RELATIONSHIP BETWEEN PARENTING STYLES, SELF-EFFICACY AND OBSESSIVE-COMPULSIVE SYMPTOMS AMONG UNIVERSITY STUDENTS



by

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> Faculty of Management and Social Sciences Capital University of Science & Technology, Islamabad July, 2023

CERTIFICATE OF APPROVAL

It is certified that the Research Thesis titled "Relationship Between parenting styles, self-efficacy and obsessive-compulsive symptoms among university students" carried out by Hadia Masood Reg. No. BSP193024, under the supervision of Miss Irum Noureen, Capital University of Science & Technology, Islamabad, is fully adequate, in scope and in quality, as a Research Thesis for the degree of BS Psychology.

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Hadia Masood

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July, 2023

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ABSTRACT

The current study aimed at investigating the relationship between parenting styles, self-efficacy and obsessive-compulsive symptoms among university students. To assess these variables, the tools that were used were Parental authority Questionnaire (PAQ) developed by John Buri in 1991, general self-efficacy scale (GSE) developed by Schwarzer and Jerusalem in 1981, and the Obsessive-Compulsive Inventory -Revised (OCI-R), developed in 2002 by Foe Edna. A sample of 340 students was collected from various universities across twin cities. The results of this study supported the hypotheses of significant relationship between parenting styles and self-efficacy, showing significant correlation between parenting style and self-efficacy, additionally correlating the subscales of parenting styles. It can be concluded from the results and discussion that the individuals whose parents showed authoritative and permissive style had high-self-efficacy while students whose parents adopted authoritarian style had low self-efficacy. It was also observed that most noticeable difference between males and females is in the father authoritarian, suggesting fathers are perceived as more indifferent and highly control by males than females. While, female perceived their father as more restrictive than males. Females have higher obsessive-compulsive symptoms than males.

Key words: parenting styles, self-efficacy and obsessive-compulsive symptoms

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Chapter 1

INTRODUCTION

Challenges face by students in university life range from many stresses and pressure due to academic pressures, new increases in responsibilities, demanding workloads and even adjusting to the social environments. Also includes student's belief in themselves and supporting or negligence of parenting. All of these forces can increase the likelihood of psychological problems to develop (Lins, Carvalho, Menezes & Damasceno, 2016). A person's family has a significant impact in their lives as well as in the society as a whole. Evidently, families play a significant role in society. Children are influenced more by the family than by society or their peers. The family has a significant and positive impact on a child's development in all areas, including moral, cultural, and social development. (Zahedani et al., 2016)

The appropriate and balance contact between parents and their children is one of the factors that determine children's physical and mental health. According to Zahedani et al., (2016) among the many elements that influence children's development and healthy character, interactions between parents and their children are said to be the most fundamental and crucial ones.

Parenting styles

Baumrind (1971) described three parental practices/styles which parents use with their children, authoritarian style (low warmth and high control) meaning that when engaging with their children, authoritarian parents exert a strong sense of command and enforce their will. In this style, parents only want their children to listen to them and obey them, they have control over their children. The second style is the authoritative style (high warmth and high control), meaning authoritative parents focus on control and show love and freedom to their children at the same time. Parents might set rules but also listen to their children's need. Finally, the third style is the permissive (high warmth and low control). In this style, parent give full freedom to their children to do anything they want, they do not set any rules or control over their children. Using this freedom, the children might perform any good or bad behavior because their parents do not have a control over them. According to Baumrind (1991) permissive parents exhibit non-controlling behaviors and exercise limited influence over their children's actions. Moreover, parents emphasize on freedom of their child.

Parenting style always plays a vital role in a child's character building and personality. From the age, a child is a toddler to the age he/she becomes a young adult, the actions and decisions of their parents determine the personality output of their child. So mostly it is noticed that kinds of parents that are either lenient on their children's and ones that are over strict. Both these kinds of parents add prominent effects on their children personality and how they act in different situations (Serrano & Garcia, 2021). The different parenting styles have their own significance and limitations. In order for the adolescence to maintain their psychological well-being and also identity, they require affection and security from their parents. Parenting style refers to a parent's approach to raising a child. This has an effect on the child's psychological well-being, social interaction, and close connections. The way parents raise their children has a major impact on how well they'll grow in life. Supportive parents give way to welladjusted adults, while neglectful parenting causes a variety of developmental and adjustment problems (Maccoby & Martin 1983; Myroniuk et al., 2022).

The effects of parenting style on young adults, which mostly range from 18-21 years old and the way parents interact with their children highly effect the children in these age groups. Looking at the first situation in which parents overly facilitate their children and listen to their needs to an extent in which they suppress the independency

factor in the child, in such cases when the child reaches a certain age 18 above the parents start to look up to him/her to be financially, emotionally and mentally stable and strong to some extent but in these parenting style situations the child stays dependent on their parents most of the time, which also results in low psychological well-being (Kong & Yasmin, 2022).

However, parenting is a more complex process than simply providing support. Several theories over the years have cropped up in attempts to define the various methods of parenting, each falling on levels of support and control provided to the child. Myroniuk et al., (2022) studies laid several ground roots on the general types of parenting styles one could encounter, ranging from the authoritative parent that displays both high levels of support and control, the authoritarian parent that gives low support but imposes high control on their child, indulgent parents who show high support but low control, and finally the uninvolved parent, that gives neither support nor enforces control. From these studies it was suggested through evidence that children reared under authoritative parents prospered better than their peers in areas of achievement, development and even psychological wellbeing (Maccoby & Martin, 1983).

Self-efficacy

Self-efficacy of an individual plays an important role. Self-efficacy is belief in one's own ability, self-confidence and achievement of worthwhile goals (Bandura, 1994). Self-efficacy could be a person's belief in their ability and actions to finish a task or accomplish a goal. It encompasses an individual's confidence in themselves to manage their actions, exert an influence over their atmosphere, and keep intended within the pursuit of their goal. Individuals will have self-efficacy in numerous things and domains, like faculty, work, relationships, and alternative necessary areas (Tus, 2020).

People having a strong sense of their own abilities take an increased interest in the activities, skills that they engage in, strengthens a sense of commitment to their hobbies and pursuits, recover quickly back from failures or regrets and lastly view the challenging problems as tasks to be an opportunity. Whereas, people with a sense of weaker self-efficacy avoid difficult tasks, believe that troublesome tasks and things area unit on the far side their capabilities, focus on personal shortcomings, undesirable results and swiftly lose confidence in one's own abilities (Wang et al., 2022).

The capacity to engage in self-efficacy not only affects behavior but also exerts a major influence on a child's overall well-being. Self-efficacy allows and motivates young people to take on challenges and tasks that they believe they can achieve and keeps them motivated (Sckuch & Meese 2005; Korfiatis & Petrou, 2021). People with high self-efficacy opt to take on more difficult and challenging task and follow solution based approach that helps them to deal with obstacles. Low self-efficacy is related to feelings of obsessions and compulsions. Parents, who do not scold on their children's decisions, do not blame them for anything and appreciate their children in every step of their life brings high self-efficacy in their children while parents who play a negative role in their child's life bring low self-efficacy in their children. (Turner, Chandler & Heffer, 2012; Qutaiba & Gindrich, 2021). Martin et al., (2017) illustrated the influence of adaptive motivation (self-efficacy and mastery goals) on raising adaptive engagement (persistence and task management). To put it another way, highly motivated students take pride in their accomplishments and actively participate in their academic work. Students become motivated by their high self-efficacy that comes from their parents' support. Anxiety and failure avoidance, on the other hand, are

maladaptive motivational traits that induces negative engagement such as disengagement.

The importance of supporting authoritative parenting style is shown by the favorable direct and indirect effects of positive parenting on academic achievement on self-efficacy and underlines highlight the significance of improving this style for enhancing academic performances as well as psychosocial well-being (Schneider et al., 2022).

Obsessive-compulsive symptoms

Obsessions are persistent and recurrent images, thoughts and urges that are unwanted, completely invasive and struggled by the individual to push these away. Whereas the repetitive physical behaviors and cognitions that the individual desires to perform to reduce the discomfort caused by these obsessions are compulsions. According to the Diagnostic Statistical Manual-V (DSM-V) OCD is characterized by presence of obsessions and/or compulsions. Such symptoms make life hard for an individual, as they stay impaired with the daily routine and stability because these obsessions and compulsions are distressing and time tedious (DSM-V).

Obsessions are frequent and persistent thoughts, desires, or images that are experienced, at some point during the disturbance, as intrusive and unpleasant and that in most individuals cause significant fear or discomfort. The person attempts to ignore or suppress such thoughts, urges, or images, or to neutralize them with some other thought and measures (often by performing a compulsion). Compulsions are recurrent behaviors or mental acts that the person feels compelled to carry out in response to an obsession, or according to rules that must be strictly applied (Hudak & Gannon, 2022). Obsessive compulsive disorder is a portrayed as a neurological confusion that impacts the lives of 1 to 3 percent of individuals everywhere throughout the world. The feelings of distress and hopelessness by being unable to handle the new demands of student's life can manifest into the emergence of psychological problems including obsessive-compulsive disorder (Dokmen, 1987, Koc & Polat, 2006). Obsessive compulsive disorder (OCD) is identified with thoughts, inclinations, and tendencies that repeatedly and unintentionally bother the person. Obsessive habits are conducted as a result of these ideas. OCD is far most the fourth most common psychiatric disorder (Hellberg et al., 2020). Obsessive-Compulsive symptoms significantly affect social, familial well-being and impacts quality of life. University students are at greater risk to mental health issues if they experience neglectful parenting (Stanley & Manthrope 2001). OCD has been found to occur in 2.7% of the general population (Karno & Burnam, 1988), with adolescence and young adulthood being the most likely periods of its development (Rasmussen & Eisen, 1992).

Literature review

Conceptually, the American Heritage Dictionary of the English Language (2000) has defined one's parenting style as the "the quality of imagination and individuality expressed in one's actions and tastes when a person acts as a parent to raise or nurture." Operationally, it can be defined as the number of actions and the kinds of actions a parent will take in order to aid their child's development. A study conducted in Pakistan in 2014, hypothesized that those university students who have dysfunctional parenting would have more obsessive-compulsive symptoms and interpersonal problems and showed positive relationship between dysfunctional parenting and OC symptoms (Rizwan, 2014).

The different parenting styles that parents can employ when raising their kids can help and even mentally destroy a child. Authoritarian parenting style is a reflection of the harsh and prejudiced attitude of the parents. Children are under intense pressure to follow their parents' instructions and wishes, and their behavior is strictly monitored. Children are also frequently punished, and even when they succeed, they are rarely acknowledged or given gifts. The findings indicated that children raised by permissive parents experienced less stress than those reared by authoritarian parents (Masitah & Pasaribu, 2022). While, authoritative parenting is considered the best parenting style to raise a child in a better way and then comes the permissive parenting where parents don't discipline and manage their children; they let them do as they choose. In this type of parenting, parents never set restrictions for their children's behaviour, giving them the freedom to act whenever they like and children then act in accordance with their own desires (Masitah & Pasaribu, 2022).

A longitudinal twin study was conducted to observe if retaliatory parenting and stressful life aids in OCD development. Results were obtained using self-report inventory with the time lapse of two years. It was found that the individuals who had a stressful life event, but non-punitive parenting showed improvements in the score, on the contrary, the individuals that had retaliatory parenting along with stressful life events tend to have increased symptomology of OCD. Thus, it was concluded that stressful life events play core role in development of OCD, whereas, prevalence is high if retaliatory parenting style co-exists (Krebs et al., 2019). Another study by Sahithya (2019) aimed to review studies of west and india in order to study difference in pareint styles and outcomes. It was found that although there were cultural difference between west and Asian countries, the effect of parenting style on children were same across culture, and culture did not serve as a moderator for parenting style and outcome of child. An authoritative parenting style was associated with better outcome than authoritarian and neglected parenting style in both western and Asian countries. Findings on permissive parenting were mixed in both cultures.

Self-efficacy plays a crucial role in determining the effectiveness of self-care behaviors in people with OC symptoms. It is one of important bandura's social learning theory, that beliefs should be present in one's ability to manage thoughts and feelings (Suculluoglu, 2019). Parents who are responsive to their child's need tend to build sense of high self-efficacy in their children, whereas unresponsive parents break down selfefficacy level in their children. It is observed that the children with low self-efficacy have grown up in stressful families (Morovati, 2009).

One finding in a study indicated that on achievement motivation and academic self-efficacy, the authoritative parenting style had a good direct effect, while the authoritarian parenting style had a negative direct effect. Although it had no impact on motivation for accomplishment, the permissive parenting style had a negative effect on academic self-efficacy. Additionally, academic self-efficacy positively impacted academic achievement directly (Moradian et al., 2021). Another study showed that the adolescents self- and family-environment characteristics influence academic achievement that is one of the learning outcome indicators. The aim of the study was to inspect the impact of adolescent academic accomplishment on child features, family characteristics, parenting style as reported by the teens, self-efficacy, and self-regulated learning. As adolescence is the time when cognitive skills connected to intelligence, like the capacity for comprehension, assimilation, and problem-solving, are at their peak. The outcome of adolescents' performance in this cognitive stage can be determined by the fulfilment of learning objectives. The results showed that the more authoritative parenting style, the higher the self-efficacy, the higher the self-regulated

learning of adolescents. Adolescents' academic performance is negatively impacted by permissive nurturing, whereas authoritative parenting improves children's academic achievement (Theresya et al., 2018).

Clark and Purdon (1993) proposed that the appraisal of a thought as inconsistent with an individual's self-efficacy, sense of one's self and values contributes to exacerbation of obsessions. (Kahani & Hassani, 2021). Clark (2004) argued that if obsession prone individuals have a preexisting ambiguous or weak self- view, then unwanted intrusive thoughts that are contrary to this self-view are more likely to be perceived as highly crucial or even frightening. Positive parenting style is helpful to betterment of children's self-acceptance and boost their development in self -esteem and self-beliefs (Jing et.al., 2013). Therefore, parenting style urgently affects the psychological well-being and advancement of young people in colleges and universities.

Obsessions are persistent and recurrent images, thoughts and urges that are unwanted, completely invasive and struggled by the individual to push these away. Whereas the repetitive physical behaviors and cognitions that the individual desires to perform to reduce the distress caused by these obsessions are compulsions. Various debates have arisen on the origin of the obsessive thoughts. Where do these come from? How do they enter the mind? Why and when do such thoughts become distressing? An answer to these questions lies in a theory proposed by Mowrer (1947) on the acquisition of obsessions. A two-stage theory it stated that first, classical conditioning of fear occurs, and second, the operant conditioning of fear. In the first stage, there is some sort of situation in which an unconditioned stimulus had provoked the fear (unconditioned response) into the individual, thus next time the same stimulus when encountered (conditioned stimulus), causes dreadful fear (conditioned response) to the individual. The second stage is operant conditioning in which rewards are followed by satisfying behavioral responses. Therefore, when an individual is eager to perform an act (compulsion) to get relieved from those ongoing distressing thoughts (obsessions), after doing so there is satisfaction felt by the individual is a reward for him/her. Thus, the state of relief is maintained unless the next cycle of obsession occurs (Hossein et al., (2022).

Studies show that OCD is associated with maladaptive parenting and rejection. Obsessive compulsive disorder (OCD) is an illness that affects not only the individual quality of life but also social and familial well-being of those suffering (Carpenter & Chung, 2011). More of the pathologies were related with harsh parenting styles. A study concluded that inflated sense of responsibility can drive an individual to have repetitive negative thoughts that can cause distress. According to the findings of the study responsibility and worry can influence negative or obsessional thinking and worrying to an extent of pathology (Sugiura & Fisak, 2019).

Research suggests that the OCD prevalence rates are similar worldwide (American Psychological Association, 2000). However, the prevalence rates in Pakistan still need investigation. Saleem and Gul (2011) did provide research evidence of common OC subtypes in Pakistan. These include contamination fears in 62% and washing compulsions in 63.8%. patients while Nazar et al., (2011) found religious themes in 60% of the patients. Gibbs (1996) has shown the use and importance of nonclinical samples when it comes to contributing to theories of OCD, highlighting that non-clinical samples may suffer from the same types of symptoms as clinical OCD cases, only differing in degree of intensity. University and college students are at a greater risk than the general population to mental health issues (Stanley & Manthorpe, 2001; Sheldon et.al, 2021). Studies have presented evidence of higher psychological distress in college students compared to the non-university going population (Adlaf et al., 2001; Rana, & Walking, 1999).

OCD being the chronic psychiatric disorder, do not reach the full remission in individuals suffering it. However, if the predictors causing this condition could be found, the treatment and success towards improvement can be enhanced. Therefore, one study by Grassi et al., (2022) focused on finding the clinical and illness related predictors of the disorder, but as a result, it was found that environment and interpersonal factors plays a vital predictive role and contributes towards long-term OCD course. There were 382 OCD adult patients, whose remissions were assessed using Yale-Brown Obsessive-Compulsive Scale. The result of this study reveals that the patients who had an early onset of OCD and already had a childhood trauma but not so secure attachment styles with parents had showed remarkably worsened remission in a four-year course. Whereas the ones with secure attachment style have shown greater improvements in the outcome, hence concluding that secure attachment style serves as a predictor of improved outcome of OCD (Tibia et al., 2019; Grassi et al., 2022).

One of the study forced on the development of the facing-contamination selfefficacy scale (FC-SEC) to measure the relationship between self-efficacy and Obsessive-compulsive symptoms, and the results showed it a reliable instrument (Merling & Lit, 2018). Obsessive Compulsive Disorder (OCD) and the related disturbances are manifested by anxiety induced by intrusive thoughts, images or obsessions, and repetitious activities or actions to reduce discomforts and compulsions (Benzina, et al., 2016). Based on some current evidence, patients who have higher levels of self-efficacy have better psychological wellbeing. Reduced self-efficacy is another significant issue that patients face with a long-term illness including OCD (Kershaw et al., 2015).

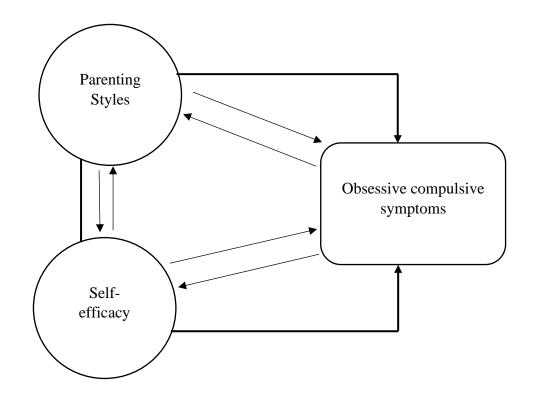
Theoretical Framework

The Baumrind Theory of Parenting Styles

Baumrind theory of parenting (1971) focused on the areas of parental warmth and control presented three categories of parenting styles. These included the permissive, authoritative, and authoritarian. Permissive parents provide warmth and rarely reinforce control, while authoritarian parents implement strict control on the child and hold back on showing any acts of love and nurturance. Finally, the authoritative parent strikes a balance between both strictness and warmth to the child. Baumrind's studies, along with others, provided evidence that this was the optimal style of parenting in order to produce the best positive outcomes later in life, such as in areas of psychological wellbeing, achievement, and competencies (Wickrama, Lorenz & Conger, 1997). The theory hypothesizes that parents who are permissive tend to be less demanding and to offer less monitoring. These results show that permissive parenting style is not advantageous in building self-efficacy among adolescents.

On the other hand, adults who remember more authoritarian or uninvolved parenting have reported lower psychological well-being and happiness (Furnham 2000). The beneficial benefits on child outcomes have not been observed for permissive or authoritarian parenting styles. A study by Mowder (1991) focused on comprehending people's parenting perceptions and behaviors as well as how people gradually review their notions about parenting. The parenting role is related with six major traits, including bonding, discipline, general welfare and protection, responsivity, and sensitivity (Hale, 2008). Negligence parenting leads to presence of OC symptoms, with low self-beliefs or self-efficacy. The relationship based on the behavior of a parent towards the child is important to the behavior of the child and self-belief (Bowlby, 1970; Ede, Okeke, 2021). Parents are viewed as major contributors to children's selfefficacy (Meesters, 2004). Parent's perception of their child's sense of competence may lead the parent to provide greater verbal praise, thus, strengthening the child's selfefficacy (Meesters, 2004; Wachs et.al, 2020). It is suggested that early experiences play a significant role in the development of dysfunctional attitudes and strict norms of behavior. They serve as the primary catalyst for dysfunctional ideas, bad moods, and neutralizing thoughts and are further ingrained by parents (Salkovskis, 1989; Khanjani, 2014).

Conceptual Model



Rationale

This research was conducted to explore the relationship among parenting styles, self-efficacy and obsessive-compulsive symptoms in university students. The

effect of these variables is explored on university students due to the certain challenges and psychopathologies that nowadays university students are vulnerable to (Stanley 2001; Wenger et.al., 2020). Negative parenting styles have an impact on the presence of obsessive-compulsive symptoms and effects self-efficacy. It is also important to investigate parenting styles in the context of Pakistan. There is a need for parents especially in Pakistan to understand the importance of applying appropriate parenting style towards their children. No study was conducted in Pakistan that explain parenting styles, self-efficacy and obsessive-compulsive symptoms to my best of knowledge.

Evidence has shown that those adolescents who perceive their parents as a healthy combination of the authoritative warmth and control are more reliant on themselves and better at regulating their emotions (Kausar & Shafique, 2008). Thus, more studies on this topic will help educating parents further on the impact they can have on their child in multiple domains. According to Yousaf (2015) negligence shown by parents might cause low self-efficacy in their children. But there are least studies that shows if there is a relationship between self-efficacy and OCD. This study would help to identify a relationship among parenting style, self-efficacy and OCD.

Many researches on obsessive compulsive disorder were conducted on clinical sample. But there are few studies amongst the non-clinical sample, and rarer ones investigating university students. Even fewer have set out to explore possible factors that can lead to the development of obsessive-compulsive symptoms. It is important to note the relationship among the three variables in university students as they are vulnerable to many factors that may cause mental health issues. This study would see the effect of parenting styles on self-efficacy of a young adult and to see if that could lead to the presence of OC symptoms (Morovati, 2009).

In Pakistan, OCD is mostly considered a stigma and most of the people have little awareness about its symptoms and that inappropriate parenting style can also cause OCD. So, this study will help people understand and create awareness among parents and overall society. This study would help them to look into their parenting style and improve if they think it was not appropriate. Also, with the help of gender difference, the study would explore the relationship to see if there would be any significant gender difference that might be linked to the three variables. According to recent study of Benatti et al., (2020) males had a younger age of onset and more severity of OCD than female. So, the purpose of this study also relies on exploring the gender differences with references to the OCD symptoms.

Objectives

- 1. To find out the relationship between parenting styles, self-efficacy and obsessive-compulsive symptoms among university students.
- 2. To find out the role of demographic variables (gender, birth order, family system, relationship of parents) among parenting styles, self-efficacy and Obsessive-compulsive symptoms in university students.

Hypotheses

- 1. There will be a significant relationship between parenting styles and selfefficacy among university students.
- There will be a significant relationship between parenting styles and Obsessive-Compulsive symptoms among university students.
- 3. There will be a significant gender difference among parenting styles, selfefficacy and OC symptoms.

Chapter 2

METHOD

Research design

This was a correlational study.

Population and sample

Study sample were 350 participants and selected from different universities of Rawalpindi/Islamabad.

Sampling technique

Convenience sampling technique was used in the study.

Inclusion criteria

- Age limit (18-25) currently enrolled in any university.
- Participants shall be able to understand the scales in English.

Exclusion criteria

Students with physical disability or are unable to understand questionnaire due to any mental illness. The students whose parents had passed away in their childhood.

Instruments

Parental authority questionnaire

The parenting authority questionnaire (PAQ) scale was developed by Buri. J (1991) consisting of 30 items for both parents individually during the years of growing up for the child. The PAQ is intended to assess parental authority/control from the perspective of the child (of any age). This scale consists of three subscales of the parenting styles; authoritarian, authoritative and permissive. Items 1, 6, 10, 13, 14, 17, 19, 21, 24, 28 measures permissiveness, items 2, 3, 7, 9, 12, 16, 18, 25, 26 and 29 measures authoritarian style and items 4, 5, 8, 11, 15, 20, 22, 23, 27, and 30 measures

authoritative/flexible style. Scores are generated by adding individually the items of permissive, authoritarian and authoritative style scales. Items are rated on 5-point Likert scale from 1 to 5; (strongly disagree), (disagree), (neither disagree or agree), (agree) and (strongly agree) respectively. The PAQ has Cronbach's alpha value range from .63 to .71.

Generalized self-efficacy scale

General self-efficacy scale (GSE) was developed by Schwarzer and Jerusalem in 1981. The scale is a self-assessment measure of self-efficacy. Emotion, optimism, job satisfaction is connected with the general self-efficacy while sadness, stress, health complaints, burnout and anxiety are associated to negative coefficients. The GSE scale consists of 10 items. The items are rated on 4 point Likert scale, from 1 to 4; (not at all true), (hardly true), (moderately true) and (exactly true) respectively. The total score is evaluated by finding the sum of all items. The total score ranges between 10 and 40, higher score indicating mor self-efficacy. It has Cronbach's alpha value ranged from .76 to .90.

Obsessive compulsive inventory-revised (OCI-R)

OCI-R scale was developed by Edna et al., (2002). The scale consists of 18 items which examines symptoms such as cleaning, checking, arranging, obsessing, hoarding and neutralizing. The items of OCI-R refer to experiences that many people have in their everyday lives. It greatly best conveys how much that experience has distressed the individual during the past month. The Items are rated on 5 point Likert scale from 0 to 4 point, (not at all), (a little), (moderate), (a lot) and (extremely) respectively. Scores is generated by adding each item and possible score is from 0 to 72. According to the authors, people with obsessive compulsive symptoms have score

of 21 or higher. The internal consistency of the OCI-R tends to be high, ranging from .88 to .92.

Procedures

Participants were selected from different universities of Rawalpindi/Islamabad. Institutional approval was taken for data collection. Consent form was signed from the participants, and were informed about the objectives and purpose of the study beforehand and were given the right of withdrawal from the study any time. They were also informed of their confidentiality rights. Once all had been agreed, they were requested to share their actual information and fill out the scales of Parental Authority Questionnaire (PAQ), General Self-Efficacy scale (GSE) and Obsessive-Compulsive Inventory- Revised (OCI-R).

Ethical considerations

Anonymity and confidentiality were assured of the participants. Participants were asked to sign consent form for their willingness to participate. The scales/questionnaire of parental authority questionnaire (PAQ) used in this study was obtained by the author's knowledge and permission. While the scale of general self-efficacy (GSE) and obsessive-compulsive inventory-revised (OCI-R) were in open access and they did not require the permission of the authors.

Statistical analysis

Data analysis was done by using Statistical Package of Social Sciences (SPSS, version 27). Frequencies and percentages were calculated for demographic variables. Descriptive analysis was used to find out the mean, standard deviation, Cronbach's alpha, skewness and kurtosis. Correlational analysis was used to investigate

relationship between variables and subscales. T-test and one way anova was used to find out the role of demographic variables and to test the hypothesis.

Chapter 3

RESULTS

The study was conducted on 340 participants from difference universities of twin cities. the result section includes the table for frequency and percentage that includes the demographic variables. Table 2 shows the psychometric properties of study variables, table 3 shows the correlation, table 4 and 5 shows the t test analysis for gender differences, table 6 shows the One way Anova showing differences between residence and lastly table 7 shows the post hoc analysis between the residence.

Table 1

Variables	F	0/0			
Gender					
Male	170	50			
Female	170	50			
Age					
18-22	252	74.1			
23-26	88	25.9	25.9		
Education					
BS	308	90.6			
MS	32	9.4			
Birth order					
Youngest	110	32.4			
Middle	92	27.1			
Eldest	128	37.6			
Lidest	120	2710			

Frequency and percentage of demographic variables (n=340)

10	2.9		
319	93.8		
5	1.5		
5	1.5		
11	3.2		
131	38.5		
209	61.5		
121	35.6		
213	62.6		
6	1.8		
	 319 5 5 11 131 209 121 213 		

Note: F=*frequency,* %= *Percentage*

Table 1 shows the demographic variables, their frequency and percentages. This includes age, gender, birth order, relationship of parents, family system and residence. The table shows that most participants were from age range (18-22) having high percentage of 74% as compared to the age range of (22-26). Males and females are equal in frequency. The table also shows that high number of respondents were living in a nuclear family system with percentage of 61% as compared to the people living in a joint family system 38%. It is also seen that relationship of parents of most respondents are married in about 93%. According to the birth order depicted, the eldest in order have high percentage (37%) than youngest (32%), middle (27%) and only child (2%). Lastly, high percentage of respondent (62%) are living with their parents as compared to living in hostels (35%) and with guardian (1%).

Table 2

variables	No. of	α	М	SD	Range		SK	K
	items							
					Actual	Potential		
PAQMP	10	0.86	30.80	5.57	18-40	10-40	0.81	1.11
PAQMAt	10	0.86	33.37	6.05	15-39	10-40	-0.30	0.26
PAQMAtv	10	0.86	36.91	5.88	19-34	10-40	-0.59	1.16
PAQFP	10	0.82	30.71	6.01	19-40	10-40	0.11	-0.24
PAQFAt	10	0.82	34.35	6.20	20-35	10-40	-0.20	.18
PAQFAtv	10	0.82	35.83	5.96	17-38	10-40	-0.44	1.04
GSE	10	0.90	29.69	5.67	15-40	10-40	-0.27	22
OCI	18	0.78	32.18	14.28	3-68	0-72	0.27	72

Psychometric properties of parental authority, general self-efficacy and obsessive compulsive symptoms (N=340)

Note: M= mean, SD= standard deviation, sk= skewness, K=kurtosis, PAQMP= parental authority questionnaire mother permissive, PAQMAt= PAQ mother authoritarian, PAQMAtv= PAQ mother authoritative, PAQFP= PAQ father permissive, PAQFAt= PAQ father authoritarian, PAQFAtv= PAQ father authoritative, GSE= general self-efficacy, OCI-R= obsessive compulsive inventory-revised

Table. 2 illustrates the psychometric properties of the study variables. Mother authoritative (M=37.16; SD=5.39) and father authoritative (M=36.24;SD=5.24) has higher mean score than authoritarian and permissiveness. Father permissive (PAQFP) has lowest kurtosis value (-0.24) while father authoritarian has lowest skewness value (-0.20). mother authoritative has highest kurtosis value, while mother permissive has high skewness value.

Table 3

Pearson correlation of self-efficacy, parenting styles and obsessive-compulsive symptoms (N=340)

Variables	1	2	3	4	5	6	7	8
1.PAQMP	-	.12*	.39**	.76**	.90*	.37**	.34**	.28**
2.PAQMAt		-	.26**	.12*	.78**	.27**	08	.28**
3.PAQMAtv			-	29**	.25**	.80**	.31**	08
4.PAQFP				-	02	41**	.24**	.22**
5.PAQFAt					-	.21**	05	.24**
6.PAQFAtv						-	.29**	91*
7.GSE							-	79
8.OCI-R								-

Note: M= mean, SD= standard deviation, PAQMP= parental authority questionnaire mother permissive, PAQMAt= PAQ mother authoritarian, PAQMAtv= PAQ mother authoritative, PAQFP= PAQ father permissive, PAQFAt= PAQ father authoritarian, PAQFAtv= PAQ father authoritative, GSE= general self-efficacy, OCI-R= obsessive compulsive inventory-revised

Table. 3 shows the correlation among the three variables. Correlation exists between mother's permissive style and authoritarian which is significant (.12*), with authoritative that is highly significant (.39**). Also, it can be seen that relationship between mother's permissiveness and father's authoritarian is significant. Correlation of mother's permissiveness with father's authoritative style is positive significant. Mother's permissive with self-efficacy is significant and with obsessive-compulsive symptoms are not significant. The relationship between mother's authoritarian and self-efficacy is negative. There is negative relationship between mother's authoritative and OCI-R. It can also be noted that correlation of father's permissiveness and authoritarian is also not significant. Also, father's authoritative and OCI-R are negative significant.

The other negative relationship also exists between father's authoritative and GSE, and between GSE and OCI-R. Lastly, the other highly significant relationship can be seen among father's permissiveness and authoritative, GSE and OCI-R.

Table 4

T test analysis between male and female on variables of parental authority questionnaire, general self-efficacy and Obsessive-compulsive inventory-revised. (N=340)

	Ma	ales	Females			95% CI			
variables	<u>M</u>	SD	М	SD	t	р	LL	UL	C's d
PAQMP	31.17	4.99	30.43	5.30	.59	.55	-0.77	1.43	0.06
PAQMAt	33.66	5.70	33.18	6.25	.75	.45	-0.79	1.76	0.08
PAQMAtv	37.39	5.29	36.91	5.50	.83	.40	-0.66	1.64	0.08
PAQFP	30.61	4.81	31.09	4.95	.59	.35	-1.53	0.55	0.09
PAQFAt	31.69	5.39	29.43	5.37	.24	.17	-0.95	1.47	0.41
PAQFAtv	36.26	5.44	36.22	5.06	.07	.14	-1.08	1.16	0.07
GSE	30.92	5.46	28.56	5.30	4.04	.00	1.21	3.51	0.43
OCI-R	30.21	14.02	34.28	14.27	-2.56	.00	-0.70	-1.04	0.33

Note: M= mean, SD= standard deviation, PAQMP= parental authority questionnaire mother permissive, PAQMAt= PAQ mother authoritarian, PAQMAtv= PAQ mother authoritative, PAQFP= PAQ father permissive, PAQFAt= PAQ father authoritarian, PAQFAtv= PAQ father authoritative, GSE= general self-efficacy, OCI-R= obsessive compulsive inventory-revised, t= t score, P=significance value

Table 4. shows that noticeable difference between males (M=31.69, SD=5.39) and females (M=29.43, SD=5.37) is in the father authoritarian, suggesting fathers are perceived as more indifferent and highly control by males than females. Whereas, in mother permissiveness, males as compare to females perceive mothers as more non-restrictive and females perceive their fathers as non-restrictive. Also, males than females than females (M=30.92, females perceive their both mother and father as authoritative. Males (M=30.92,

SD=5.46) have higher general self-efficacy than females. While females (M=34.28, SD=14.27) have higher obsessive-compulsive symptoms than males. The effect size shows that mother permissive has lowest effect size (0.06) and general self-efficacy has highest effect size (0.43).

Table 5

	Но	Hostel		parents	With guardian			
Variables	(<i>n</i> =	(<i>n</i> =121)		213)	(<i>n</i> =6)			
	М	SD	М	SD	М	SD	F	Р
PAQMP	32.45	5.31	30.25	4.85	29.50	6.22	7.56	0.01
PAQMAt	33.85	5.38	33.22	6.20	31.67	8.84	0.69	0.49
PAQMAtv	36.93	5.27	37.83	5.47	31.50	4.59	4.50	0.12
PAQFP	31.79	5.12	30.34	4.69	30.00	3.79	3.55	0.03
PAQFAt	35.66	5.15	34.30	5.95	34.17	5.70	0.70	0.49
PAQFAtv	36.14	5.12	36.75	5.28	29.83	4.57	5.22	0.06
GSE	29.52	5.34	30.33	7.78	30.19	5.73	0.60	0.54
OCI-R	32.31	14.85	32.18	14.05	29.83	12.71	0.85	0.91

One way Anova among residence and variables of parental authority questionnaire, self-efficacy and obsessive compulsive inventory-revised. (N=340)

Note: M = Mean; SD= Standard deviation; LL=lower limit; UL= upper limit, PAQMP= parental authority questionnaire mother permissive, PAQMAt= PAQ mother authoritarian, PAQMAtv= PAQ mother authoritative, PAQFP= PAQ father permissive, PAQFAt= PAQ father authoritarian, PAQFAtv= PAQ father authoritative, GSE= general self-efficacy, OCI-R= obsessive compulsive inventory-revised, P= significance value

Table 6 shows mean differences in study variables across type of residence. The results showed that students living in hostels have higher means in the study variables than students who live in other type of residence. Students living in hostels perceive their parents as permissive and authoritarian than other residence. Also results reveal that students living with their parents have higher self-efficacy than students living in hostels or with guardian. Also, students living in hostels have high OC symptoms than

other type of residence. Significant differences can be seen in mother's and father's permissive styles. While non-significant differences are noticed in all other variables.

Table 6

Post hoc analysis

Dependent	(Groups			959	% CI
variables			MD (I-	SE		
	Ι	J	J)		LL	UL
PAQMP	Hostel	With parents	2.19*	0.57	0.81	3.57
PAQMAtv	hostel	With	5.43*	2.23	0.95	11.70
		guardian				
	With	With	6.32*	2.21	0.12	10.75
	parents	guardian				
PAQFP	hostel	With parents	1.45*	0.55	0.12	2.78
PAQFAtv	hostel	With	6.91*	2.16	1.71	12.13
		guardian				
	With	With	6.30*	2.14	1.15	11.46
	parents	guardian				

Post hoc analysis between subscales across type of residence. (N=340)

Note: MD = Mean difference; SE = Standard error; *LL*= Lower limit; *UL*= Upper limit, PAQMP= parental authority questionnaire mother permissive, PAQMAtv= PAQ mother authoritative, PAQFP= PAQ father permissive, PAQFAtv= PAQ father authoritative.

Table 7 shows that mother permissive is significant in students living in hostel and with parents $MD=(2.19^*)$. While mother authoritative is significant in students living in hostel, with guardian ($MD=5.43^*$) and students living with parents and guardian ($MD=6.32^*$). Father permissive is significant in students living in hostel and with parents ($MD=1.45^*$). It can also be seen that father authoritative is significant in students living in hostel and with guardian ($MD=6.91^*$), while father authoritative is also significant in students living with parents and with guardian ($MD=6.30^*$).

Chapter 4

DISCUSSION

This study was intended to explore the relationship between parenting styles, self-efficacy and obsessive-compulsive symptoms among university students. The data was collected by distributing questionnaires in different universities. The total sample was of 340 participants who were university students in Islamabad and Rawalpindi. The questionnaire used were the parental authority questionnaire (PAQ), general self-efficacy scale (GSES) and obsessive-compulsive inventory-revised (OCI-R). The results showed relationship between the study variables. Students whose parents displayed authoritarian style had low self-efficacy and symptoms of obsessive-compulsive symptoms. The appropriate and balance contact between parents and their children is one of the factors that determine children's physical and mental health. According to Zahedani et al., (2016) among the many elements that influence children's development and healthy character are the interactions between parents and their children that are said to be the most fundamental and crucial ones. The influence of an individual's family on their lives and on society at large is important. Parents and family have a greater impact on children than peers.

The data was collected by distributing questionnaires in different universities. The parental authority questionnaire (PAQ) consists of 30 items for both parents individually during the years of growing up for the child. It was developed by Buri (1991). The PAQ is intended to assess parental authority/control from the perspective of the child (of any age). This scale consists of three subscales of the parenting styles: authoritarian, authoritative and permissive. According to the current study, the reliability of mother PAQ and father PAQ is 0.86. The second measure used was the general self-efficacy scale (GSE-S) developed by Schwarzer and Jerusalem in 1981. The scale is a self-assessment measure of self-efficacy. The GSE scale consists of 10 items. The reliability of this measure according to this study is 0.90. (Table 2). Obsessive compulsive symptoms- inventory (OCI-R) scale was developed by Edna et al., (2002). The scale consists of 18 items and the reliability of this measure according to this study is 0.78.

There were three major hypotheses needed to explore. The first hypothesis stated that there will be significant relationship between parenting styles and self-efficacy. According to Moradian et al., (2021) in a study indicated that on achievement motivation and self-efficacy, the authoritative parenting style had a good direct effect, while the authoritarian parenting style had a negative direct effect. This hypothesis was supported according to my study result. The results showed that there is positive significant relationship between authoritative, permissive parenting style and self-efficacy (Table 3), while it is also shown that there is negative relationship between authoritarian parenting style and self-efficacy means that if parents show more authoritarian behavior towards the child, then self-efficacy will become low.

The second hypothesis stated that there will be significant relationship between parenting styles and obsessive-compulsive symptoms. A study conducted by Rizwan in Pakistan in 2014, it was hypothesized that those university students who have dysfunctional parenting would have more obsessive compulsive symptoms and interpersonal problems and showed positive relationship between dysfunctional parenting and OC symptoms (Rizwan, 2014). The results of this present study tells that there is positive correlation between permissive parents' styles and obsessivecompulsive symptoms. Also, there is a positive relationship between authoritarian parenting styles and obsessive-compulsive symptoms. These results shows that when the parents are totally non-restrictive, a child is likely to develop symptoms of obsessive-compulsive while if parents are most restrictive (authoritarian), a child is also more likely to develop obsessive compulsive symptoms. The results also show negative relationship between authoritative parenting style and obsessive-compulsive symptoms, means when parents adopt appropriate parenting style (high control and high warmth), a child is less likely to develop obsessive compulsive symptoms.

The third hypothesis was that there will be significant gender differences among parenting styles, self-efficacy and obsessive-compulsive symptoms. The results clearly shows that males perceive their fathers as more controlling than females. Whereas, males perceive their mothers as non-restrictive and females perceive their fathers as restrictive. Also, high self-efficacy is found to be in males than females, and also females have higher obsessive-compulsive symptoms than males (Table 4).

The main objectives of the study were to find out relationship between parenting styles, self-efficacy and obsessive-compulsive symptom, and to find out the role of demographics such as gender, family system and birth order. According to Baumrind (1991), there are three parenting practices that parents use with their children, authoritarian style (low warmth and high control) meaning that when engaging with their children, authoritarian parents exert a strong sense of command and enforce their will. In this style, parents only want their children to listen to them and obey them, they have control over their children and they want their children to do what only the parents want. The second style is the authoritative style where parents focus on control and show love and freedom to their children at the same time. Finally, the third style is the permissive or non-restrictive style (high warmth and low control). In this style, parent give full freedom to their children to do anything they want, they do not set any rules or control over their children. According to Baumrind (1991) permissive parents exhibit non-controlling behaviors and exercise limited influence over their children's actions.

The development of a child's personality and character is always greatly influenced by parenting style. The acts and choices made by a child's parents shape their personality from the time they are infants until the time they are young adults. Therefore, the types of parents that stand out are those who are overly rigid and those who are either indulgent with their kids. Both of these types of parents have significant influences on their kids' personalities and behavior in various contexts (Serrano & Garcia, 2021). How well parents raise their kids has a significant bearing on how well they'll do in life. Supportive parenting leads to people who are well-adjusted, whereas negligent parenting results in a variety of developmental and adjustment issues (Maccoby & Martin 1983; Myroniuk et al., 2022).

High self-efficacy is a result of parents that don't criticize their kids' choices, don't hold them responsible for anything, and show their appreciation for them at every stage of life, whereas poor self-efficacy is a result of parents who have a bad influence on their kids (Qutaiba & Gindrich, 2021). Highly motivated students actively engage and take pride in their successes. Students are inspired by their high self-efficacy, which is a result of parental encouragement. On the other hand, anxiety and failure avoidance are maladaptive motivational qualities that result in disengagement.

One of the study claims that having an excessive sense of duty might lead to distressing, recurring negative thoughts, leading to obsessive compulsive symptoms. According to study findings, responsibility and anxiety can have a pathological impact on negative or obsessional thinking and worrying (Sugiura & Fisak, 2019). Also, one of the study finding indicates on some current evidence that patients who have higher levels of self-efficacy have better psychological wellbeing. Reduced self-efficacy is another significant issue that patients face with a long-term illness including OCD (Kershaw et al., 2015).

One of the objectives of this study was to find our role of demographics among the study variables. According to the gender differences, males perceive their fathers as more controlling than females and perceive their mothers as non-restrictive, while females perceive their fathers as more restrictive. On the other hand, females have less self-efficacy and more obsessive-compulsive symptoms than males. According to the family system, the results were not significant but it showed the students living in a joint family system perceive their mother and father being more authoritative than students with nuclear family system. Students with nuclear family system have low self-efficacy and has high OC symptoms than joint family system students. The results were not significant mainly because of the issues with social desirability bias or inaccuracy in the way that respondents interpreted it. Also, the results on demographic variable residence showed that students living in hostels perceive their parents as authoritarian and permissive than students living in other type of residence. It was also seen that students living with their parents have high self-efficacy than students living in hostels or with guardian. While students living in hostels have higher Obsessivecompulsive symptoms than students living with their parents.

The significance of this study was to understand how parenting styles play a vital role and has effect on both self-efficacy and obsessive compulsive symptoms. Since, there is no impressive amount of work done in Pakistan regarding these variables, the main interest was also to study parenting styles in context of Pakistan. More researches needs to be carried out for understanding the relationship between these variables and serve as a guide to parents and help them understand how the way they behave or attend to their children, reflecting on their style of parenting and realizing how they may have a lasting impression on their children which will in turn effect their well-being as well as the perception of the parenting they received.

Conclusion

Exploring the relationship between perceived parenting styles, self-efficacy and obsessive-compulsive symptoms was the main purpose of this study. The results supported the hypotheses showing significant results between the study variables. Results were shown that dysfunctional parenting style can be the lead cause to low self-efficacy and symptoms of obsessive compulsion in young adults/university students. Also, the results also showed the role of demographic and gender difference that could explain the relationship between parenting styles, self-efficacy and obsessive compulsive explaining the significant role of gender difference.

Limitations and suggestions

The study was conducted using questionnaires by visiting the universities of Rawalpindi and Islamabad. There were some of the limitations such as many of the students could not fill the scale of PAQ because of loss of parent, those students were excluded. It was seen clearly while data entry that some students did not feel the right to give valuable and correct information regarding their relationship with their parents.

The time to collect and find out the results was short so it is suggested, for future direction to focus on in depth understanding of relationship of parents with their children that might have impact on many of the underlying factors of psychological well-being.

The sample size was not enough for generalized results. Also, the study was conducted only on universities of Rawalpindi and Islamabad. It would be suggested to collect data from larger sample size and from other cities of Pakistan to have more generalized results.

Implications

The purpose of this study was to explore the relationship between the defined variables. The results of this study will be accommodating for parents in assessing their parenting styles, understanding how it can impact the mental health of their children and how will it incorporate with their emotional growth along with well-being tendencies of children. It is quite evident that how does a parent brings up a child plays a vital role towards their development ahead to later life milestones. Parents who use authoritative parenting style usually raise healthy children in aspect of metal health, physical and emotional growth as well. Whereas authoritarian and permissive parenting may lead to questionable developmental. The strength of the study was to see the effect on each other, so it was important to study relationship between the study variables. This study will also be helpful for researchers. It will provide theoretical understanding of relationships between present study variables, and that no other study has yet explored the relationship between these variables. The non-clinical population can be taught what are the obsessional beliefs and obsession, how they influence their thinking patterns and how they influence mental health of a person. The present study would also be important for parents to understand how to treat their children from the start to avoid having any issue in future that might affect the child's life. This research can support future studies as it will provide a new perspective and viewpoint and researchers can continue to explore these variables with more participants and in different cultures that are still unexplored.

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APPENDICES



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Ref. CUST/IBD/PSY/Thesis-338 January 24, 2023

TO WHOM IT MAY CONCERN

Capital University of Science and Technology (CUST) is a federally chartered university. The university is authorized by the Federal Government to award degrees at Bachelor's, Master's and Doctorate level for a wide variety of programs.

Ms. Hadia Masood registration number **BSP193024** is a bona fide student in BS Psychology program at this University from Fall 2019 till date. In partial fulfillment of the degree, she is conducting research on "Relationship between parenting styles, self-efficacy, and obsessive-compulsive symptoms among university students". In this continuation, the student is required to collect data from your institute.

Considering the forgoing, kindly allow the student to collect the requisite data from your institute. Your cooperation in this regard will be highly appreciated.

Please feel free to contact undersigned, if you have any query in this regard.

Best Wishes,

Dr. Sabahat Haqqani Head, Department of Psychology Ph No. 111-555-666 Ext: 178 sabahat.haqqani@cust.edu.pk

INFORMED CONSENT FORM

I am Hadia Masood, student of BS psychology at Capital University of Science and Technology. I am conducting a research that is requirement of degree. The title of my research is "Relationship between Parenting styles, Self-efficacy and Obsessive-Compulsive symptoms among University Students." I hereby invite you to take part in my study.

I assure you that information taken from you will not be disclosed and will be kept confidential and used for research purpose only. You also have full right to withdraw during any stage of research.

Your help, support and participation will be highly appreciated. Thankyou!

(I am willing to participate in this research)

Signature:	
------------	--

Date: _____

DEMOGRAPHIC INFORMATION FORM

For the following, please select the appropriate option.			
Gender: Male 🗌 Female 🗌	Age:	18-22	
23-26			
Birth order: no. of siblings:	Educatio	on: BS	
MS 🗌			
Relationship status of Parents: Married Divorced		Widow	
Separated			
Father: Alive Dead	Mother:	Alive	
Dead			
Family system: Joint 🗌 Nuclear 🗌			
Residence: Hostel 🗌 With Parents 🗌 With Guardian]		

PARENTAL AUTHORITY QUESTIONNAIRE (PAQ)

For each of the following statements, circle the number on the 5-point scale that best indicates how that statement applies to you and your mother/father. Try to read and think about each statement as it applies to: you and your mother/father during your years of growing up at home. There are no right or wrong answers.

- 1. Strongly disagree
- 2. Disagree
- 3. Undecided
- 4. Agree
- 5. Strongly agree

No.	Statements	1	2	3	4	5
1	While was growing up my <i>mother</i> felt that in a well-run home the children should have their way in the family as often as the parents do.					
	While was growing up my <i>father</i> felt that in a well- run home the children should have their way in the family as often as the parents do.	1	2	3	4	5
2	Even if her children didn't agree with her, my <i>mother</i> felt that it was for our own good if we were forced to conform to what she thought was right.	1	2	3	4	5
	Even if his children didn't agree with him, my <i>father</i> felt that it was for our own good if we were forced to conform to what he thought was right.	1	2	3	4	5
3	Whenever my <i>mother</i> told me to do something as I was growing up, she expected me to do it immediately without asking any questions.	1	2	3	4	5
	Whenever my <i>father</i> told me to do something as I was growing up, he expected me to do it immediately without asking any questions.	1	2	3	4	5
4	As I was growing up, once family policy had been established, my <i>mother</i> discussed the reasoning behind the policy with the children in the family.	1	2	3	4	5

	As I was growing up, once family policy had been established, my <i>father</i> discussed the reasoning behind the policy with the children in the family.	1	2	3	4	5
5	My <i>mother</i> has always encouraged verbal give- and-take whenever I have felt that family rules and restrictions were unreasonable.	1	2	3	4	5
	My <i>father</i> has always encouraged verbal give-and- take whenever I have felt that family rules and restrictions were unreasonable.	1	2	3	4	5
6	My <i>mother</i> has always felt that what children need is to be free to make up their own minds and to do what they want to do, even if this does not agree with what their parents might want.	1	2	3	4	5
	My <i>father</i> has always felt that what children need is to be free to make up their own minds and to do what they want to do, even if this does not agree with what their parents might want.	1	2	3	4	5
7	As I was growing up my <i>mother</i> did not allow me to question any decision that she had made.	1	2	3	4	5
	As I was growing up my <i>father</i> did not allow me to question any decision that he had made.	1	2	3	4	5
8	As I was growing up my <i>mother</i> directed the activities and decisions of the children in the family through reasoning and discipline.	1	2	3	4	5
	As I was growing up my <i>father</i> directed the activities and decisions of the children in the family through reasoning and discipline.	1	2	3	4	5
9	My <i>mother</i> has always felt that more force should be used by parents in order to get their children to behave the way they are supposed to.	1	2	3	4	5
	My <i>father</i> has always felt that more force should be used by parents in order to get their children to behave the way they are supposed to.	1	2	3	4	5
10	As I was growing up my <i>mother</i> did not feel that I needed to obey rules and regulations of behavior	1	2	3	4	5

	simply because someone in authority had established them.					
	As I was growing up my <i>father</i> did not feel that I needed to obey rules and regulations of behavior simply because someone in authority had established them.	1	2	3	4	5
11	As I was growing up, I knew what my <i>mother</i> expected of me in my family, but I also felt free to discuss those expectations with my mother when I felt that they were unreasonable.	1	2	3	4	5
	As I was growing up I knew what my <i>father</i> expected of me in my family, but I also felt free to discuss those expectations with my father when I felt that they were unreasonable.	1	2	3	4	5
12	My <i>mother</i> felt that wise parents should teach their children early just who is boss in the family.	1	2	3	4	5
	My <i>father</i> felt that wise parents should teach their children early just who is boss in the family.	1	2	3	4	5
13	As I was growing up, my <i>mother</i> seldom gave me expectations and guidelines for my behavior.	1	2	3	4	5
	As I was growing up, my <i>father</i> seldom gave me expectations and guidelines for my behavior.	1	2	3	4	5
14	Most of the time as I was growing up my <i>mother</i> did what the children in the family wanted when making family decisions.	1	2	3	4	5
	Most of the time as I was growing up my <i>father</i> did what the children in the family wanted when making family decisions.	1	2	3	4	5
15	As the children in my family were growing up, my <i>mother</i> consistently gave us direction and guidance in rational and objective ways.	1	2	3	4	5
	As the children in my family were growing up, my <i>father</i> consistently gave us direction and guidance in rational and objective ways.	1	2	3	4	5

16	As I was growing up my <i>mother</i> would get very upset if I tried to disagree with her.	1	2	3	4	5
	As I was growing up my <i>father</i> would get very upset if I tried to disagree with him.	1	2	3	4	5
17	My <i>mother</i> feels that most problems in society would be solved if parents would not restrict their children's activities, decisions and desires as they are growing up.	1	2	3	4	5
	My <i>father</i> feels that most problems in society would be solved if parents would not restrict their children's activities, decisions and desires as they are growing up.	1	2	3	4	5
18	As I was growing up, my <i>mother</i> let me know what behavior she expected of me, and if I didn't meet those expectations, she punished me.	1	2	3	4	5
	As I was growing up, my <i>father</i> let me know what behavior he expected of me, and if I didn't meet those expectations, he punished me.	1	2	3	4	5
19	As I was growing up my <i>mother</i> allowed me to decide most things for myself without a lot of direction from her.	1	2	3	4	5
	As I was growing up my <i>father</i> allowed me to decide most things for myself without a lot of direction from him.	1	2	3	4	5
20	As I was growing up my <i>mother</i> took the children's opinions into consideration when making family decisions, but she would not decide for something simply because the children wanted it.	1	2	3	4	5
	As I was growing up my <i>father</i> took the children's opinions into consideration when making family decisions, but he would not decide for something simply because the children wanted it.	1	2	3	4	5
21	My <i>mother</i> did not view herself as responsible for directing and guiding my behavior as I was growing up.	1	2	3	4	5

	My <i>father</i> did not view himself as responsible for directing and guiding my behavior as I was growing up.	1	2	3	4	5
22	My <i>mother</i> had clear standards of behavior for the children in our home as I was growing up, but she was willing to adjust those standards to the needs of each of the individual children in the family.	1	2	3	4	5
	My <i>father</i> had clear standards of behavior for the children in our home as I was growing up, but he was willing to adjust those standards to the needs of each of the individual children in the family.	1	2	3	4	5
23	My <i>mother</i> gave me direction for my behavior and activities as I was growing up and she expected me to follow her direction, but she was always willing 'to listen to my concerns and discuss that direction with me.	1	2	3	4	5
	My <i>father</i> gave me direction for my behavior and activities as I was growing up and he expected me to follow his direction, but he was always willing 'to listen to my concerns and discuss that direction with me.	1	2	3	4	5
24	As I was growing up my <i>mother</i> allowed me to form my own point of view on family matters and she generally allowed me to decide for myself what I was going to do.	1	2	3	4	5
	As I was growing up my <i>father</i> allowed me to form my own point of view on family matters and he generally allowed me to decide for myself what I was going to do.	1	2	3	4	5
25	My <i>mother</i> has always felt that most problems in society would be solved if we could get parents to strictly and forcibly deal with their children when they don't do what they're supposed to do as they are growing up.	1	2	3	4	5
	My <i>father</i> has always felt that most problems in society would be solved if we could get parents to strictly and forcibly deal with their children when they don't do what they're supposed to do as they are growing up.	1	2	3	4	5

				•		-
26	As I was growing up, my <i>mother</i> often told me	1	2	3	4	5
	exactly what she wanted me to do and how she					
	expected me to do it.					
	As I was growing up, my <i>father</i> often told me	1	2	3	4	5
	exactly what he wanted me to do and how he					
	expected me to do it.					
27	As I was growing up my mother gave me clear	1	2	3	4	5
	direction for my behaviors and activities, but she					
	was also understanding when I disagreed with her.					
	As I was growing up my <i>father</i> gave me clear	1	2	3	4	5
	direction for my behaviors and activities, but he was					
	also understanding when I disagreed with him.					
28	As I was growing up, my mother did not direct the	1	2	3	4	5
	behaviors, activities and desire of the children in the					
	family.					
	As I was growing up, my <i>father</i> did not direct the	1	2	3	4	5
	behaviors, activities and desire of the children in the					
	family					
29	As I was growing up, I knew what my mother	1	2	3	4	5
	expected of me in the family and she insisted that I					
	conform to those expectations simply out of respect					
	for her authority.					
	As I was growing up, I knew what my <i>father</i>	1	2	3	4	5
	expected of me in the family and he insisted that I					
	conform to those expectations simply out of respect					
	for his authority.					
30	As I was growing up, if my <i>mother</i> made a decision	1	2	3	4	5
~ ~	in the family that hurt me, she was willing to discuss	-	_		-	
	that decision with me and to admit it if she had made					
	a mistake.					
		1	2	3	4	5
	As I was growing up, if my <i>father</i> made a decision	L	4	3	-	3
	in the family that hurt me, he was willing to discuss					
	that decision with me and to admit it if he had made					
	a mistake.					

GENERAL SELF-EFFICACY SCALE (GSE-S)

The GSE is designed to assess **optimistic self-beliefs used to cope with a variety of demands in life**. The scale was designed to assess self-efficacy, i.e., the belief that one's actions are responsible for successful outcomes. It consists of 10 items. Each item would be scored as:

- 1. Not at all true
- 2. Hardly true
- 3. Moderately true
- 4. Exactly true

No.	Statements	1	2	3	4
1	I can always manage to solve difficult problems if				
	I try hard enough				
2	If someone opposes me, I can find the means and				
	ways to get what I want				
3	It is easy for me to stick to my aims and				
	accomplish my goals.				
4	I am confident that I could deal efficiently with				
	unexpected events.				
5	Thanks to my resourcefulness, I know how to				
	handle unforeseen situations				
6	I can solve most problems if I invest the necessary				
	effort.				
7	I can remain calm when facing difficulties				
	because I can rely on my coping abilities.				
8	When I am confronted with a problem, I can				
	usually find several solutions.				
9	If I am in trouble, I can usually think of a solution				
10	Loon usually handle whatever comes my way				
10	I can usually handle whatever comes my way.				

OBSESSIVE-COMPULSIVE INVENTORY- SCALE (OCI-R)

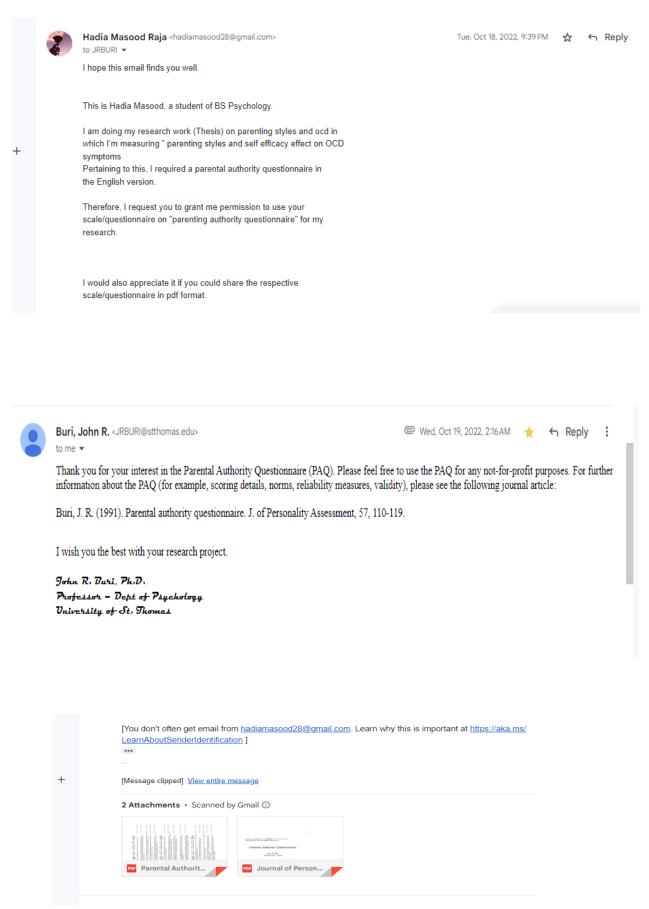
The following statements refer to experiences that many people have in their everyday lives. Circle the number that best describes **HOW MUCH** that experience has **DISTRESSED or BOTHERED you during the PAST MONTH**. The numbers refer to the following verbal labels:

- 0. Not at all
- 1. A little
- 2. Moderately
- 3. A lot
- 4. Extremely

No.	Statements	1	2	3	4	5
1	I have saved up so many things that they get in the					
	way					
2	I check things more often than necessary					
3	I get upset if objects are not arranged properly.					
4	I feel compelled to count while I am doing things					
5	I find it difficult to touch an object when I know it					
	has been touched by strangers or certain people					
6	I find it difficult to control my own thoughts					
7	I collect things I don't need.					
8	I repeatedly check doors, windows, drawers, etc.					
9	I get upset if others change the way I have arranged					
	things.					
10	I feel I have to repeat certain numbers					
11	I sometimes have to wash or clean myself simply					
	because I feel contaminated					

12	I am upset by unpleasant thoughts that come into			
	my mind against my will			
13	I avoid throwing things away because I am afraid I			
	might need them later			
14	I repeatedly check gas and water taps and light			
	switches after turning them off			
15	I need things to be arranged in a particular order.			
16	I feel that there are good and bad numbers			
17	I wash my hands more often and longer than			
	necessary			
18	I frequently get nasty thoughts and have difficulty			
	in getting rid of them			

Permission for Parental authority questionnaire (PAQ)



General self-efficacy scale (open access)

Do I need permission to use the general perceived self-efficacy (GSE) scale?

For a permission letter, see page 9.You do not need our explicit permission to utilize the scale in your research studies. We hereby grant you permission to use and reproduce the General Self-Efficacy Scale for your study, given that appropriate recognition of the source of the scale is made in the write-up of your study.

Obsessive compulsive inventory-revised (open access)

Obsessive-Compulsive Inventory-Revised (OCI-R)

The OCI-R (Foa et al., 2002; Huppert et al., 2007) is in the public domain, which means that anyone can use it **free of cost** and **without getting permission** from the authors. It can be downloaded for use in your clinical practice by clicking on the link below:

OCI-R

