.org/doi/10.1037/0021-843X.111.2.279
- 7. Batool, S. S., & Mumtaz, A. N. (2015). Development and validation of parenting style scale. *Pakistan Journal of Psychological Research*, *30*(2), 225-248. Retrieved from https://dlwqtxts1xzle7.cloudfront.net/55339024/339-359-1-PB-libre.pdf?1513774522=&response-content-disposition=inline%3B+filename%3DDevelopment\_and\_Validation\_of\_Parenting.pdf
- 8. Baumrind, D. (1968). Authoritarian vs. authoritative parental control. *Adolescence*, *3*(11), 255. ISSN: 0001-8449.
- 9. Baumrind, D. (1971). Current patterns of parental authority. Developmental Psychology. https://doi.org/10.1037/h0030372
- 10. Baumrind, D. (1978). Reciprocal Rights and Responsibilities in Parent-Child Relations. Journal of Social Issues. https://doi.org/10.1111/j.1540-4560.1978.tb01038.x

- 11. Baumrind, D. (1991). The influence of parenting style on adolescent competence and substance use. *The Journal of Early Adolescence*, 11(1), 56-95. Retrieved from https://files.eric.ed.gov/fulltext/ED553154.pdf
- 12. Campbell, S. B. (2006). *Behavior problems in preschool children: Clinical and developmental issues*. Guilford Press.
- 13. Chronis-Tuscano, A., O'Brien, K. A., Johnston, C., Jones, H. A., Clarke, T. L., Raggi, V. L., ... & Seymour, K. E. (2011). The relation between maternal ADHD symptoms & improvement in child behavior following brief behavioral parent training is mediated by change in negative parenting. *Journal of abnormal child psychology*, *39*, 1047-1057. https://doi.org/10.1007/s10802-011-9518-2
- 14. Chu, K., Li, S., Chen, Y., & Wang, M. (2012). Family dynamics in families with children with Attention Deficit Hyperactivity Disorder. *Shanghai Archives of Psychiatry*, 24(5), 279-285. https://doi.org/10.3969/j.issn.1002-0829.2012.05.005
- 15. Day, R.D. (2002). Introduction to Family Processes (4th ed.). Routledge. https://doi.org/10.4324/9781410606426
- 16. Frick, P. J., Lahey, B. B., Loeber, R., Stouthamer-Loeber, M., Christ, M. A. G., & Hanson, K. (1992). Familial risk factors to oppositional defiant disorder and conduct disorder: parental psychopathology and maternal parenting. *Journal of consulting and clinical psychology*, 60(1), 49. Retrieved from https://www.ncbi.nlm.nih.gov/pmc/articles/PMC3066087/#R30
- 17. Gadow, K. D., Drabick, D. A., Loney, J., Sprafkin, J., Salisbury, H., Azizian, A., & Schwartz, J. (2004). Comparison of ADHD symptom subtypes as source-specific syndromes. *Journal of Child Psychology and Psychiatry*, 45(6), 1135-1149. doi: 10.1111/j.1469-7610.2004.00306.x
- 18. Gau, S. S. F., & Chang, J. P. C. (2013). Maternal parenting styles and mother—child relationship among adolescents with and without persistent attention-deficit/hyperactivity disorder. *Research in developmental disabilities*, 34(5), 1581-1594. doi:10.1016/j.ridd.2013.02.002
- 19. Graziano, P. A., & Garcia, A. (2016). Attention-deficit hyperactivity disorder and children's emotion dysregulation: A meta-analysis. *Clinical Psychology Review*, 46, 106–123. doi:10.1016/j.cpr.2016.04.011
- 20. Johnston, C., & Mash, E. J. (2001). Families of children with attention-deficit/hyperactivity disorder: review and recommendations for future research. *Clinical child and family psychology review*, *4*(3), 183-207. Retrieved from https://link.springer.com/article/10.1023/A:1017592030434
- 21. Kimble, A. B. (2014). *The parenting styles and dimensions questionnaire: A reconceptualization and validation*. Oklahoma State University. Retrieved from https://www.ncbi.nlm.nih.gov/pmc/articles/PMC4927255/
- 22. Kuppens, S., & Ceulemans, E. (2019). Parenting styles: A closer look at a well-known concept. *Journal of child and family studies*, 28(1), 168-181.
- 23. Lengua, L. J., & Kovacs, E. A. (2005). Bidirectional associations between temperament and parenting and the prediction of adjustment problems in middle childhood. *Journal of Applied Developmental Psychology*, 26(1), 21-38. https://doi.org/10.1016/j.appdev.2004.10.001
- 24. Loona, M. I., & Kamal, A. (2002). Gender differences among ADHD children on school social behaviour scale. *Journal of Behavioral Sciences*, *13*(1-2), 5-22. Retrieved from https://pdfs.semanticscholar.org/20f0/edb10dfd197408b5987 cbfbeb346a4bd79a6.pdf
- 25. Loona, M. I., & Kamal, A. (2011). Translation and adaptation of disruptive behaviour disorder rating scale. *Pakistan Journal of Psychological Research*, 26(2), 149. Retrieved from http://www.pjprnip.edu.pk/pjpr/index.php/pjpr/article/viewFile/23/16
- 26. Milevsky, A., Schlechter, M., Netter, S., & Keehn, D. (2007). Maternal and paternal parenting styles in adolescents: Associations with self-esteem, depression and life-satisfaction. *Journal of child and family studies*, *16*, 39-47. https://doi.org/10.1007/s10826-006-9066-5
- 27. Moghaddam, M. F., Assareh, M., Heidaripoor, A., Rad, R. E., & Pishjoo, M. (2013). The study comparing parenting styles of children with ADHD and normal children. *Archives of*

- *Psychiatry and Psychotherapy, 15*(4), 45-49. Retrieved from <a href="http://www.webmail.archivespp.pl/uploads/images/2013\_15\_4/45Moghaddam\_APP\_4\_2013.p">http://www.webmail.archivespp.pl/uploads/images/2013\_15\_4/45Moghaddam\_APP\_4\_2013.p</a> df
- 28. Montejo, J. E., Durán, M., del Mar Martínez, M., Hilari, A., Roncalli, N., Vilaregut, A., ... & Ramos-Quiroga, J. A. (2019). Family functioning and parental bonding during childhood in adults diagnosed with ADHD. *Journal of Attention Disorders*, *23*(1), 57-64. https://doi.org/10.1177/1087054715596578
- 29. Mooney, A., Oliver, C., & Smith, M. (2009). Impact of family breakdown on children's well-being. *Evidence review. Thomas Coram Research Unit Institute of Education, University of London*. doi: 10.1179/0024363914Z.00000000087
- 30. Muñoz-Silva, A., Lago-Urbano, R., Sanchez-Garcia, M., & Carmona-Márquez, J. (2017). Child/adolescent's ADHD and parenting stress: The mediating role of family impact and conduct problems. *Frontiers in psychology*, 8, 300021. https://doi.org/10.3389/fpsyg.2017.02252
- 31. Pettit, G. S., Laird, R. D., Dodge, K. A., Bates, J. E., & Criss, M. M. (2001). Antecedents and behavior-problem outcomes of parental monitoring and psychological control in early adolescence. *Child development*, 72(2), 583-598. doi:10.1111/1467-8624.00298
- 32. Reid, J. B., Patterson, G. R., & Eddy, J. M. (2002). A brief history of the Oregon model. *Antisocial behavior in children and adolescents: A developmental analysis and model for intervention*, 3-21. Retrieved from http://www.pmto.nl/documenten/briefhistory.pdf
- 33. Sandstrom, H., & Huerta, S. (2013). *The Negtive effects of instability on child development: a research Sysnthesis* (Vol. 3, pp. 87-90). Washington, DC: Urban Institute. Retrieved from https://www.urban.org > files.The Negative Effects of Instability on Child Development: A Research Synthesis.
- 34. Sanvictores, T., & Mendez, M. D. (2021). Types of parenting styles and effects on children. https://europepmc.org/article/nbk/nbk568743
- 35. Tung, I., Brammer, W. A., Li, J. J., & Lee, S. S. (2015). Parenting Behavior Mediates the Intergenerational Association of Parent and Child Offspring ADHD Symptoms. *Journal of Clinical Child and Adolescent Psychology: The Official Journal for the Society of Clinical Child and Adolescent Psychology, American Psychological Association, Division 53*, 44(5), 787. https://doi.org/10.1080/15374416.2014.913250
- 36. Wang, M. T., & Kenny, S. (2014). Longitudinal links between fathers' and mothers' harsh verbal discipline and adolescents' conduct problems and depressive symptoms. *Child development*, 85(3), 908-923. https://doi.org/10.1111/cdev.12143
- 37. Whall A. L. (1986). The family as the unit of care in nursing: A historical review. *Public Health Nursing*. *3*(4),240–249.