Role of Parenting Style and Body Image Dissatisfaction in Mental Well Being, Self Esteem and Quality Of Life among Effeminates

by

Isaar Ahmed

Bsp201013

Department Of Psychology

Faculty of Management and Social Sciences

Capital University of Science & Technology,

Islamabad

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Isaar Ahmed
Bsp201013

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CERTIFICATE OF APPROVAL

It is certified that the Research Thesis titled "Role of Parenting Style and Body Image Dissatisfaction In Mental Well Being, Self Esteem and Quality Of Life Among Effeminates" carried out by **Isaar Ahmed, Reg. No. BSP201013**, under the supervision of **Mr. Muhammad Naeem**, Capital University of Science & Technology, Islamabad, is fully adequate, in scope and in quality, as a Research Thesis for the degree of **BS Psychology**.

Supervisor: --------------------------------

Mr. Muhammad Naeem

Lecturer

Department of Psychology

Faculty of Management and Social Sciences

Capital University of Science & Technology, Islamabad

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Registration # BSP201013

Approved By

Supervisor
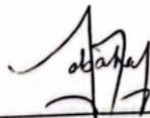Mr. Muhammad Naeem

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Internal Examiner-I
Ms. Irum Noureen

Internal Examiner-II
Dr. Uzma Rani

Thesis Coordinator
Ms. Irum Noureen

Head of Department
Dr. Sabahat Haqqani

DECLARATION

It is declared that this is an original piece of my own work, except where otherwise acknowledged in text and references. This work has not been submitted in any form for another degree or diploma at any university or other institution for tertiary education and shall not be submitted by me in future for obtaining any degree from this or any other University or Institution.

Isaar Ahmed

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Abstract

This study identified the relationship between parenting styles and body image dissatisfaction on mental well-being, Self-esteem, and Quality of life among Effeminates. In Pakistan A very few researches had dedicated to effeminates. Five scales were used in this study Rosenberg Self-esteem scale 1965 (10 items) was used to measure the selfesteem. Warwick Edinburgh Mental well-being (WEMWBS) Scale 2006 (14 items) was used to measure mental well-being. BDS) Body image dissatisfaction scale 1983 consist (26 items) measure the body image dissatisfaction in effeminates. WHO Quality of life Scale (26items) measures the quality of life of effeminates. Steinberg's Parenting Scale (2005) contains 24 items measure the parenting style of effeminates. A sample of 150 effeminate participants were taken through Snowball Sampling Technique to measure parenting style, body image dissatisfaction, mental well-being, Self-esteem and quality of life. The results were analyzed by performing descriptive, and correlation. This study shed light on a how much effeminates are dissatisfied with their body image and what role parenting style play in it and their impact on mental well-being, self-esteem, and quality of life. And this study were helpful for teachers to check the behavior in class and stop those who are showing this behavior. This study emphasizes the positive relationship between parenting style body image dissatisfaction self esteem and quality of life and Negative relationship between parenting style and mental well-being. Biverate correlation and analyze descriptives to identify the relationship between variables. Further the findings of the study were contributed to clinical settings for treatment of these issues.

Keywords: Effeminates, Parenting style, Body image dissatisfaction, Mental Well-being, Self-esteem and Quality of Life.

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Chapter-1 Introduction

The word effeminate comes from Latin roots which mean "womanish" This term usually used for an insult (Lim, 1993). Almost every individual in Chinese film industry believed in that effeminate boys was originate from neighbor South Korea and japan. The movement start when the Japanese super Takuya Kimura, one of Asia prime selling boy bands appears in 1996 on television ads of kanebo lipstick. He comes out from a romantic entangle with color lip and catch line "Attack me with super lips". Kanebo sell greater than three millions lipstick in just 2 months. "Niang Pao" is a derogatory Chinese term for men perceived to be effeminate.

Lacking traits typically associated with men or masculinity (Zhang, 2011).

The word effeminate is commonly used referring a man or boy with characteristics that are more often associated opposite gender (Tougher, 2015). According to bible the term effeminacy and homosexuality in 1 Corinthian 6:9 are start in the James Version and New American excellence bibles. The next Holman Christian excellence Bible translate the Greek text as adulterers and homosexual. According to Prophet Muhammad SAW narrate by ibn 'Abbas: The Prophet cursed effeminate men (those men who are in the similitude or assume the manners of women) and those women who assume the manner of men and He said, turn them out of your houses". According to Quran Mukhannath "(Effeminate ones", ones who resembles women ") Was a term used in Classical Arabic and Islamic literature to refer gender variant people, and it has typically refer to effeminate men or people with ambiguous sexual characteristics, who appeared female.

Effeminacy refer to traits and expression in which who are not of the women sex (boys and men) that are frequently linked with what is generally recognize to be womanly

behavior, mannerisms, styles, or gender roles, rather than with traditionally masculine behavior, traits, styles or peculiarity or role (Menasce, 2016).

Parenting Style

Parenting Style referred as parent"s attitudes and behaviors towards their children and emotional environment in which parents express their behavior (Darling and Steinberg1993). A study conducted by Eisenberg et al. (1996) show that the relationship between parenting styles and the child's emotional regulation. The study found that children of authoritative parents demonstrated good emotional regulation than those with authoritarian, permissive or neglectful parents. The study shows that the authoritative parenting style is the very effective in upgrading the child's emotional regulation.

Research by (Chen et al. 2014) shows the relationship in between parenting style and academic fulfillment in Chinese children. The study showed that the authoritative parenting is significantly related to high academic fulfillment, while on other hand the authoritarian and permissive parenting styles was linked with lower academic fulfillment. A study conducted by
Conger et al. (1994) explains the link between parenting style and delinquency in adolescents. The research shows that the authoritative parenting style is linked with delinquency lower rate, while on the other hand authoritarian and the permissive parenting styles were associated with higher rates of delinquency. The research explains that the authoritative parenting style has a protective effect in preventing delinquency.

Parenting style is an important element of child rearing. Study by Rohner et al.,(1991) compare parenting style and child rearing practices in different countries.

The study shows that authoritative parenting was prevalent in countries like the United States and Canada, while authoritarian parenting was most common in countries like China and India. The research highlight the significance of culture specific parenting practices and their influence on child development. Research highlights the importance of parenting style on the child emotional, academic, and behavioral development. The authoritative parenting style has consistently been found to promote positive outcomes, while authoritarian and permissive parenting styles have more negative consequences (Shaljan Areepattamannil, 2010).

The four main parenting styles permissive, authoritative, neglectful and authoritarian (Darling and Steinberg, 1993). Permissive style of parenting is style in which children is handle, rarely give permission, enforce rules. Overindulgence the children to avoid conflict. And Authoritative style of parenting is style in which problems are solved together with the children. Set understandable rules and assumptions. Neglectful style of parenting is style in which the parents are almost uninvolved and absent. Provide little nurturance or guidance. Authoritarian style of parenting is style in which parents operate. Set harsh rules regulation and punishment. In authoritarian style of parenting one side transmission, with little though of child emotional and behavioral and the social needs.

Body Image dissatisfaction

The term Body image dissatisfaction refers to bleak or negative body image, negative feelings and belief towards his/her body (Marita 2004). Body image dissatisfaction start when an individual is viewing and compare themselves to social media celebrities images and explaining the appearance linked with comments on social media platform, and feel that they cannot live up to the standard of perfection presented

in social media platform (Marita 2004). Body image dissatisfaction leads to the negative thoughts, emotions, and feelings that people have about their physical appearance. It is feeling of being unhappy or dissatisfied with one's own body shape, size, weight, or complete physical appearance(Cushla & Loomans, 2014). Body image dissatisfaction is often link with low selfe-steem, poor body image, negative self-talk, and can lead to unhealthy behaviors such as disordered eating, extreme diet, and hard exercises (Eleonora & Gullone, 2010).

Individuals, who faces body image dissatisfaction may focus on their physical appearance to the point that it becomes an obsession, cause them to feel anxious, depressed, and socially isolated. This can particularly widespread in young women, who may feel pressured to conform to unreal society standard of beauty (Francesca, 2020). Body image dissatisfaction can lead to body dysmorphia, a condition in which a person perceives their body as defective or abnormal, even when this is not the case (Annette, 2010).

Different elements contribute to body image dissatisfaction, including genetic predispositions, cultural and societal norms, peer pressure, social media influence, and personal beliefs and experiences (Thomas, 2001). Body image dissatisfaction can also give rise to physical changes such as puberty, pregnancy, and aging (Vamshek, 2018). There are many different ways to address body image dissatisfaction, including therapy, self-reflection, and self-care practices such as mindfulness. It is essential to acknowledge that everyone body is special, unrepeatable and different has its own strengths and weaknesses. Building a positive body image and learn to love and accept oneself is key to improve one mental, emotional, and physical health (Lina, 2007).

Study showed that the way in which you feel about your own body is actually your affective body image. In which include Feelings joy, horror and disgusting but are

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frequently summarize at the same time the amount of satisfied or dissatisfied you may feel about your

body shape, body weight your height and individual body parts. The way you believe, expect imagine with respect to your body is your cognitive body image. This can refer to absorption along with body shape and weight. The manners you engage in reaction of your body image is your behavioral body image. When a person is disappointed, dissatisfied or unsatisfied with the way they focus, they may separate their selves or engage or take into employment harmful manners as a source to change appearance (Lina A Ricciardelli 2006).

Self Esteem

Self-esteem refers towards individuals psychological characteristics which is related to self-assessment or self-rating established on one's own values toward human (Alesi et al., 2012). Self-esteem is such as we will value and recognize ourselves. It's such as depend on our beliefs and judgment, thinking about ourselves, which will be difficult to change (Stefanie, 1999). Self-esteem leads to a person overall assessment of his/her self-respect or value as a person. It reflects a person's subjective assessment of their own abilities, beliefs, and achievements and is power by a range of internal and external factors. Self-esteem is an important part of mental health and can impact many zone of a person life, including their relationships, achievements, and well-being (Waschull, 2000).

One study by Rosenberg (1965) explains self-esteem as the degree to which individuals believe they own positive qualities and are valued by others. This study recognizes two components of self-esteem. Self-acceptance, which refers to accepting oneself for who they are, and self-confidence, which refers to one's belief in their

abilities. Another study by (Baumeister et al., 1999) describes self-esteem as a worldwide assessment of one's self that is based on subjective feelings of worthiness or unworthiness. This research identified that self-esteem can be both high and low, and that individuals with high self-esteem tend to be more resilient, confident, and socially successful, whereas individuals with little self-esteem tend to have more negative self-evaluations and be more prone to depression and other emotional problems.

Studies have shown that self-esteem can be influenced by a range of factors, including early life experiences, social comparison, cultural values, and experiences of success or failure. For example, research has shown that individuals who experience positive feedback from others or who have achieved success in certain areas often report higher self-esteem levels than those who do not (Wyland, 2003). Research also showed that self-esteem is a chief predictor of many outcomes, which includes mental health, academic and career success, and relationship satisfaction. Individuals with higher self-esteem tend to have better mental health, report greater life satisfaction, and are more likely to achieve success in their personal and professional lives (Jennifer et al., 2007).

The Self steem is essential and key element in life because it heavily impact people's decisions, choices and alternatives. In other words, the self-esteem work as an encouragement function by building it less or more likely that people will take care of their selves and go to their full potential (Yang, 2019). Person Low self-esteem may be linked with health issues problem which include depression and anxiety disorder, eating problem issues, social phobia issues, ADHD and substance misuse (Cherry, 2020).

Mental well-being

Mental well-being refers how individuals feel (emotions) and how individuals function (independence, relation with others, control). Mental well-being affects everyone, every can experience good or bad mental well-being (WHO, 2004). The Mental wellbeing is a fundamental element of our whole health. Society frequently think of health in terms of biological and physical condition of our body, how healthy food we eat, how physical we are fit how physical exercise we do. A key, major component of health is missing from this, though. It is mental wellbeing, which surround or enclose our inner workings and the way we explain how we are in our life (Peterson, 2014). Mental wellbeing is how we response to life's good and bad time. It contain how a person thinks, and deals with emotion (emotional goodness), and behave (Croft, 2021). Mental well-being is a state of emotional, psychological, and social wellness in which person can manage effectively with daily life challenges, develop significant relationships, and function effectively and creatively in society. It refers to a positive state of mind in which a person feels happy and relaxed, confident, and content, and is able to enjoy life. Mental well-being encompasses a range of factors that contribute to a healthy mind, include emotional stability, resilience, positive self-regard, and effective coping skills (Blackwell, 2010).

Mental well-being is never only the nonappearance of mental sickness or mental disease issues, but preferably a condition of developing mental health. It includes positive emotions such as happiness, joy, and satisfaction, as well as a sense of purpose and meaning in life. It involves the ability to manage negative emotions such as fear, anxiety, and stress, and to bounce back from adversity and life challenges (Belli, 2015). Managing good mental well-being associated with a combination of taking care for

individual physically, emotionally, and socially. Which contain engaging in daily routine physical exercise, eat a good nutrition healthy diet, taking proper enough sleep, managing stress, and turn positive relationships with family, friends, and community. This connected engaging in activities that bring joy, such as hobbies, and social activities (Leslie Swartz 2009). Research has shown that managing good mental well-being is link with variety of benefits, which includes good physical health, improves productivity, greater resilience, and improved life satisfaction. Conversely, poor mental well-being can refer to a variety of negative outcomes, which include anxiety, depression, substance misuse or over use, also other mental health disorders (Norris, 2006).

Study conducted by Nortje (2021) showed that there are 5 points to boost your mental wellbeing and fitness. Quality relationships is important for your intellectual wellbeing fitness. Which help you to construct a sight of be in and self-value. Which give you and chance to share positive events. Which will give emotional hold up and permit you to help others. Only activeness is not only enough for your physical strength and competency. Study shows that it can also enhance your mental wellbeing increasing your self-esteem. It will helps you to set your goals or challenges and to achieve them. It will Cause chemical changes in your brain which will help to positively switch your frame of mood. Research also showed that learning new skills can also improve your mental wellbeing. Boosting self-confidence and raising self-esteem. And help you to construct a sight of purpose. It will help you to stay connect with others (Fredrica Nyqvist, 2013). Research suggests that acts of giving and kindness can help improve your mental wellbeing. It will create positive feelings and a sense of achievement. It will give you a feeling of aim and self-value. Giving more attention to the present

moment will improve your mental wellbeing. Which includes your thoughts and feelings, your body and overall world surround you (Zubair Moomal, 2002).

Quality of life

Quality of life refers to individuals position in life in refer to culture in which they live. Quality of life will be define as a measure of well-being, surrounded various characteristics of a person's life, which will include physical health, mental and psychological well-being, community relationships, and environmental elements. It reflects an individual's subjective opinion of their own health and life situations and can be influenced by a wide range of factors, such as personal experiences, social and cultural contexts, and economic conditions (Heinz, 2005).

Quality of life play essential role in evaluating the effectiveness of wellbeing interventions and healthcare programs and for making policy decisions regarding resource issuing and healthcare priorities (Michalos, 2011). Study by the World Health Organization (WHO) explain six estate of quality of life. Physical health, emotional health, community relationships, environment, spiritual/religious/ personal beliefs, and level of independence.
Study also explains various factors that influence quality of life, such as income, education, employment, social support, and healthcare access.

Studies have showed that quality of life is strongly link with a wide range of health outcomes, which including mortality, morbidity, and healthcare costs. Individuals with higher quality of life are less likely to experience chronic illnesses, have better mental health, and generally experience greater life satisfaction (Sirgy, 2012). According to Aristotle the people should try to live competently physically, inwardly, and religiously. The theory of good life is built on four main concepts

fulfillment, excellence, virtue, and pleasure. Quality of life is very personal. One person will explain quality of life in accord with prosperity or pleasure with life, on the other hand other person will explain it in terms of potential (having the capability to live a quality life in terms of mental and physical health). The paralyzed or disabled people may report a good quality life, while a healthy person who not long ago loss a job may describe a bad quality of life (Jenkinson, 2015).

Literature Review

Study shows that being transgender in Pakistan is shameful for whole family. Transgender, effeminates show different behavior from the family and society (Sharif et al., 2005). Sex and Gender have clear difference, sex is about body shape and function, gender is identification inside the body. People take effeminates as transgender, male adopt personality characteristics and some take it as psychological and some take it as mental disorder. It is not God-granted traits it is the way one grows-up (Burdge, 2007).

Family and schools are the source of gender confusion among Effeminates (Yue, 2012). Study show that both male and female with body image dissatisfaction receive less support from their families and less care from both parents (Merckelbach, 2003). Studies show that body image dissatisfaction is a multidimensional phenomenon involves perceptual, affective, cognition, and behavioral disturbance (Pyschosom, 2000).

Study shows that effeminate men feel happy when call them "sisters". Wearing makeup, ladies garments, talking in feminine voice, calling each other "sister and beautiful "(Ying, 2009). When youth of country is strong then whole country is strong. When youth rule the earth, the whole country rules the earth (Chong, 2010). Study show that if men behave like men and women behave like women then nation will be stable

and work properly (Zhang, 2012). Other Study Showed That effeminate boys are similar with female in perceptions of body image, thinking, and characteristics. Effeminates report low level of self-esteem, and psychological distress (Basow, 1992). In China a research show that issues of effeminacy and crisis of masculinity link with Chinese state (Zhong 2000).

Study explain that Effeminate men, given the name "fake women" in social media (Xia, 2010). Study shows that the word "fake women" for Effeminate men created in Japanese comics, animated moves, and the role male actors play in it and describe female beauty (Xia, 2010). A study report that effeminate men not only behave like feminine but also dress up like females (Ying, 2009). Study also show that they like singing songs, playing musical instruments, and they are more emotional than other men. They like eating snacks like women (Sheng, 2009). Research showed that in University of Nottingham Asia 2021, carry out the newest development. Macho men and effeminate boys actors are revealed as Beijing enlarge its clamp down on Chinese's film industry, blame the expand of womanly men on United State hold in Janap.

Study showed that male celebrity, moneymaker, are switching their images apparently late night now that Chinese National Radio and Television Administration and also other government bureau have assemble it clear that male who can be seen as" Niang Pao", a disparaging word for effeminate male individual, are not suitable super stars (Beth Timmins 2016) . Study showed that government call control on broadcast to apply a "right beauty standards" and put an end to booking men celebrity who break to meet the man criteria (Lynette Ong, 2015).

Study showed that, the Department of Education Japan start promote physical sports in Japan schools by giving the Proposal to stop the Feminine of Male young boys a set of instructions calling for activities in school, just like football games for boys, for

"turn students male strength"(Zhou Dongyu, 2018). Study showed that the untimely evident of effeminacy characters in the children which include dressing like women clothes, use of female decorations, and showing a wish to have been born a lady. The adolecents boys frequently assumed the posturing and declamatory and of females show no interest in or totally disliking boys games and sports (Zugar, 1988). Research showed that they show desire to play house taking mother role like to be with mature females, play with their jewelry items, dressing, Threatened to cut off their penis and showing interest in female body, being a mother wanted his hair to be like a girl show interested in what a new bride is wearing in wedding (Stratton et al., 1999).

Research showed that they wanted to bake in kitchen and dusting the house like mother and dance like a girl Shows interest for dance very observing as to what mother wear strutting and swinging their hips. Wearing female scarf and female sweater on shoulders like a female. They wanted to be a lady hairdresser, like to use female perfume good in gymnast exercise (Stratton et al., 1998). Study showed that previous study has identified a greater prevalence of body image dissatisfaction, and eating behavior issues behavior among Effeminate male comparative to particular to heterosexual male (Harrell et al., 2009).

Research showed that one common external contributors of body image dissatisfaction is social media platform. Social media display images that are with filtered and gone through editing and try to show the highlights of an individual and his life. These images will promote the unreal appearance 'ideal one' that cannot be gain in real life (Peng, 2021). Study showed that the effeminate men are very dissatisfied with their body image than the heterosexual male (kane 2009). Study showed that Male homosexuality has long been linked with effeminate all over the history of Western culture society. From the word Nancy boys and MDMA of 18th century

England to bambino, she-man, pansy and cross sexual or bisexual of early 20th century America, to the current day fairy, queen, fam boy and fag, Nance, poof, poove, the vocabulary for gay or homophile male in the English speech which suggest that the society identity male sexual wish for other the male with female qualities (Chauncey, 1994; Edwards, 1998).

Study showed that in Psychology Today Circulation Tavris (1988) report the 70% was agreed on that the "homosexual male are not full of masculine characteristics. Given different units of masculine and feminine attributes people rate gay men as more of female characteristics than men in general on most traits (Taylor, 1998). Research showed that the content material of the effeminacy stereotype seem to be well founded for gay men on average. The different conclusions that gay men are one or the other "more feminine like," and "less masculine like" or like "cross sexual or androgynous" do not necessarily deny one and other in light of people "folks model" of masculinity and femininity (Deaux, 2004). Research showed that effeminate term used to refer boys and men who show feminine characters or behavior. These individuals face social stigma and discrimination due to their non-conformity to traditional norms. Many effeminate struggle with self-esteem issues and feelings of inadequacy (Foster, 2021). A Book "Boy Erased" By Garrad Conley, The author chronicle his experience growing up in a conservative, Christian community and struggling with his homosexuality and effeminate characteristics. He describes feelings ashamed of his femininity and attempting to mask it to fit in with his peers.

This lead to constant battle with his self-esteem and fear of being rejected by those around him. Research showed that a boy with effeminate tendency is tormented by his peers during his adolescents. This leads to a deep seated insecurity and self-doubt that follows him into adulthood (Stepler, 2017).

Study showed that the role of parenting style in developing gender identity and expression, including effeminates, and parenting style may associated with the development of effeminacy (Ryan et al.,2010) .Study showed that the maternal attachment and maternal over protection was associated with high level of effeminacy in adolescent boys. And boys who reported higher level of attachment with mother are perceived as effeminates by their peers (Ryan et al., 2010). Study showed that parenting style influence gender play behavior of children, which has impact in developing of effeminacy (Carver et al., 2013). Study showed that children of parents who use a stricter, more controlling parenting style engage in less gender stereotypical play behavior. And those who have less rough and tumble play and more fantasy play are associated with effeminates (Carver et al., 2013). Study showed that there is limited research on self-esteem of effeminates in Pakistan, because the topic is sensitive and stigmatized in Pakistan society. Study showed that to explore the lived experience of effeminates male in Lahore, Pakistan. Effeminates males often face society refusal, discrimination, which leads to low self-esteem and sense of isolation. The study also explained that effeminates males often struggles with their identity and faces difficulties in expressing themselves (Nazish et al., 2018).

Another Study Showed That effeminates males develop coping mechanism, such build positive relations with supportive individuals, to boost their confidence and self-esteem

(Nazish et al., 2018). Research showed that the experiences of effeminates males in Karachi Pakistan, that the effeminates boys faces discrimination and harassment in daily lives which leads to negative self-perception and low self-esteem (Shaikh, 2018). Another Study showed that effeminates boys face the rejection from their families, which create impact on their self-esteem and mental health (Shaikh, 2018). Research

Showed that the experiences of effeminates males, in Pakistan, that the effeminates males faces many different form of discriminations, which includes stigma, isolation, violence, which impact their self-esteem and mental health (Inam-ul-Haq et al., 2017) .

Research showed that effeminates boys have limited access to and employment, which contributes to low level of self-esteem and economic insecurities (Inam-ul-Haqet al., 2017). Study showed that effeminates males in Pakistan faces significant challenge and discrimination which negatively impact their self-esteem and mental health (Inam-ul-Haq, 2017). Research showed that impact of societal expectations on an individual's self-esteem and negative consequences of not conforming to those norms. They shed light on the need for acceptance and understanding for individuals who do not fit into traditional gender roles (Mazur, 2010). Research showed that the effeminate individuals often face a daunting challenge in asserting their identities and achieving self-acceptance (Afful., 2015). Study showed that effeminates experiences in Karachi Pakistan, the study explained that effeminates individual experienced body image dissatisfaction due to societal beauty standards (Shaikh et al., 2019). Study showed that effeminates males faces difficulties in accessing appropriate medical care to help their body image concerns (Shaikh et al.,2019). Research showed that experiences of effeminates boys in Lahore Pakistan, that effeminates males faces body image dissatisfaction due to society expectations of gender norm and standard of beauty (Shahbaz et al., 2020).

Study Showed that effeminates males in Pakistan faces difficulties in accessing proper treatment in hospitals medical care centers (Shahbaz et al., 2020). Study showed that effeminates males often adopt unsafe and ineffective way of modifying their bodies, such as injecting hormones or takings unregulated supplement, which

contribute to body image dissatisfaction in them (Naqvi et al., 2018). Study showed that Effeminate men or boys may experience body image dissatisfaction due to societal pressure to conform to traditional masculine ideals, such as having a muscular and lean physique (John R Earle et al., 2010). Research showed that effeminate individuals may struggle with body image dissatisfaction and engage in unhealthy behaviors to achieve their desired appearance (Peggy Chin 2015).

Literature provides insight into the experiences of effeminate individuals with body image issues and how it affects their self-worth. In the book "The Picture of Dorian Gray" by the Oscar Wilde, the supporter Dorian Gray becomes obsessed with preserving his youthful appearance and attaining physical perfection. He becomes consumed with vanity and narcissism, leading to a deteriorating mental state. His obsession with his appearance leads him to engage in morally reprehensible behavior, and ultimately his appearance reflects his inner corruption.

Study showed that the societal pressure to conform to traditional masculine ideals can lead to body image dissatisfaction and harmful behaviors. The characters' obsessions with their appearances reflect deeper issues with their self-worth and identities. This highlights the importance of promoting self-love and acceptance for those who do not fit traditional gender roles (Peter Kivisto 2020).

Study showed that Effeminate individuals may struggle with body image issues, but literature can provide a means of validation and understanding for these individuals. It can also serve as a tool to combat harmful societal expectations and emphasize the importance of self-love (Kivisto et al., 2020). Study showed that the quality of life of effeminates in Pakistan, that they faces challenges in terms social and economic well-being. They face violence, which contributes to their poor quality of life (Malik et al.,

2019). Study showed that in Pakistan effeminates faces significant challenges in terms of social support and economic stability. They faces high rate of violence and discrimination (Shaikh et al., 2019).

Research showed that the effeminates individuals face poor quality of life due high rate of unemployment low level of educational attainment (raza et al., 2017). Study showed that The quality of life for effeminate individuals can be impacted by societal expectations of traditional gender roles and biased attitudes towards non-conforming gender expressions (Karl Dieter 2015).Research showed that quality of life of effeminate individuals" effected by experiences of stigma and discrimination due to their appearance and Violating social and cultural norms (Kholmogorova et al., 2017). Study showed that in United States the effeminates faces significant economic challenges, also includes high rate of unemployment and poverty (Grant et al., 2011). Research showed that in terms of effeminacy the effeminate individuals and bisexual men in United Kingdom, effeminate man experienced negative social and economic outcomes, including lower wages fewer jobs opportunity (Glover et al.,2019). Study showed that there is limited research on SES and effeminacy, study showed that the gender nonconformity, including effeminacy are associated with economic challenges and lower SES (Glover et al.
2019).

Theoretical Framework

Social Identity Theory

This theory will explain about how effeminate individuals present them self in the society and how the society think and react on their presence their behavior. This theory also explains the acceptance and rejection of effeminates due to their behavior which violate the society norms. Additionally, it elucidates the profound impact on their self-esteem, quality of life, and mental well-being resulting from societal norms clashing with their behavior. Furthermore it explain the effects which effeminates individuals faces due to their behavior which violate the society norms and rejection by the society. In current study we will use Social identity theory this theory posits that individuals define themselves and others based on social categories, such as gender. According to this theory, effeminate behavior can challenge traditional gender norms and threaten the social identity of those who adhere to those norms. As a result, individuals who are seen as effeminate may face discrimination and prejudice (Tajfel&Turner, 1986).

Gender Identity theory

This theory explains the gender role of individual particularly focusing on how their self-esteem, quality of life, and mental well-being may be disrupted by the incongruity between their biological sex and the gender they adopt for themselves. The effeminates individual present themselves as opposite gender. They violate the gander role of male. They are biological male but present themselves and behave like females in society. They are confused between their biology sex and gender they adopt for themselves. Sex and Gender have clear difference, sex is about body shape and function, gender is identification inside the body (Burdge 2007). Gender identity explain the individual own psychological understanding of being male, female, both,

or in between. Individual gender identity is dependable on their biological sex. Like transgender explain the circumstances an individual having biological sex of male who identify as female (Lehmiller, 2018).

Rationale

Study showed that effeminates males in Pakistan face significant challenge and discrimination which negatively impact their self-esteem and mental health (Inam-ul-Haq, 2017). Study showed that there is limited research on self-esteem of effeminates in Pakistan, because the topic is sensitive and stigmatized in Pakistan society (Nazish et al., 2018). Study shows that being transgender in Pakistan is shameful for whole family. Study show that both male and female with body image dissatisfaction receive less support from their families and less care from both parents (Merckelbach2003). Transgender, effeminates show different behavior from the family and society (Sharif et al., 2005). Another Study showed that effeminates boys face the rejection from their families, which create impact on their self-esteem and mental health (Shaikh, 2018). Study showed that in Pakistan effeminates faces significant challenges in terms of social support and economic stability. They faces high rate of violence and discrimination (Shaikh et al., 2019). Study showed that parenting style influence gender play behavior of children, which has impact in developing of effeminacy (Carver et al., 2013. Research showed that the effeminate individuals often face a daunting challenge in asserting their identities and achieving self-acceptance (Afful, 2015).

Most of past research focuses on body image dissatisfaction (BID) self-esteem, quality of life among females, transgender. The aim of this study is to check role of Parenting Style and Body image Dissatisfaction in Mental Wellbeing, Self-esteem and Quality of life among Effeminates.

Objectives

1. To explore how parenting styles leads to body image dissatisfaction and impact self-esteem and quality of life among effeminates

2. To study relationship between parenting styles and body image dissatisfaction on mental wellbeing of effeminate

3. To find examine the role of body image dissatisfaction on self-esteem and quality of life of effeminates.

Hypotheses

1. There will be significant positive relation of parenting styles on body image dissatisfaction, self-esteem and quality of life among effeminates

2. There will be significant relationship between parenting styles and body image dissatisfaction on mental wellbeing of effeminate

3. There will be significant relationship between body image dissatisfaction on self-esteem and quality of life of effeminate

Chapter-2 Methodology

Research design

Correlation research design were be used.

Ethical Considerations

Participants were provided with a consent form, which include demographic information. They were briefed on the research objectives and assured that no identities were revealed. Their answers provided are only for research purposes. Participants have the right to withdraw at any stage.

Sample

Sample of 150 effeminate participant's age range from 16 to 30 were taken. Sampling technique Snowball sampling technique was be used.

Inclusion Criteria

1.   The age range of male 16 to 30 were included in the research

2.   Those who have female tendencies were included in the research.

Exclusive Criteria

1. Girls were excluded from research

2. And boys of age less than 16 years were excluded.

Instruments

Rosenberg Self-esteem scale

Rosenberg Self-esteem scale (10 items) in 1965 age range above 12. This scale measures the self-esteem of individuals. Internal consistency is 0.77 and coefficient of reproducibility is

0.90. This scale is likert base scale from 1 to 4 (Strong Agree to Strong Disagree).

Warwick Edinburgh Mental well being

Warwick Edinburgh Mental well-being (WEMWBS) Scale 2006 (14 items) age range 16 and above. This scale measure the mental well-being which cover positive felling and function of mental well-being. The scale is valid for use those age is 16 or above. This scale is likert type scale from 1 to 5 (1None of the time - 5 All of the time).

Body image dissatisfaction

BDS) Body image dissatisfaction scale 1983 consist (26 items). This scale measures the tendencies of body image dissatisfaction in male those who are not satisfied with their physical appearance. It is a likert scale option from 1 to 5 (1Not at al - 5 All the time). **Quality of life Scale**

WHO Quality of life Scale (26-items). Alpha coefficient is 0.89. This scale measures the perception of individuals and their position in life's, expectations and concerns. This scale is likert scale.

Steinberg Parenting style:

Steinberg's Parenting Scale (2005) contain 24 items. Involvement 0.70, psychological autonomy is 0.66, for strictness 0.7. This scale is likert scale and measures the autonomy, granting supervision and strictness.

Procedure

To effectively begin the data collection, a letter of permission was submitted to the Psychology Department, with the study's objectives and instrument used. Rosenberg Self-esteem scale 1965 (10 items) age range above 12. Internal consistency is 0.77 and coefficient of reproducibility is 0.90 Warwick Edinburgh Mental well-being (WEMWBS) Scale 2006 (14 items) age range 16 and above. The scale is valid for use those age is 16 or above. (BDS) Body image dissatisfaction scale 1983 consist (26 items) WHO Quality of life Scale (26items). Alpha coefficient is 0.89. Steinberg's Parenting Scale (2005) contain 24 items. Involvement 0.70, psychological autonomy is 0.66, for strictness 0.75. After official approval, along with questionnaire which was used during data collection the subjects was start collecting data from the participants. Participants were provided with a consent form, which was include demographic information. They were briefed on the research objectives and assured that no identities were revealed. Their answers provided are only for research purposes. Participants have the right to withdraw at any stage. This study procedure was time consuming and resources consuming like money so, time constrain was major hurdle while conducting research. Data was analyzed by using SPSS.

Chapter-3 Results

The study aimed to find out the role of parenting style and body image dissatisfaction in mental wellbeing self-esteem and quality of life among effeminates. The data has been collected from participants (N=150) in Islamabad and Rawalpindi and was analyzed through descriptive includes, mean, median, mode, and frequency statistics for demographic variables and also calculate the reliability and Spearman correlation for non-normal data.

Table 1

Demographic characteristics of the participants

Characteristics	Categories	*f*	*%*
Age	16-20	56	37.3
	21-25	64	42.2
	26-30	30	20.0
Number of siblings	1-3	47	31.3
	4-6	67	44.7
	7-9	36	24.0
Your number in siblings	younger	71	47.3
	middle	46	32.7
	Elder	30	20.0
Do you have sisters	Yes	105	70.0
	No	45	30.0
Number of friends	1-5	80	53.3
	6-10	44	29.3
	11-15	26	17.3
Is your both parents are alive	Yes	95	63.3
	No	55	36.7
With whom you are most attached	Mother	94	62.7
	father	56	37.3
Your job	Employed	63	42.0
	Unemployed	87	58.0

Note: f= frequency, % = Percentage

Table 1 showed that the total number of participants was (N=150) most of participants are from (21-25) aged group their total number was (N=64) and after this age group the second highest participants group was (16-20) aged group people there total number was (N=56) and then third group was (26-30) aged people there total number was (N=30) and their frequencies (37.3 and 42.2 and 20.2). Then number of siblings was asked from participants and results showed that most of the participants have (4-6) number of siblings and results showed that most of the study participants are younger in their siblings (N=71) then middle number in siblings (N=49) and then elder one (N=30) and their frequencies (43.3 30.7 and 20.0). Majority of the participants have sisters (N=105) and few participants didn't have sisters (N=45). Results shows that most of the participants (N=80) have only (1-5) friends and (N=44) participants have (6-10) friends and (N=26) participants have (11-15) friends in total and their frequencies (53.3 29.3 and 17.3). Most of the participants have both parents alive (N=95) and their frequency (63.3) and most of the participants are attached with their mothers (N=94) and their frequency (62.7). Results show that most of the participants are unemployed with a total number of (N=87) and their frequency (58.0).

Figure 1

what is your age

Mean = 1.83
Std. Dev. = .74
N = 150

Figure 2

number of siblings

Mean = 1.93
Std. Dev. = .743
N = 150

Figure 3

your number in siblings

Mean = 1.73
Std. Dev. = .776
N = 150

Figure 4

do you have sisters

Mean = 1.3
Std. Dev. = .46
N = 150

Figure 5

number of friends

Mean = 1.64
Std. Dev. = .762
N = 150

Figure 6

is your both parents are alive

Mean = 1.37
Std. Dev. = .484
N = 150

Figure 7

with whom you are most attached

Mean = 1.37
Std. Dev. = .485
N = 150

Figure 8

your job

Mean = 1.58
Std. Dev. = .495
N = 150
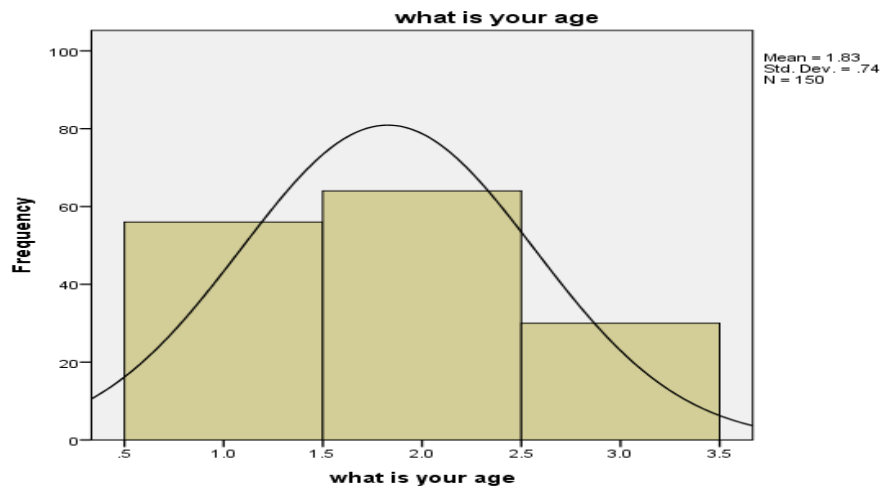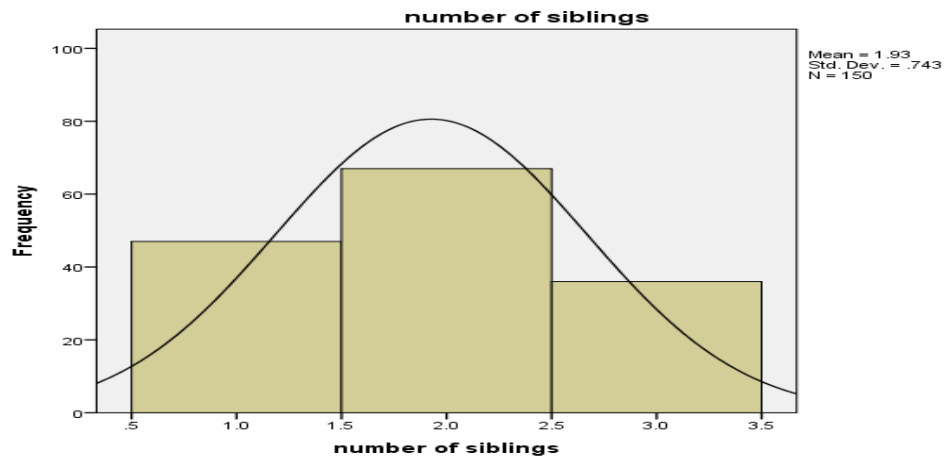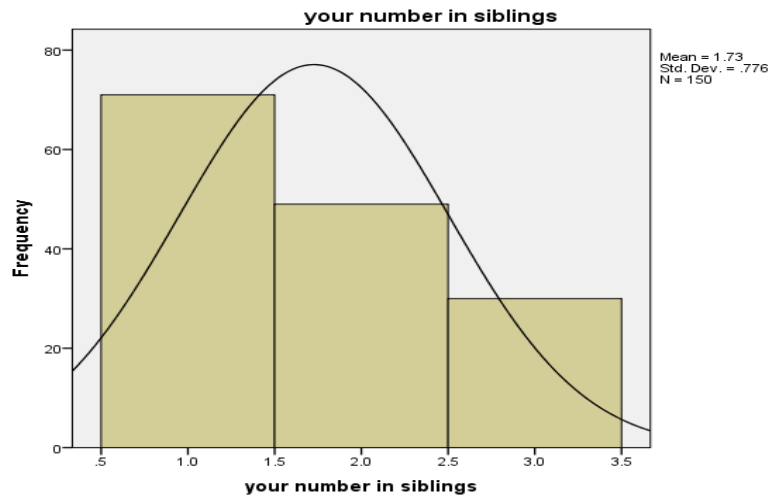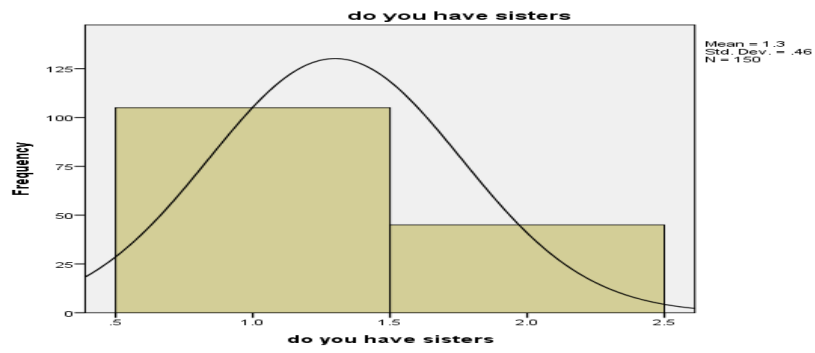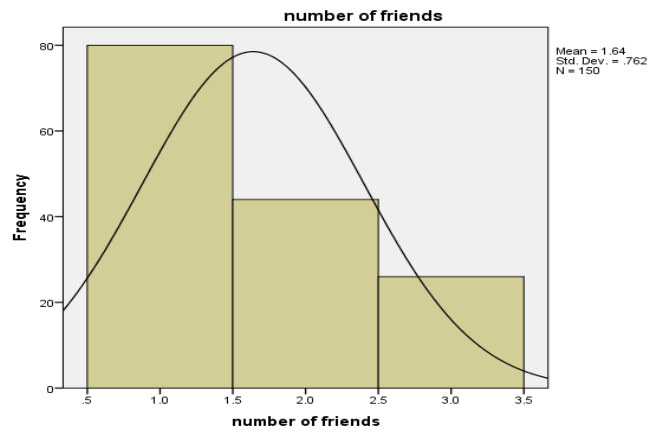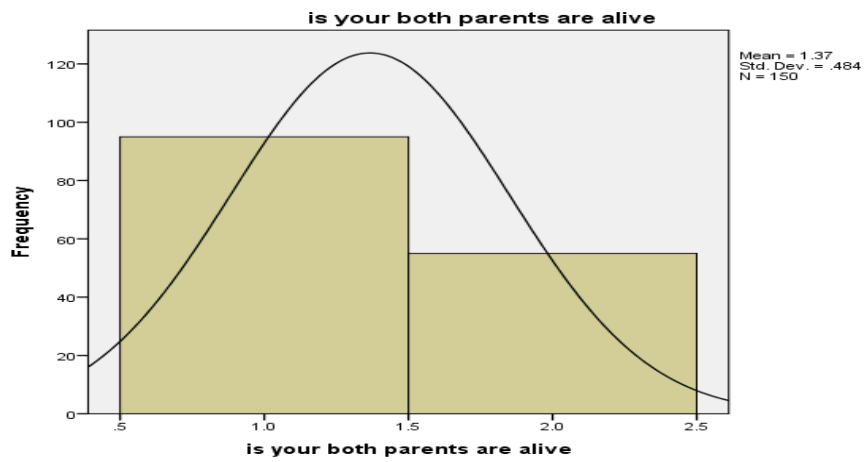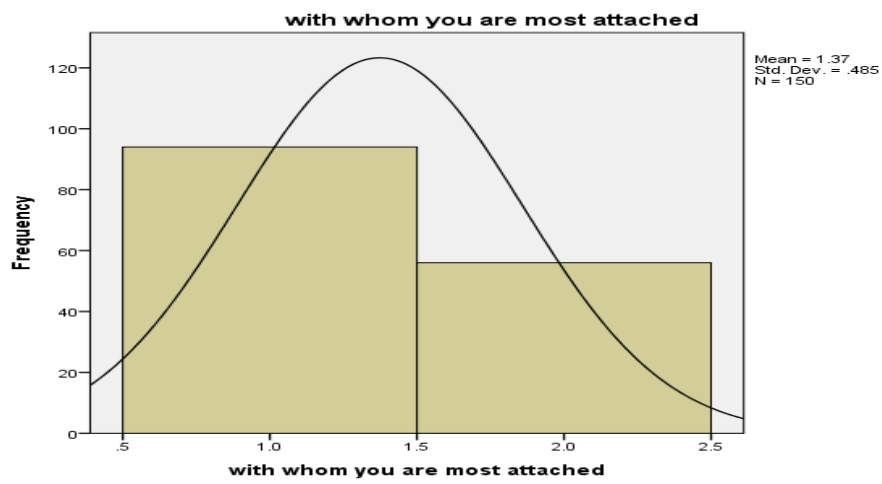
28
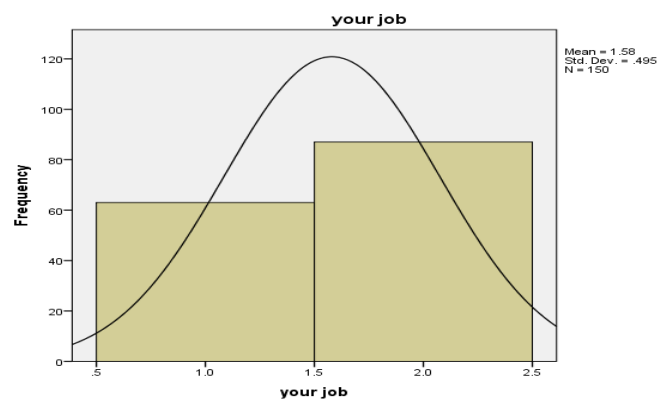
Table 2

Cronbach's alpha reliabilities of the parenting style scale body image dissatisfaction scale self-esteem scale mental well-being scale and quality of life scale

Psychometric Properties of Scales

Scale	*n*	*M*	*SD*	Range		α
				Actual	Potential	
SPSS	24	52.61	9.04	47	120	.79
BDSM	26	67.86	11.85	47	130	.80
SES	10	22.20	5.76	20	40	.85
WHO	26	71.13	10.85	43	130	.82
WEMBS	14	39.08	9.28	35	70	1
ACCEPTANCE	10	22.2	4.15	18	100	.80
AUTONOMY	8	17.6	3.79	18	40	.63
STRICTNESS	6	12.71	3.27	16	30	.71
						.62

Note: M (mean)*, SD* (standard deviation)

Table 2 exhibits that SPSS Steinberg parenting style scale have (α=.799) reliability and mean value of (M=52.6) and standard deviation (SD=9.0) so this is reliable. BDSM body image dissatisfaction scale have (α=.801) reliability and mean value of (M=67.8) and standard deviation of (SD=11.8) so this is reliable. SES Rosenberg self-esteem scale have (α=.851) reliability and mean value of (M=22.2) and standard deviation of (SD=5.7) so this is reliable.

WHO Quality of life scale have (α=.821) reliability and mean value of (M=71.1) and standard deviation of (SD=10.8) so this is reliable. And WEMWBS Mental well-being scale have (α=.806) reliability and mean value of (M=39.0) and standard deviation of

(SD=9.2) so this is reliable Acceptance Reliability was (.631) and the Mean value is (22.2) and the Median is (22.0) and Std deviation (4.15) so this is reliable Autonomy Reliability was (.713) and mean value for autonomy was (17.6) and the Median value is (18.0) and Std deviation value is (3.79) so this is reliable and for Strictness reliability was (.622) and the Mean value is (12.71) and the Median value is (12.0) and the Std deviation value is (3.27) so this scale is reliable. Actual range for SPSS is 47 and potential range is 120. Actual range for BDSM is 47 and potential range is 130. Actual range for SES is 20 and potential range is 40. Actual range for WHO is 43 and potential range is 130. Actual range for WEMBS is 35 and potential range is 70. For Acceptance actual range is 18 and potential range is 100. For Autonomy actual range is 18 and potential range is 40. For Strictness actual range is 16 and potential range is 30.

Table 3

Mean, Median, Standard deviation, skewness, Kurtosis, and Kolmogorov-Smirnov test statistics of the parenting style scale body image dissatisfaction scale self-esteem scale mental well-being scale and quality of life scale

Measures	M	Median	SD	Skewness	Kurtosis	KS	P
SPSS	52.61	52.0	9.04	.699	.676	.000	.000
BDSM	67.86	67.0	11.85	.573	.-.516	.007	.000
SES	22.20	20.0	5.76	.973	-.370	.000	.000
WHO	71.13	71.0	10.85	499	-.703	000	.000
WEMBS	39.08	38.0	9.28	.174	-1.290	000	.000

Note: M (mean)*, SD* (standard deviation)*, p* (significant value)

Table 3 indicates the mean value for Steinberg parenting style scale is (mean=52.5) and median value is (median=52.0) and skewness value is (.699) and

kurtosis values is (.676) The mean value for Rosenberg self-esteem scale is (mean=22.2) and median value is (median=20.0) and skewness value is (.973) and kurtosis value is (.-370) .The mean value of body image dissatisfaction is (mean=67.8) the median value is (median=67.0) and skewness value is (.573) and Kurtosis value is (-.516) Who quality of life scale mean is (mean=71.1) and median value is (71.0) and skewness value is (.499) and kurtosis value is (-.703) Mental well-being scale mean (mean=39.0) and median value is (median=38.0) and skewness value is (.174) and Kurtosis value is (-1.290).

Figure 9
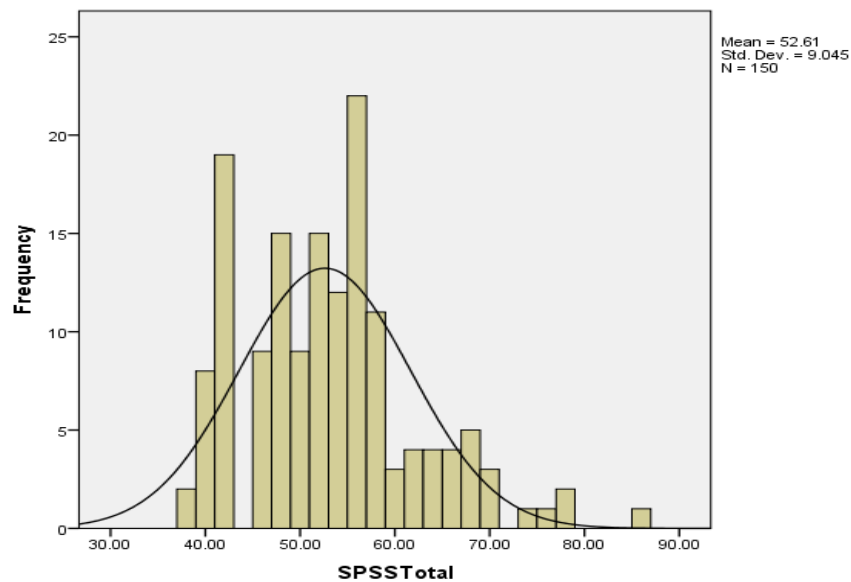
Figure 10
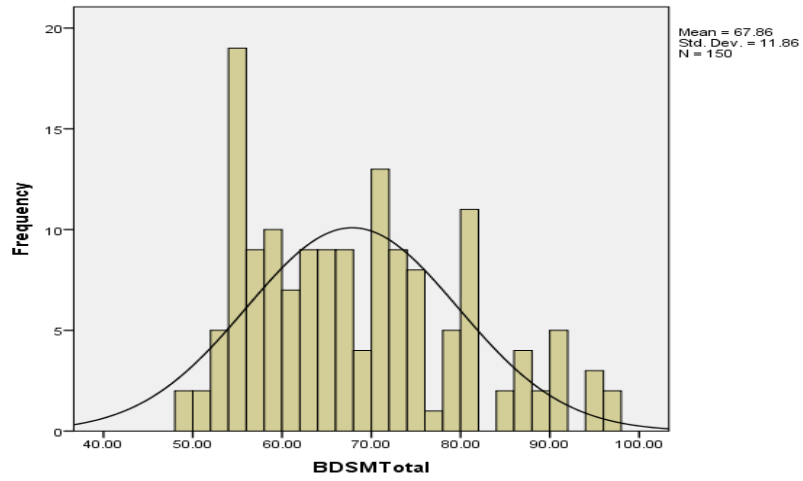
Figure 11

Figure 12

Figure 13

Mean = 39.09
Std. Dev. = 9.286
N = 150
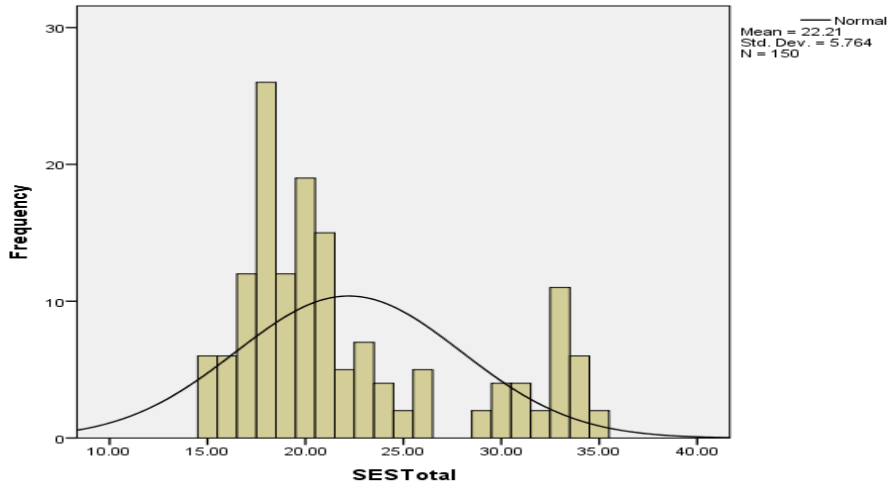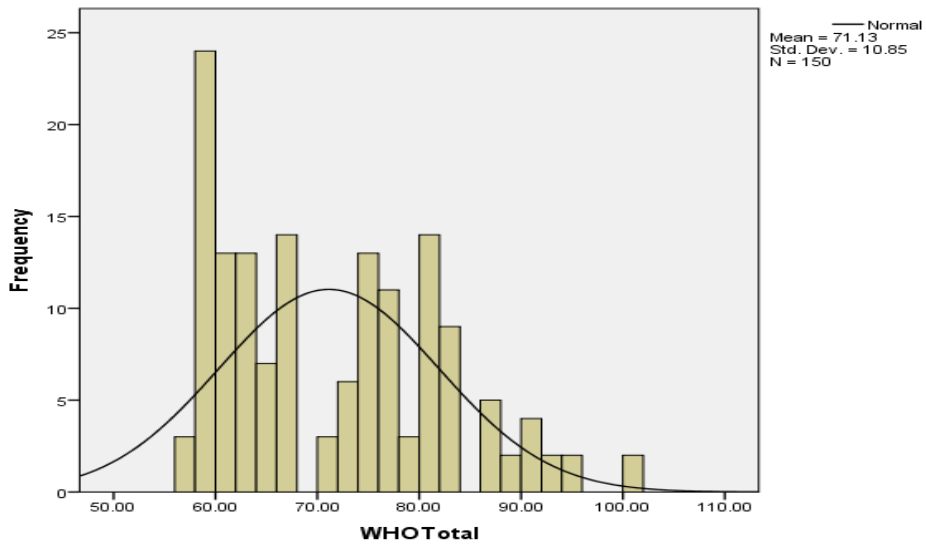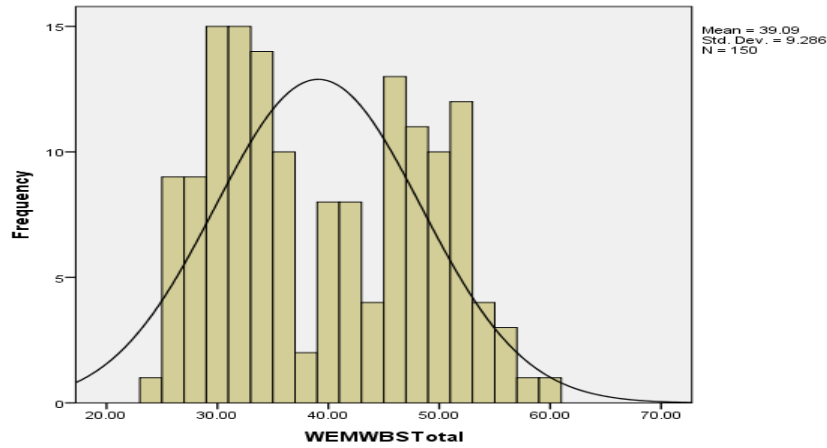
Table 4

Correlation among parenting style body image dissatisfaction self-esteem

and quality of life

Variables	SPSS	BDSM	SES	WHO	WEM	ACCP	AUT	STRIC
SPSS	-	.36**	.14	.17*	-.19*	.79**	.80**	.70**
BDSM		-	.19*	.23**	-.25**	.02	.36**	.44**
SES			-	.19*	-.11	.05	.22**	.05
WHO				-	-.03	.08	.23**	.16*
WEM					-	-.12	-.12	-.21**
ACCP						-	.44**	.31**
AUT							-	.48**
STRIC								-

Note: BDSM (body image dissatisfaction), SES (self-esteem scale), WHO (world health organization)

 Table 4 results shows significantly positive relationship between parenting style

body image dissatisfaction (p=.360*) self-esteem (p=.145) and quality of life (p=.178)

this result shows that parenting style have positive effects on body image dissatisfaction

self-esteem and quality of life. Table 4 shows that Psychological Autonomy granting

have strong significant positive relationship with Body image dissatisfaction (p=.367*)

self-esteem (p=.220) and quality of life (p=.235*).

Table 5

Correlation among parenting style body image dissatisfaction and mental well-being

	WEMWBSS	BDSM
SPSS	-.197**	.360**
ACCEPTANCE	-.124	.026
AUTONOMY	-.125	.367**
STRICTNESS	-.215**	.442**

Note WEMWBS (warwick-endinburgh mental wellbeing scale) *BDSM* (body image dissatisfaction scale*)*

Table 5 results shows that parenting style have significant negative relationship with mental well-being (p=.-197*) and positive relationship with body image dissatisfaction (p=.360). Table 5 results shows that Strictness and Supervision have significant positive relationship with body image dissatisfaction (p=.442) and negative relationship with mental well-being (p=.-215*). This shows that parenting style have impact on body image dissatisfaction and mental well-being.

Table 6

Correlation among body image dissatisfaction self-esteem and quality of life

Variables	BDSM	SES	WHO
BDSM	-	.19**	.238**
SES		-	.19*
WHO			-

Note SES (self-esteem scale), *WHO* (world heatlh organization)

Table 6 results shows that body image dissatisfaction have significant positive relationship with self-esteem (p=.194*) and quality of life (p=.238*).

Chapter- 4 Discussion

This study focused on understanding how the way parents raise effeminate individuals and their feelings about their bodies might affect their mental well-being, self-esteem, and overall quality of life. In the complex world of human experiences, the relationship between parenting styles, body image dissatisfaction, and its impact on mental health is a complicated story that needs careful examination. Beyond just how they look, feeling unhappy about their bodies among effeminate individuals might be connected to how their parents raised them. This research aims to uncover the connections between parenting styles, body image issues, and how these factors affect the mental well-being, self-esteem, and overall quality of life for effeminate individuals. Parenting styles act like a guide for emotions, influencing how effeminate individuals see themselves. It involves both conscious and unconscious ways that parents shape how their children feel about their bodies and, as a result, impact their mental and emotional well-being. As we continue to look into this topic, we'll explore studies and ideas about how the way parents raise effeminate individuals, along with how they feel about their bodies, can affect their mental well-being, self-esteem, and overall quality of life. This investigation aims to uncover the connections between parenting styles, body image dissatisfaction, and the psychological aspects of effeminate individuals' lives. By understanding these connections, we hope to find ways to provide better support, guidance for parents, and increase awareness about the emotional well-being of effeminate individuals.

There will be significant positive relation of parenting styles on body image dissatisfaction, self-esteem and quality of life among effeminates. A significant positive relationship has been found with respect to parenting style body image dissatisfaction

(.360*) self-esteem (.145) and quality of life (.178). It shows that parenting style have positive affect on body image dissatisfaction self -esteem and quality of life of effeminates.

Body image dissatisfaction

One of the previous study results shows that parenting style has a positive relationship with body image dissatisfaction in children and adolescents. Studies have found that an authoritarian parenting style, characterized by strict rules, high expectations, and low warmth, is associated with higher levels of body dissatisfaction (Wansink & Wansink, 2020). These children are typically more critical of their appearance and more likely to engage in unhealthy weight control behaviors. Another study have suggested that an authoritative parenting style, involving a balance of warmth, support, and reasonable expectations, is associated with body image dissatisfaction (McBride, 2007; Shroff & Thompson, 2006). These children have better emotional well-being, higher self-esteem, and have concern about their body shape and weight. Research indicates that parental comments about physical appearance play a significant role in shaping a child's body image (Tiggemann & Slater, 2014). Another study shows that Negative comments related to weight, shape, or appearance contribute to increased body dissatisfaction. Another study shows that Parents who emphasize the importance of appearance and weight control also contribute to the development of body dissatisfaction (Hudson et al., 2013). Study findings suggests that parents have a strong influence on their children's body image development, few studies have examined this relationship longitudinally or considered its dyadic nature, that is, the presence of both parent and child driven effects. Parent driven effects encompass parents' characteristics and behaviors that are assumed to predict children's

development and are commonly found in the scientific literature (e.g., Solano-Pinto et al., 2021). Research has suggested that a parent's body image dissatisfaction has the greatest impact on the body image development in their children (Damiano et al., 2015). Researchers have also found that effeminate boys tend to have greater body image dissatisfaction and weight concerns, than normal boys, and may also receive more comments regarding their appearance within the family environment (Jongenelis et al., 2014, Phares et al., 2004).

Quality of life

The literature provides evidence of a positive relationship between parenting style and the quality of life of children and adolescents. Studies have shown that an authoritative parenting style, characterized by warmth, responsiveness, and reasonable expectations, is associated with higher QoL outcomes in children (Amato et al., 2019; Limberis et al., 2018). These children tend to have better physical health, higher self-esteem, improved social relationships, and overall greater life satisfaction. Studies shows that authoritarian parenting style, characterized by strict rules, high expectations, and limited warmth, has been linked to lower QoL outcomes in children (Kim et al., 2015; Mählck et al., 2017). These children may experience higher levels of stress and lower psychological well-being, affecting their overall QoL. Another research suggests that parental involvement and consistent discipline also contribute to higher QoL in children and adolescents. Parents who engage in regular communication, show interest in their children's activities, and provide appropriate guidance and limits tend to have children with better overall QoL (Ruchkin et al., 2015; Xu et al., 2016). Studies have found that the presence of a positive parent child relationship is vital for promoting higher QoL in children and adolescents. Secure attachment between parents and

children, characterized by trust, warmth, and emotional support, and has been associated with improved psychological well-being and overall QoL (Leidy et al., 2016; Blöte et al., 2013).

Self-esteem

Positive relationship with self-esteem Study shows that Parenting styles play a pivotal role in shaping a child's self-esteem, a crucial aspect of their psychological well-being. The study findings suggests a positive relationship between authoritative parenting and elevated self-esteem in children. This association is deeply rooted in the distinctive characteristics of authoritative parenting, encompassing warmth, support, and well-defined boundaries (Furham and Cheng 2000). Study shows that the key components contributing to this positive correlation is the emotional warmth inherent in authoritative parenting. Findings highlight the significance of parental warmth in building a child's self-esteem. According to Maccoby and Martin (1983), authoritative parents provide emotional support, creating a secure attachment that forms the basis for a positive self-image. Another study shows balance between warmth and clear expectations is another hallmark of authoritative parenting. Parents employing this style set reasonable demands and enforce boundaries while maintaining open communication and responsiveness shows good quality of life in children (Suldo and Hubner 2004). Research by Darling and Steinberg (1993) shows that such a balanced approach fosters a sense of competence and autonomy in children, positively influencing their self-esteem. Research by Steinberg's longitudinal study in 1991 shows that authoritative parenting on self-esteem. Tracking adolescents over a four-year period, the study found that those raised by authoritative parents consistently exhibited higher self-esteem. This longitudinal perspective underscores the lasting effects of

authoritative parenting on the development and maintenance of positive self-esteem throughout the crucial adolescent years (Steinberg et al., 1991). Pinquart and Kauser's meta-analysis in 2018 extended the scope of understanding by consolidating findings across diverse cultural contexts. The meta-analysis confirmed the positive association between authoritative parenting and children's self-esteem, emphasizing the cross-cultural relevance of this relationship. The study considered a wide range of research, providing a comprehensive overview of the global applicability of authoritative parenting in promoting positive self-esteem outcomes (Pinquart & Kauser, 2018).

While authoritative parenting stands out for its positive impact, other parenting styles show varying effects on self-esteem. Authoritarian parenting, characterized by high demands and low warmth, may contribute to lower self-esteem due to its strict and punitive nature (Baumrind, 1966). Permissive parenting, marked by low demands and high warmth, might result in children lacking a sense of responsibility, potentially affecting their self-esteem negatively. It is crucial to recognize that cultural nuances play a role in shaping parenting practices and their impact on self-esteem. Dwairy's cross-cultural study in 2010 investigated parenting styles in Arab societies, finding that authoritative parenting was associated with higher self-esteem in Arab adolescents. This highlights the importance of considering cultural contexts when examining the relationship between parenting styles and self-esteem (Dwairy, 2010).

Psychological Autonomy granting by parents:

Table 4 shows that Psychological Autonomy granting have strong significant positive relationship with Body image dissatisfaction (p=.367*) self-esteem (p=.220) and quality of life (p=.235*). Psychological autonomy refers to a child's developing sense of independence, self-regulation, and decision-making abilities. While autonomy

is generally associated with positive outcomes, it is important to critically examine its potential negative consequences, particularly in the context of body image development. Research has begun to shed light on the potential downsides of unchecked autonomy in parenting. Excessive independence without proper guidance may lead to internal conflicts and decision fatigue in children. This internal struggle can extend to body image concerns, especially when societal standards clash with a child's evolving sense of self. In a world saturated with unrealistic beauty standards, children may internalize societal expectations, contributing to negative body image perceptions. Excessive autonomy without a supportive framework may expose children to harmful influences, making them more susceptible to the detrimental impact of societal pressures on body image. The pervasive influence of media exacerbates the challenges associated with autonomy and body image. Children granted excessive independence may be more vulnerable to media messages that emphasize physical appearance over holistic well-being. Without proper guidance, autonomy can inadvertently expose children to harmful media narratives, fueling negative body image perceptions. A study conducted by Van Petegem et al. (2016) explain the relationship between parental autonomy support, body image dissatisfaction, and self-esteem in adolescents. The results shows that adolescents who perceived higher levels of autonomy support from their parents reported higher body image dissatisfaction and higher self-esteem. Another research results by Soenens and Vansteenkiste (2005) found that the autonomy supportive parenting positively influenced adolescents' psychological well-being, including higher self-esteem and a more chances of body image dissatisfaction. A Longitudinal studies add depth to the understanding of these relationships. A study by Barber et al. (2003) followed adolescents over several years,

finding that parental autonomy granting during early adolescence predicted higher self-esteem and greater chance of body dissatisfaction in later adolescence.

Another research study shows that cultural influences play a role in shaping these dynamics. A cross-cultural study by Ievers-Landis et al. (2006) explain the impact of parental autonomy support on the body image and self-esteem of adolescents from different cultural backgrounds, emphasizing the universality of the positive effects.

Research consistently indicates that parents who grant autonomy create an environment that empowers children. When given opportunities to make choices and express themselves, children develop a sense of agency and control over their lives. This empowerment lays the groundwork for a positive self-image and increased self-esteem. Autonomy granting allows children to engage in age-appropriate decision-making, contributing to a sense of competence. As children successfully navigate choices and challenges, they build confidence in their abilities, fostering a positive self-perception that extends beyond specific tasks to a broader sense of self-worth. In the face of life's challenges, children with a strong foundation of autonomy may perceive setbacks as opportunities for growth rather than threats to their self-esteem. This resilience, cultivated through autonomy, acts as a protective factor against negative self-perceptions and fosters a more optimistic outlook on their capabilities. Granting autonomy encourages the development of individuality and a unique sense of identity. When children are allowed to express their preferences, pursue interests, and make decisions aligned with their values, it contributes to a positive self-concept, reinforcing the idea that their individuality is valued and respected.

A study conducted by Jones and Crawford (2006) the findings explain positive relationship between parental autonomy support and body image satisfaction. The

researcher shows that an excessive degree of autonomy, coupled with societal pressures and unrealistic body ideals, might contribute to heightened body image dissatisfaction in children's.

Autonomy granting refers to the degree to which parents allow their children independence, self-expression, and decision-making capabilities. It is a fundamental component of healthy parenting that empowers children to develop a sense of self-control, responsibility, and competence. Research suggests that the way parents' foster autonomy can have profound implications for children's psychological, social, and emotional well-being (Wallander 2016).

Studies have established a positive association between parental autonomy granting and children's psychological well-being. Research published in the Journal of Child and Family Studies found that children who perceive their parents as supportive of their autonomy exhibit higher levels of self-esteem and lower levels of anxiety and depression. The ability to make choices and have a say in one's life contributes to a sense of competence and agency, key factors in promoting psychological well-being (Alhamed 2021).

Study shows that autonomy granted by parents might also influence how adolescents perceive themselves in comparison to peers. Slater and Tiggemann (2016) found that autonomy, when not accompanied by discussions about body image and peer comparisons, could lead to increased dissatisfaction. The absence of parental guidance may leave adolescents susceptible to negative social comparisons, impacting their body image.

Autonomy granting refers to the degree to which parents allow their children independence, self-expression, and decision-making capabilities. It is a fundamental component of healthy parenting that empowers children to develop a sense of self-control, responsibility, and competence. Research suggests that the way parent's foster autonomy can have profound implications for children's psychological, social, and emotional well-being (Wallander 2016). Studies have established a positive association between parental autonomy granting and children's psychological well-being. Research published in the Journal of Child and Family Studies found that children who perceive their parents as supportive of their autonomy exhibit higher levels of self-esteem and lower levels of anxiety and depression. The ability to make choices and have a say in one's life contributes to a sense of competence and agency, key factors in promoting psychological well-being (Alhamed 2021). Study shows that during the period of puberty, autonomy granting may interact with the challenges of bodily changes. Researchers Smolak and Murnen (2011) argued that autonomy, without concurrent support for understanding and accepting pubertal changes, might exacerbate body dissatisfaction. The mismatch between autonomy and unaddressed concerns about changing bodies could contribute to negative self-perceptions.

2 There will be significant relationship between parenting styles and body image dissatisfaction on mental wellbeing of effeminate   Table 5 results shows that parenting style have significant negative relationship with mental well-being (p=.-197*) and positive relationship with body image dissatisfaction (p=.360*)

Research consistently points to a range of adverse outcomes associated with overly strict parenting practices. One significant concern is the heightened risk of anxiety disorders and elevated stress levels in children raised in excessively

authoritarian environments. A study in the Journal of Abnormal Child Psychology found a positive correlation between extremely strict parenting and increased symptoms of anxiety in children.

Excessive parental strictness has also been linked to lower self-esteem and negative self-perception in children. When children experience constant criticism, harsh punishment, or unrealistic expectations, they may internalize negative beliefs about themselves. Research published in the Journal of Family Psychology (2017) has demonstrated a clear association between overly strict parenting and the development of low self-esteem in children, which can have lasting implications for their mental well-being.

The quality of the parent-child relationship is crucial for a child's emotional development. Overly strict parenting practices often strain this relationship, leading to feelings of resentment and alienation in children. A study in the Journal of Adolescence 2019 highlighted that children subjected to extreme parental control may experience difficulties in forming secure attachments, hindering their emotional well-being and interpersonal relationships later in life. Research indicates that authoritarian parenting, characterized by high demands and low responsiveness, is linked to negative mental health outcomes in children. A meta-analysis by Pinquart and Kauser (2018) found that authoritarian parenting was associated with higher levels of anxiety and depression in children. The strict and controlling nature of authoritarian parenting may contribute to feelings of inadequacy, hindering the development of a positive self-concept and impacting mental well-being.

Another parenting style involving high demands and low responsiveness has been examined in relation to mental well-being. Fletcher et al.'s (2011) study revealed

that adolescents raised in such households exhibited higher rates of risky behaviors, substance abuse, and lower psychological well-being. The clear boundaries and expectations may contribute to a sense of insecurity and hinder responsible decision-making, negatively affecting mental well-being. Egeland et al. (1993) explain that the absence of emotional support and guidance can contribute to a range of mental health issues, including depression and anxiety.

Longitudinal studies provide insights into the enduring impact of parenting styles on mental well-being. A study by Weiss and Schwarz (1996) followed children from early childhood into adolescence, revealing that children raised in authoritative households had significantly better mental health outcomes compared to those with an authoritarian parenting style. The enduring effects highlight the importance of early parenting styles in shaping long-term mental well-being. Cultural variations in parenting styles and their impact on mental well-being are crucial to consider. Research by Chao (1994) explored differences between Asian and Western parenting styles, revealing that the authoritarian parenting commonly found in Asian cultures was associated with lower self-esteem and higher anxiety in children. Research shows that the level of parental control in various parenting styles plays a pivotal role in shaping children's autonomy. A study by Soenens et al. (2012) found that high levels of parental psychological control were linked to lower levels of autonomy and poorer mental health outcomes in adolescents. Body image dissatisfaction, characterized by negative perceptions and feelings about one's own body, is a significant concern among children and adolescents. Research has consistently demonstrated the influential role of parents in shaping their children's body image perceptions. The way parents communicate about body-related topics, enforce beauty standards, and exhibit behaviors related to

appearance can all contribute to the development of body image dissatisfaction (J Chen2023).

Parental expectations and the pressure to meet these expectations have been identified as potential stressors affecting mental well-being. A study by Schaefer et al. (2011) found that high levels of parental expectations, especially in the context of perfectionism, were associated with increased anxiety and depressive symptoms in adolescents. Table 5 results shows that Strictness and Supervision have significant positive relationship with body image dissatisfaction (p=.442*) and negative relationship with mental well-being (p=.-215*). This shows that parenting style have impact on body image dissatisfaction and mental well-being.

Excessive strictness has been linked to difficulties in emotional regulation. Research by Dix et al. (2009) found that children with overly controlling parents exhibited poorer emotional regulation skills, potentially leading to increased stress and anxiety. The negative impact of strictness on mental well-being can extend to the parent-child relationship. Studies, including research by Shek (2005), have suggested that overly strict parenting may strain the parent-child relationship, leading to increased conflict and reduced emotional support.

While supervision is essential for ensuring a child's safety, excessive monitoring without allowing age-appropriate independence may have negative consequences. A study by Kerr et al. (2012) found that high levels of parental monitoring without granting autonomy were associated with increased depressive symptoms in adolescents, suggesting that an overly vigilant approach may contribute to mental health challenges.

Parental strictness may intersect with gender stereotypes, influencing body image perceptions differently for boys and girls. Research in the Journal of Eating Disorders 2019 suggests that strict parenting enforcing traditional gender norms can contribute to body dissatisfaction, particularly in girls. Unrealistic expectations related to body size and shape, imposed by strict adherence to gender stereotypes, may contribute to the development of negative body image in children.

The manner in which parents communicate about their children's bodies can have a profound impact on body image. Strictness that manifests as critical comments, body shaming, or constant monitoring of appearance can lead to negative body perceptions. Research in the International Journal of Eating Disorders 2019 has highlighted the association between parental criticism and increased body dissatisfaction among children, emphasizing the need for a more supportive and positive approach to body-related discussions.

Excessive strictness can contribute to elevated anxiety and fearfulness in children. Research by Wood et al. (2003) suggested that children of extremely strict parents were more likely to experience heightened anxiety levels, potentially leading to chronic stress and negatively impacting mental well-being. Parents, as significant socializing agents, play a crucial role in shaping their children's body image perceptions. A study by Perloff and Jorgensen (2013) highlighted the impact of parental attitudes and behaviors, suggesting that parents can influence their children's body image through comments, feedback, and overall communication about appearance.

The authoritarian parenting style, characterized by high strictness and control, has been associated with negative body image outcomes in some studies. Researchers Smolak and Levine (1994) found that adolescents with strict parents were more likely

to report dissatisfaction with their bodies. The rigid expectations and emphasis on conformity in authoritarian parenting may contribute to heightened body image concerns.

The role of parental supervision in shaping body image perceptions is nuanced. A study by Berge et al. (2013) explored the relationship between parental control, specifically related to food, and body dissatisfaction. The findings suggested that excessive control over food choices was associated with increased body dissatisfaction in adolescents, implying that strict supervision in certain aspects of life, such as dietary choices, might contribute to negative body image perceptions. Parental discussions about appearance and weight-related topics can impact body image. A study by Shroff and Thompson (2006) found that frequent discussions about weight and appearance within the family were linked to higher levels of body dissatisfaction in adolescents.

3 There will be significant relationship between body image dissatisfaction on self-esteem and quality of life of effeminate. Table 6 results shows that body image dissatisfaction have significant positive relationship with self-esteem (p=.194*) and quality of life (p=.238*). Research indicates that experiencing body image dissatisfaction can serve as a catalyst for self-reflection and personal growth. Fikkan and Rothblum (2012) propose that individuals grappling with body dissatisfaction may undergo a process of self-exploration, leading to a deeper understanding of personal values and a greater appreciation for non-appearance-related qualities. This heightened self-awareness can positively influence self-esteem. In some cases, body image dissatisfaction may act as a motivator for adopting healthier lifestyle behaviors. Tylka and Homan's (2015) research suggests that individuals experiencing body dissatisfaction but engaging in health-promoting behaviors, such as exercise and

balanced nutrition, reported higher levels of self-esteem. Pursuing positive health behaviors became a source of empowerment and self-worth. Cultural factors play a significant role in shaping the relationship between body image dissatisfaction and self-esteem. Swami et al. (2010) explain the impact of cultural beauty ideals on body image and self-esteem, noting that in cultures valuing larger body sizes, individuals experiencing body dissatisfaction did not necessarily show lower self-esteem. A longitudinal study by Tiggemann and Slater (2014) found that adolescents with higher levels of resilience were less susceptible to the negative effects of body dissatisfaction on self-esteem. Resilient individuals demonstrated the ability to maintain positive self-worth despite societal pressures. A positive relationship between body image dissatisfaction and self-esteem may emerge when individuals cultivate self-acceptance despite perceived physical imperfections. Avalos et al. (2005) explored the concept of body appreciation, suggesting that individuals with body dissatisfaction could still maintain a positive overall self-image by appreciating their bodies for functions beyond appearance. Social support, particularly from family and friends, can influence the relationship between body image dissatisfaction and self-esteem. Perloff and Jorgensen (2015) found that individuals perceiving higher levels of social support reported greater self-esteem, even when experiencing body dissatisfaction. Supportive relationships acted as buffers against negative self-perceptions. A study investigating the relationship between body image concerns and quality of life among college students revealed that higher levels of body image dissatisfaction were associated with quality of life. However, the study also found that individuals reporting higher levels of body image dissatisfaction were motivated to engage in healthier behaviors, including exercise and healthier eating, to improve their body image and overall quality of life (Tiggemann & McCourt, 2013).

Strategies for body image to improve self esteem and quality of life (Yvette Brazier2023) Cognitive-Behavioral Therapy (CBT) is a widely embraced therapeutic approach for addressing negative thought patterns associated with body image dissatisfaction, guiding individuals in recognizing and challenging harmful beliefs to foster a more positive self-perception. Mindfulness and meditation practices enhance self-awareness and acceptance by directing focus to the present moment, aiding in the development of a healthier relationship with one's body and reducing anxiety related to appearance. Regular physical activity contributes to an enhanced sense of well-being, positively affecting mood and body image. Activities such as walking or yoga, not necessarily intense exercises, can be particularly beneficial. Educational initiatives on balanced nutrition and cultivating a healthy relationship with food play a pivotal role in positively influencing body image. Collaborating with nutritionists or dietitians supports individuals in adopting sustainable and mindful eating habits. Encouraging positive affirmations involves regularly acknowledging and emphasizing your strengths, gradually shaping a more positive self-perception. Challenge negative thoughts about your body by questioning their validity and replacing them with realistic, positive perspectives. Cultivate self-compassion by treating yourself with kindness and understanding, extending the empathy you'd offer to a friend facing similar challenges.

Set achievable goals beyond physical appearance, focusing on personal growth, skills development, or hobbies to broaden your sense of accomplishment. Surround yourself with positivity by engaging with friends, family, and communities that promote body positivity and support your journey toward self-acceptance.

Be mindful of social media content, un-follow accounts that contribute to negative body image and seeking platforms that endorse diversity and body acceptance. Shift the focus from appearance to overall health, engaging in activities that promote well-being rather than conforming to unrealistic beauty standards. Consider seeking professional support from mental health experts specializing in body image concerns. Incorporate mindfulness techniques like meditation or yoga into your routine to foster awareness of your body without judgment. Acknowledge and celebrate accomplishments of any size, recognizing your strengths and progress in building a positive self-image.

Dress comfortably and express yourself through clothing, positively impacting self-esteem. Emphasize internal qualities like kindness, intelligence, and resilience, recognizing their importance beyond physical appearance.

Remember, improving self-esteem is a gradual process, and it's acceptable to seek support from friends, family, or professionals. Consistent effort in adopting these strategies can contribute to a more positive and accepting self-image over time.

Conclusion

Therefore results of the current study revealed that parenting style have greater impact on body image dissatisfaction self-esteem quality of life and mental well-being, this study explored both positive and negative impact among variables. Parenting style have positive relationship with quality of life self-esteem and body image dissatisfaction and negative impact with mental well-being, however results shows parenting style have a greater impact on effeminates. Parenting style have greater influence in children overall life and wellbeing if the parents will show greater strictness towards children and punished them this will lead to negative effects of mental well-being, and if parents gave free psychological autonomy to children it will leads to body image dissatisfaction in children. So parents should adopt a balance approach so they can raise their child in a healthy way. These findings suggest that parenting style have negative consequences than positive consequences on body image which leads to body image dissatisfaction. Understanding the root causes of parenting style and body image dissatisfaction problem is crucial for implementing effective interventions. Recognizing the multifaceted nature of these challenges is crucial for educator, parents and mental health professionals. By fostering open communication, providing resources and offering a supportive network, we can create a conductive environment for children's to navigate the challenges successfully. Early identification and intervention are paramount, requiring a comprehensive understanding of the individual factors contributing to these behaviors. In conclusion, this study emphasize the significance of examining the connection between parenting style and body image dissatisfaction, mental well-being, quality of life self-esteem. Understanding these dynamics can help in the creation of treatments and support plans that are specifically designed to meet the requirements for children.

Limitation

- Time management was major hurdle while conducting this research project. Because this study had snow ball sampling technique that is time consuming.

- Due to limited data (N=150) this study was not being conducted to other areas of Pakistan so the results of research might not highly generalize able.

- Due to maximum number of items in questionnaire sample population might not fill it correctly.

- Social desire-ability might also be the factor.

- While collecting data traveling from one place to another place it was time consuming and resources consuming like money

Implications

This study was helpful for the researchers for future qualitative research that could be helpful in providing in-depth information that how body image is effected by parenting style. This study was also helpful for parents that their parenting style have some negative impacts on children behavior self-esteem and mental well-being parents should provide proper guidance and chance and balance on child activities in order to avoid such behavior. Parental strictness have negative impact on child mental well-being and parental over warmth and psychological autonomy granting will increase body image dissatisfaction in children , so parents should adopt a parenting style in which they balance all thighs. Different techniques and strategies are present through which parents can educate their child about gender and gender related duties to avoid body image dissatisfaction. Also these techniques and strategies are used in schools and educational institutions where teacher pay attention on child behavior and activities to

avoid such kind of inappropriate behavior by children's. This study also helpful in clinical settings for treatment of these issues.

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Appendix A

THE STEINBERG PARENTING STYLE SCALE

ITEMS	STRONGLY AGREE	AGREE	NEUTRAL	DISAGREE	STRONGLY DISAGREE
1. I set clear rules and expectations for my child.					
2. I give my child choices and allow him/her to make decisions.					
3. I encourage my child to express his/her opinions and thoughts.					
4. I provide my child with reasonable independence and autonomy.					
5. I am involved in my child's activities and daily life.					
6. I use rewards and punishments to modify my child's behavior.					
7. I listen attentively to my child whenever he/she wants to talk.					
8. I accept my child's individuality and respect his/her opinions.					
9. I establish a warm and loving relationship with my child.					

10. I try to understand my child's feelings and emotions.					
11. I communicate openly and honestly with my child.					
12. I set high standards for my child's academic performance.					
13. I encourage my child to take responsibility for his/her actions.					
14. I am consistent in enforcing discipline and consequences.					
15. I provide my child with guidance and support when needed.					
16. I promote my child's independence and self-reliance.					
17. I encourage my child to explore new opportunities and experiences.					
18. I allow my child to make mistakes and learn from them.					
19. I am authoritative, but also considerate of my child's feelings.					
20. I spend quality time with my child regularly.					

21. I provide my child with appropriate guidance and supervision.					64
22. I am flexible and adaptive in my parenting approach.					
23. I promote open communication and trust between me and my child.					
24. I provide my child with opportunities to develop life skills.					

Appendix B

The Body Image Dissatisfaction Scale for Males (BIDSM-26)

ITEMS	NOT AT ALL	RARELY	SOMETIMES	OFTEN	ALL THE TIME
1. Not having fair complexion					
2. Disliking the hair texture					
3. Not having the desired hair length					
4. Having less hair (on the head)					
5. Not having the desired face cut					
6. Disliking the shape/size of the eyes					
7. Disliking the shape/size of the nose					
8. Disliking the shape/size of the lips					
9. Having dark circles around the eyes					
10. Not having clear skin					
11. Having hair on the skin					
12. Not having desired shape/size of hands					
13. Not having desired shape/size of feets					
14. Being fat					
15. Not having a narrow					

waist				
16. Not having desired size of shoulders				
17. Having wide hips				
18. Having fat thighs				
19. Having a protruding stomach				
20. Not having the desired size of the arms				
21. Being skinny				
22. Not having a slim appearance				
23. Being short heighted				
24. Not being muscular				
25. Upper body (chest, arms) not muscular				
26. Body weight not in harmony to height				

Appendix C

The warwick-Edinburgh mental wellbeing scale

STATEMENTS	None of the time	Rarely	Some of the time	Often	All of the time
I've been feeling optimistic about the future	1	2	3	4	5
I've been feeling useful	1	2	3	4	5
I've been feeling relaxed	1	2	3	4	5
I've been feeling interested in other people	1	2	3	4	5
I've had energy to spare	1	2	3	4	5
I've been dealing with problems well	1	2	3	4	5
I've been thinking clearly	1	2	3	4	5
I've been feeling good about myself	1	2	3	4	5
I've been feeling close to other people	1	2	3	4	5
I've been feeling confident	1	2	3	4	5
I've been able to make up my own mind about things	1	2	3	4	5
I've been feeling loved	1	2	3	4	5
I've been interested in new things	1	2	3	4	5
I've been feeling cheerful	1	2	3	4	5

Appendix D

SELF-ESTEEM SCALE

1. On the whole, I am satisfied with myself.

Strongly Agree   Agree   Disagree   Strongly Disagree

2. At times I think I am no good at all.

Strongly Agree   Agree   Disagree   Strongly Disagree

3. I feel that I have a number of good qualities.

Strongly Agree   Agree   Disagree   Strongly Disagree

4. I am able to do things as well as most other people.

Strongly Agree   Agree   Disagree   Strongly Disagree

5. I feel I do not have much to be proud of.

Strongly Agree   Agree   Disagree   Strongly Disagree

6. I certainly feel useless at times.

Strongly Agree   Agree   Disagree   Strongly Disagree

7. I feel that I'm a person of worth, at least on an equal plane with others.

Strongly Agree   Agree   Disagree   Strongly Disagree

8. I wish I could have more respect for myself.

Strongly Agree   Agree   Disagree   Strongly Disagree

9. All in all, I am inclined to feel that I am a failure.

Strongly Agree   Agree   Disagree   Strongly Disagree

10. I take a positive attitude toward myself.

Strongly Agree   Agree   Disagree   Strongly Disagree

Appendix E

WHO Quality of Life Scale-Brief

	Very poor	Poor	Neither poor nor good	Good	Very Good
How would you rate your quality of life?					
	Very dissatisfied	Dissatisfied	Neither satisfied nor dissatisfied	Satisfied	Very satisfied
How satisfied are you with your health?					
	Not at all	A little	A moderate amount	Very much	An extreme amount
To what extent do you feel that physical pain prevents you from doing what you need to do?					
How much do you need any medical treatment to function in your life?					
How much do you enjoy life?					
To what extent do you feel your life to be meaningful?					
How well are you able to concentrate?					

	Not at all	Slightly	A moderate amount	Very much	Extremely
How safe do you feel in your daily life?					
How healthy is your physical environment?					
	Not at all	A little	Moderately	Mostly	Completely
Do you have enough energy for everyday life?					
Are you able to accept your bodily appearance?					
Have you enough money to meet your needs?					
How available to you is the information that you need in your day-to-day life?					
To what extent do you have the opportunity for leisure activities?					
How well are you able to get around?					
How satisfied are you with your sleep?					
	Very poor	poor	Neither poor nor well	Well	Very well

How satisfied are you with your ability to perform your daily living activities.					
	Very dissatisfied	Dissatisfied	Neither satisfied nor dissatisfied	Satisfied	Very satisfied
How satisfied are you with your capacity for work?					
How satisfied are you with yourself?					
How satisfied are you with your personal relationships?					
How satisfied are you with your sex life?					
How satisfied are you with the support you get from your friends?					
How satisfied are you with the conditions of your living place?					
How satisfied are you with your access to health services?					
How satisfied are you with your mode of transportation?					
	Never	Seldom	Quite often	Very often	Always

How often do you have negative feelings, such as blue mood, despair, anxiety, depression?					

APPENDIX F

Informed consent

I understand that this study is being conducted by the student of Department of Psychology, Capital University of Science and Technology Islamabad as a part of research. I hereby confirm my participation in the project to be voluntary. I know that researcher will not disclose my name or any demographic information in the reports after seeking results from the research as well as that my confidential will be maintain as a participant. I have a right to withdraw and discontinue my participation anytime whenever i require it to be without any penalties.

Date _____

Signature _____

Demographic

1. **Your age? _____**
2. **No. of siblings? _____**
3. **Your number in siblings? _____**
4. **Do you have sister?**   **YES**   **NO**
5. **No of friends? _____**
6. **Is your both parents are alive?**   **Yes**   **No**
7. **With whom you are moth attached?**   **Mother**   **father**
8. **You're Job?**   **Employed**
   Unemployed