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Predicting Quality of Life Based on Parenting Style, Parental Conflict, and Emotional Alexithymia Among Students in Isfahan

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Abstract

Purpose: This study aimed to predict quality of life based on parenting style, parental conflict, and emotional alexithymia among students in Isfahan.
Method: According to the research topic, the type of research was applied and according to the process, it was a descriptive correlational research with a predictive method. The statistical population of the research consisted of all first-year high school students living in Isfahan in the academic year 2022-2023. The sampling method was available, in that 200 students who were willing to participate in the research were selected as the statistical sample group online after completing the World Health Organization Quality of Life (1996), Toronto Emotional Aphasia (1994), Zaker Marital Conflicts (2008), and Baumrind Parenting Styles (1971) questionnaires.
Findings: The results obtained by multivariate regression showed that the best predictor of quality of life in the first step is alexithymia, in the second step is parental conflict, and in the third step is parenting styles. Accordingly, in the first step, alexithymia explained 22% of the variance in quality of life, in the second step, alexithymia and parental conflict explained 28% of the variance in quality of life, and in the third step, alexithymia, parental conflict, and parenting styles explained 33% of the variance in quality of life ($P<0.001$).
Conclusion: The results showed that the quality of life of high school students in Isfahan is predictable with emotional alexithymia, parenting styles, and marital conflicts.

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Introduction

Students are a dynamic group and the scientific infrastructure of society. Accordingly, the issue of quality of life in this group is an important and serious issue, because a decrease in the quality of life causes numerous problems during the students' puberty period and many abnormalities, especially in their morale (1). Therefore, the desire to improve the quality of life has been of interest in various fields, including sociology, psychology, economics, medicine, etc. Quality of life has become one of the topics of interest in social sciences since the 1960s, because in this decade it became clear that economic growth and development do not necessarily lead to an improvement in the quality of life of the country's people (2). Campbell and colleagues considered quality of life to be satisfaction with life in specific areas. They considered the areas of work, housing, health, friendship, marriage, family life, level of education, and savings as components of quality of life. The term quality of life has various meanings for different individuals and groups. Some have interpreted it as the livability of an area, others as a measure of attractiveness, and still others as general well-being, well-being, social, etc. However, there is still no universally accepted definition for this concept (3).

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One of the variables that is prominent in students and plays a role in their quality of life is the inability to express emotions. Emotional alexithymia is a personality construct characterized by a lack of imagination, a low capacity for symbolic thought, and an inability to experience and express emotions. Emotional alexithymia refers to a condition in which a person has difficulty understanding, processing, and expressing their emotions. Studies by Shot, Castongay, and Bur Quos (2001) showed that emotional dysregulation is associated with many disorders such as anxiety disorders, fatigue, and quality of life (4). Research evidence from Rossi (2004) suggests that emotional dysfunction is caused by childhood events. Montaubar et al. (2004) showed in a study that emotional dysfunction is positively correlated with lack of intimacy and closeness with others and difficulties in interpersonal relationships. In fact, individuals with alexithymia display patterns of interpersonal interactions that include distancing and withdrawal; in particular, alexithymia is associated with coldness and distance in interpersonal relationships and inhibition of social emotion in social interactions, which indicates the impact of alexithymia on reducing quality of life (5).

One of the most important variables in the quality of life of students is the level of parental conflict. Parents' involvement in marital conflicts reduces their ability and attention to communicate and their effectiveness in providing emotional and social support to their children. Emotional unavailability, lack of parental cooperation in parenting roles, and reduced communication are among the outcomes of parental conflict that affect children's functioning. Although parental conflict encompasses a wide range, it generally refers to those signs of verbal aggression, physical violence, and threats of abandonment that are stressful for couples and their children (6).

Another variable affecting the quality of life of students is parenting styles. According to Baumrind (1991), parenting refers to specific methods and behaviors that, separately or in interaction with each other, affect the development of the child. Baumrind's theory defines three basic parenting styles: authoritarian, authoritative, and permissive (7).

Parents with an authoritarian style are less affectionate towards their children and also exercise a great deal of control over their children. These parents are often irritable, inflexible, pushy, violent, and inattentive to the children's needs. Authoritarian parents are very affectionate and controlling towards their children. In fact, these parents value both autonomous and disciplined behavior. They encourage verbal communication and give reasons when they use their authority as parents to prohibit or expect something from the child (8). Permissive parenting styles use less control and more affection towards their children. In these families, the level of self-esteem of family members is low and family member relationships are chaotic (9).

So far, many studies have been conducted to investigate the relationship between different parenting styles and different aspects of people's lives, and most of these studies have shown that authoritative parenting style has more positive consequences compared to other parenting styles (10). The findings of the study by Hoban and Hoban (2004) showed that authoritarian parenting style can help increase responsibility, build friendly relationships, and motivate children to achieve their goals. Therefore, familiarizing parents with effective parenting methods and applying them in raising their children can prevent behavioral and academic problems and improve parental peace of mind (11). It is clear that our youth, under the guidance and upbringing of their families, can be constructive and, as a result, leaders of society's future, and this constructiveness and leadership requires their responsibility. Accordingly, the lack of research and information gap in this field has led us to seek to answer the question of whether quality of life can be predicted based on parenting style, parental conflict, and emotional alexithymia among students in Isfahan.

Nejad Hoseinian, Bakhtiarpour, and Zanganeh (2023) conducted a study titled Predicting Quality of Life Based on Maternal-Fetal Attachment Mediated by Pregnancy Anxiety in Pregnant Women. The results showed that maternal-fetal attachment and pregnancy anxiety have a significant relationship with quality of life ($p<0.01$). Also, maternal attachment to the fetus and pregnancy anxiety have a significant direct effect on quality of life ($p<0.01$). In addition, bootstrap results showed that pregnancy anxiety has a significant mediating role in the relationship between maternal attachment to the fetus and quality of life of pregnant women ($p<0.01$) (12).

Mansouri Jalilian, Momeni, and Karami (2022) conducted a study titled The Relationship between Quality of Life and Positive and Negative Dimensions of Self-Compassion Mediated by Psychological Empowerment in Female Heads of Households. The results showed that the variables of positive dimensions of self-compassion and psychological empowerment have a direct and positive effect on quality of life. Also, negative dimensions of self-compassion have a negative and direct effect on quality of life. And positive dimensions of self-compassion have an indirect and positive effect on quality of life through changing psychological empowerment. Also, negative dimensions of self-compassion do not have an indirect and positive effect on quality of life through changing psychological empowerment (13).

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Martinez et al. (2020) in their study titled Parenting Styles, Internalization of Values, and Self-Esteem: A Cross-Cultural Study in Spain, Portugal, and Brazil. The results of the immediate research on parental socialization confirm: The use of parental affection as a basis for adult self-esteem and the internalization of social values is evident in the three countries studied. Destructive and authoritarian parenting (both characterized by parental affection) are associated with the highest internalization values in the three countries. Furthermore, practicing parenting (using affection) is associated with the highest adolescent self-esteem, outperforming authoritative parenting (using affection and strictness). The influence of parents on adolescent self-esteem and value internalization is maintained independent of differences in self-esteem and value preferences observed across cultural backgrounds, gender, and age of participants (14).

The Method of Research

This research is applied and the research process is descriptive, correlational, predictive. The statistical population of the research included all first-year high school students in Isfahan in the 2022-2023 academic year. The sample size, according to the research method, which is a correlational type based on the research method sources (15), is at least 200 people, who were selected from among the first high school students in Isfahan city. The data collection tools in this study are:

- Quality of Life Questionnaire: The World Health Organization Quality of Life Questionnaire is a 26-question questionnaire that measures an individual's overall quality of life. This scale was developed in 1996 by a group of World Health Organization experts by modifying the items of the 100-question form of this questionnaire. This questionnaire has 4 subscales and a total score. A higher score indicates a higher quality of life. In Iran, Nasiri et al. (2006) translated this scale into Persian and reported its validity and reliability. Cronbach's alpha coefficient of 0.84 indicates its favorable internal consistency (16).
- Toronto Emotional Alexithymia Questionnaire: The initial form of the Alexithymia Scale was 26 questions, which was developed in 1985 by Taylor, Ryan, and Bagby, and revised in 1994 by Bagby et al. and converted into a 20-question form. Bagby et al. (1994) found that in their validation study, the 20-TAS had three structural factors that were consistent with the construct of emotional alexithymia. The Toronto Alexithymia Scale has 20 questions and is scored on a five-point Likert scale (from 1 for “strongly disagree” to 5 for “strongly agree”). In this scale, by summing the scores of 20 questions, an overall score for the emotional alexithymia scale is obtained. Questions 4, 10, 18, and 19 are scored in reverse order. The minimum and maximum scores for this scale are 20 and 100, respectively. Afshari (2008) used this scale in a study on a sample of 80 students (40 girls and 40 boys) and reported its reliability using Cronbach's alpha method for the total scale score of 0.75, difficulty in recognizing emotions 0.72, difficulty in describing emotions 0.73, and extraverted thinking 0.53 (17).
- Baumrind Parenting Styles Questionnaire: This questionnaire consists of 30 items, 10 of which relate to the absolute permissive style, 10 to the authoritarian style, and 10 to the democratic style of parenting in raising children. To answer this questionnaire, one of the parents, by studying each item, determines his/her opinion on a 5-point Likert scale, which is then scored from 0 to 4, and by adding up the scores, three separate scores are obtained for absolute freedom, authoritarianism, and democracy. The validity and reliability of the Bamrind Parenting Styles Questionnaire have been conducted. Ten experts in psychology and psychiatry confirmed its Syrian validity. Esfandiari (1995) also reported the validity of this test according to the experts' opinions and mentioned that it has high validity (18).
- Marital Conflict Questionnaire (MCQ): Sanaei Zaker and Barati (2008) developed this questionnaire with the aim of measuring the seven main dimensions of marital conflicts. This questionnaire is a tool that is completed by parents. The questionnaire consists of 42 questions and is based on the clinical experiences of the research supervisor. This instrument measures seven aspects or dimensions of marital conflict (19). In his research to standardize the marital conflict questionnaire, Dehghan conducted a study on a group of 30 people and obtained a Cronbach's alpha of 0.71 for the entire questionnaire and for its seven components, respectively: decreased cooperation 0.73, decreased sexual relationship 0.60, increased emotional reactions 0.74, increased seeking of child support 0.81, increased personal relationship with one's relatives 0.65, decreased family relationship with spouse's relatives and friends 0.81, and separating financial matters 0.69. In his research, Barati used Cronbach's alpha method to test the reliability of the marital conflict questionnaire, which yielded scores of 0.53 for the entire questionnaire.

In this study, the questionnaire link was first prepared online and then sent to available junior high school students (by the school principal or teacher). All students were given an explanation of ethical considerations and explanations related to conducting the research work. The World Health Organization Quality of Life Questionnaire and Toronto Emotional Aphasia Questionnaire were completed by the student himself, and the Baumrind Parenting Styles

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Questionnaire and Sanaei Marital Conflict Questionnaire were completed by the student's parents.

Research data analysis was performed using SPSS version 24 statistical software at two levels: descriptive and inferential. At the inferential level, stepwise regression and correlation analysis were used to test hypotheses.

Findings

The hypotheses were tested using a stepwise regression test. The significance level in all tests was set at 0.05. First, a preliminary study was conducted to ensure that the assumptions of normality, linearity, and uniform distribution were not violated. The results of this study showed that these assumptions were not violated. To examine the hypotheses, first the parametric statistical assumption, i.e. the normality of the data, was tested at a significance level of 0.05.

Table 1. Kolmogorov-Smirnov test to check the normality of the data

Variable	Statistics	Degree of freedom	Significance
Quality of life	0.83	200	0.20
Emotional alexithymia	0.45	200	0.14
Marital conflicts	0.69	200	0.07
Rational parenting styles	0.10	200	0.36
Authoritarian parenting style	0.19	200	0.20
Permissive parenting style	0.16	200	0.16

Based on the results obtained from the Kolmogorov-Smirnov test in Table 1, the significance level for all variables is greater than 0.05. As a result, it can be said that the distribution of the variables is normal. Therefore, parametric tests such as regression can be used.

Main hypothesis: Quality of life can be predicted based on parenting style, parental conflict, and alexithymia among students in Isfahan.

To test this hypothesis, stepwise regression analysis was used with the presence of parenting style, parental conflict, and alexithymia variables to predict the quality of life of students in Isfahan.

Table 2. Results of multiple regression analysis to predict the quality of life score of students in Isfahan city

Model	Predictor variable	Correlation coefficient	Coefficient of determination	Adjusted coefficient of determination	F	Significance level
1	Emotional alexithymia	0 . 346	0 . 223	0 . 22	7 . 829	0 . 001
2	Emotional alexithymia and Parental Conflict	0 . 425	0 . 297	0 . 28	8 . 260	0 . 001
3	Emotional alexithymia and Parental Conflict and Parenting Styles	0 . 502	0 . 355	0 . 33	9 . 964	0 . 006

The findings in Table 2 show that among the variables studied in the regression, the best predictor of quality of life in the first step was alexithymia, in the second step was alexithymia and parental conflict, and in the third step was alexithymia and parental conflict, and parenting styles were significant with the quality of life of students in Isfahan. Accordingly, in the first step, alexithymia explains 22% of the variance in quality of life, in the second step, alexithymia and parental conflict explain 28% of the variance in quality of life, and in the third step, alexithymia and parental conflict and parenting styles explain 33% of the variance in quality of life. The observed F was significant at the P<0.001 level. Therefore, the regression can be generalized to the statistical population.

The findings in Table 3 indicate that the beta coefficient decreases the quality of life by 0.216 units for a one-unit increase in alexithymia, decreases the quality of life by 0.076 units for a one-unit increase in parental conflict, and increases the quality of life by 0.049 units for a one-unit increase in parenting style.

Sub-hypothesis 1: Quality of life can be predicted based on parenting styles among students in Isfahan.

To test this hypothesis, stepwise regression analysis was used with the parenting styles variable to predict the quality of life of students in Isfahan.

The findings in Table 4 show that authoritative parenting style was a significant predictor of students' quality of life, explaining 4% of the variance in quality of life. Permissive parenting style also explains 3% of the variance in quality of life. The observed F was significant at the P<0.001 level. Therefore, the regression can be generalized to the statistical population.

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Table 3. Beta coefficients and T-test significance for the predictor variable

Step	Variable	Unstandardized beta coefficients		Beta coefficients	T	Significance level
		B	Standard error			
1	Emotional alexithymia	-0 . 232	0 . 047	-0 . 216	2 . 798	0 . 001
2	Emotional alexithymia Parental conflict	-0 . 223	0 . 047	-0 . 204	2 . 980	0 . 003
		-0 . 158	0 . 054	-0 . 076	2 . 909	0 . 004
3	Emotional alexithymia and Parental conflict and Parenting styles	-0 . 195	0 . 038	-0 . 196	2 . 549	0 . 001
		0- . 174	0 . 055	-0 . 075	2 . 876	0 . 002
		0 . 145	0 . 049	0 . 049	0 . 625	0 . 001

Table 4. Results of multiple regression analysis to predict students' quality of life scores based on parenting styles

Model	Predictor variable	Correlation coefficient	Coefficient of determination	Adjusted coefficient of determination	F	Significance level
1	Authoritarian Parenting Style	0 . 204	0 . 038	0 . 04	3 . 827	0 . 009
2	Permissive Parenting Style	0 . 183	0 . 029	0 . 03	3 . 835	0 . 012

Table 5. Beta coefficients and T-significance test for the predictor variable

Step	Variable	Unstandardized beta coefficients		Beta coefficients	T	Significance level
		B	Standard error			
1	Authoritarian Parenting Style	0 . 049	0 . 047	0 . 04	1 . 196	0 . 009
2	Permissive Parenting Style	0 . 036	0 . 035	0 . 03	2 . 204	0 . 016

The findings in Table 5 indicate that the beta coefficient increases the quality of life by 4 percent for a one-unit increase in authoritative parenting style, and by 3 percent for a one-unit increase in permissive parenting style.

Second Sub-Hypothesis: Quality of life can be predicted based on parental conflict among students in Isfahan.

To test this hypothesis, stepwise regression analysis with the presence of the alexithymia variable was used to predict the quality of life of students in Isfahan.

Table 6. Results of multiple regression analysis to predict students' quality of life scores based on parental conflict.

Model	Predictor variable	Correlation coefficient	Coefficient of determination	Adjusted coefficient of determination	F	Significance level
1	Parental conflict	0. 199	0. 078	0. 08	4.318	0. 199

Table 7. Beta coefficients and T-test significance for the predictor variable

Step	Variable	Unstandardized beta coefficients		Beta coefficients	T	Significance level
		B	Standard error			
1	Parental conflict	-0 . 108	0 . 054	-0 . 073	2. 909	0. 004

The findings in Table 6 show that parental conflict was a significant predictor of students' quality of life. Parental conflict explained 8% of the variance in quality of life. The observed F was significant at the P<0.001 level. Therefore, the regression can be generalized to the statistical population.

The findings in Table 7 indicate that the beta coefficient decreases quality of life by -0.073 units for every one-unit increase in parental conflict.

Third Sub-Hypothesis: Quality of life can be predicted based on emotional alexithymia among students in Isfahan.

To test this hypothesis, stepwise regression analysis was used with the presence of the emotional alexithymia variable to predict the quality of life of students in Isfahan.

The findings in Table 8 show that alexithymia was a significant predictor of students' quality of life. Alexithymia explained 23% of the variance in quality of life. The observed F was significant at the P<0.001 level. Therefore, the regression can be generalized to the statistical population.

The findings in Table 9 indicate that the beta coefficient decreases quality of life by 23.0 units for every one-unit increase in alexithymia.

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Table 8. Results of multiple regression analysis to predict students' quality of life scores based on emotional alexithymia

Model	Predictor variable	Correlation coefficient	Coefficient of determination	Adjusted coefficient of determination	F	Significance level
1	Emotional alexithymia	0. 234	0. 038	0. 23	3. 835	0 . 009

Table 9. Beta coefficients and T-test significance for the predictor variable

Step	Variable	Unstandardized beta coefficients		Beta coefficients	T	Significance level
		B	Standard error			
1	Emotional alexithymia	-0 . 242	0 . 047	-0 . 231	2 . 798	0 . 001

Discussion

The present study aimed to predict quality of life based on parenting style, parental conflict, and emotional alexithymia among students in Isfahan. The results of testing the research hypotheses are presented as follows:

Main hypothesis: Quality of life can be predicted based on parenting style, parental conflict, and emotional alexithymia among students in Isfahan (confirmed).

The findings show that among the variables studied in the regression, the best predictor of quality of life in the first step was emotional alexithymia, in the second step was emotional alexithymia and parental conflict, and in the third step was emotional alexithymia and parental conflict, and parenting styles were significant with the quality of life of students in Isfahan. Accordingly, in the first step, alexithymia explains 22% of the variance in quality of life, in the second step, alexithymia and parental conflict explain 28% of the variance in quality of life, and in the third step, alexithymia and parental conflict and parenting styles explain 33% of the variance in quality of life. The observed F was significant at the P<0.001 level. Therefore, the regression can be generalized to the statistical population. Also, the results indicate that the beta coefficient decreases the quality of life by 0.216 units for a one-unit increase in emotional alexithymia, decreases the quality of life by 0.076 units for a one-unit increase in parental conflict, and increases the quality of life by 0.049 units for a one-unit increase in parenting style. These findings were consistent with the results of studies (20) and (14).

Sub-hypothesis 1: Quality of life can be predicted based on parenting styles among students in Isfahan (confirmed).

The findings show that authoritative parenting style was a significant predictor of students' quality of life, explaining 4% of the variance in quality of life. Permissive parenting style also explained 3% of the variance in quality of life. The observed F was significant at the P<0.001 level. Therefore, the regression can be generalized to the statistical population. The results also indicate that the beta coefficient increases the quality of life by 4 percent for a one-unit increase in authoritative parenting style and by 3 percent for a one-unit increase in permissive parenting style. These findings were consistent with the results of studies (11) and (21).

Second Sub-Hypothesis: Quality of life can be predicted based on parental conflict among students in Isfahan. The findings show that parental conflict was a significant predictor of students' quality of life. Parental conflict explains 8% of the variance in quality of life. The observed F was significant at the P<0.001 level. Therefore, the regression can be generalized to the statistical population. The results also indicate that the beta coefficient decreases the quality of life by 0.073 units for every one unit increase in parental conflict. These findings were consistent with the results of studies (6) and (21).

Third Sub-Hypothesis: Quality of life can be predicted based on emotional alexithymia among students in Isfahan.

The findings show that emotional alexithymia was a significant predictor of students' quality of life. Emotional alexithymia explains 23% of the variance in quality of life. The observed F was significant at the P<0.001 level. Therefore, the regression can be generalized to the statistical population. The results also indicate that the beta coefficient decreases the quality of life by 0.23 units for every one unit increase in emotional alexithymia. These findings were consistent with the results of studies (5) and (21).

Conclusion

According to the theory of the Health Organization, quality of life has four dimensions, including the physical dimension, the psychological dimension, the environmental dimension, and the social relationship dimension. These dimensions are among the basic needs in Maslow's classification of needs. Academic achievement and academic satisfaction, as well as self-esteem, which is an example of self-fulfillment, occur when an individual's basic needs are met, meaning that the individual enjoys a desirable quality of life. Therefore, this is evidence of the confirmation of the

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hypothesis of this research (22). Quality of life refers to individuals' perception of their situation in life according to their cultural context and value system in relation to their desired goals, expectations, standards, and interests. Quality of life is considered a multidimensional construct based on various available evidence. Various researchers have examined the relationship between individual characteristics and quality of life such as good life, development of values, temperament, stress control, worry, and monotony.

Authoritative parenting style in childhood makes the child lively, cheerful, and has high self-esteem and self-control. It also makes the adolescent enjoy a high level of courage, social and moral maturity, academic progress, and educational success in adolescence. Children and adolescents whose parents are authoritative evaluate themselves and have more social and instrumental functioning compared to children and adolescents whose parents are not authoritative. Permissive parenting style in childhood causes the child to be impulsive, disobedient, rebellious, unpredictable and dependent. It shows less persistence towards homework and in adolescence causes the adolescent to be self-reliant and show poor performance in school (9).

In structural theory, Minuchin believes that a family becomes dysfunctional when its rules are not enforced. When boundaries become too rigid or permeable, the functioning of the family as a system is disrupted. If the family hierarchy is not respected, meaning that parents are not the primary decision-makers and older children are not given more responsibility than younger children, chaos and problems arise. In a dysfunctional family, power is not clear and explicit. Marital conflicts play an important role in the development and socialization of children. Parental conflicts lead to feelings of emotional and physical insecurity, hatred, anger towards parents, abnormal social behaviors, and emotional alexithymia (6).

The most prominent feature of patients with alexithymia is difficulty in identifying and using emotions. People with alexithymia have many disabilities in emotions. They are unable to identify exactly what they are feeling or why they are feeling a certain way because they are unable to make the connection between their emotional states and the specific situations or expectations that have caused these feelings. People with alexithymia are more vulnerable to mental illness; people with alexithymia also show more physical symptoms. Alexithymia is also associated with self-harming behaviors (5).

One of the limitations of the research was that the statistical population of the research was limited to junior high school students in Isfahan, which requires consideration for its generalization to other educational levels and geographical areas. Therefore, it is suggested that it be conducted in larger samples and its results compared with this research. Also, in order to know the quality of the independent variables, it is recommended that more research be conducted on the factors that cause them so that these variables can be judged more specifically and applied.

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The author contributed to the data analysis. Drafting, revising and approving the article, responsible for all aspects of this work.

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The research data and literature have not been copied from any worksauthor upon reasonable request.

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