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Relationship between Perceived Paternal Care and Depressive Symptoms among Adolescent Boys in Kiambu County



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Abstract

Purpose: Perceived paternal care is attributed to the development of depression among adolescents. Depression is characterized by moodiness, low interest in activities, acting out and aggressiveness. This study examined the relationship between perceived paternal care and development of depression among adolescent boys in selected secondary schools in Kiambu County, Kenya. In Kenya, few studies have been done to examine how paternal care predicts the development of depression among adolescent boy in Kenya. Many studies have examined how parenting styles contribute to depression in the context of both parents, that is, the mother and father. Few studies seem to focus on assessing how paternal care predicts the development of depression among boys in Kenya.

Methodology: Spearman Rank Correlation was used to test the relationship between paternal care and development of depression. Stratified random sampling was used to select four boy's schools. Purposive sampling was then used to select 87 boys who had fathers. Perceived parental care was assessed using the paternal nurturance scale. Depression scale was assessed using the Center Epidemiological Studies Depression Scale for Children (CES-DC).

Results: The study findings revealed that there is a negative correlation of ($r = -.239$) between perceived paternal care and depression among adolescent boys.

Contribution: The findings of the study will help mental health practitioners to develop interventions that incorporate parents in addressing the psychological needs of adolescents.

Key words: *Paternal care, Depression, Adolescent*

Introduction

Perceived parental care is defined as the emotional experience of caring, acceptance, affirmation, and concern or simply love of the father to adolescents. The father-son relationship may be the single most important male-male relationship in a man's life cycle (Rohner, 2007; Floyd, 2006).

Fathers play a fundamental role in child development and this includes adolescents. Indeed, they have a lasting impact on their children's social, emotional and intellectual development. Individuals' attitudes and perceptions consist of thoughts, emotions and intentional acts, therefore, adolescents' behaviors are guided by how they perceive their parents, whether father or mother (Charity 2003; Smith 1996).

Garcia, Manongdo and Ozechowski (2014) in their study determined the relationship between paternal acceptance and depression found out that paternal acceptance was significantly related to depressive symptoms. When education and marital status were included, the links between youth depression and parenting variables were established to have a correlation.

Father's love is specifically associated with specific aspects of offspring's development and adjustment. Both father and mother's involvements were related to offspring's happiness but father's involvement proved to be a significant contributor to the well being of adolescents. Additionally father's involvement has no discriminatory impacts on sons and daughters (Flouri & Buchanan, 2003).

Parents are the most influential persons in life. Their impact is both intense and enduring. Moreover, strategies that parents use to guide and discipline their children affect their social and emotional development. Parent's lack of care and affection for their adolescent children increases the possibility of adolescent's depression (Restifo, Akse, Guzman, Benjamin & Dicks 2009).

National Institute for Health and Clinical Excellence (NICE), (2009) define depression as a wide range of mental health problems characterized by the absence of a positive feeling (a loss of interest and enjoyment in ordinary activities and experiences), constant low mood and a variety of associated emotional, cognitive, physical and behavioural symptoms.

According to Abege (2014), depression is on the rise among adolescents and an issue of concern that needs to be addressed urgently. This is because it impacts every aspect of an adolescent's life and can lead to suicide. Depression can be destructive to the personality of an adolescent causing a sense of unhappiness, misery or anger. More often than not, many adolescents rely on parents, teachers, or caregivers to recognize their distress. Depressive symptoms among adolescents are seen as normal behaviour or moodiness. Moreover, adolescents use other means of expressing their distress such as acting out which is always misinterpreted as indiscipline. This is because adolescents experience challenges in expressing depressive symptoms.

Depression in Kenya has been observed to be on the increase among adolescents in schools. According to Khasakhala, Ndeti, Mutiso, Mbwayo and Mathai (2012), depressive symptoms were found to be as high as 43.7% among adolescents in high schools in Kenya implying that the incidences of depression among adolescents are on the rise. The findings of the study also revealed that adolescents who perceived their fathers as being less caring were associated with depressive symptoms. The study concluded that there was a strong correlation between perceived paternal acceptance and depression among adolescents. Lastly, perceived paternal acceptance was a protective factor against depression.

Many factors influence adolescents' depression. Such factors include academic work, which is associated with pressure to perform in school; stress, which can emanate from the home environment due to conflicts between parents; anxiety emanating from the many bodily changes, self-esteem, which is a vulnerability factor of depression and parental care, which can be characterized by rejection, aggression, low support and hostility from attachment figures (Rohner, 2007).

Method

Stratified random sampling was used to select four boy's schools. Purposive sampling was then used to select 87 boys who had fathers. Adolescent boys ranged from 16-18 years. Of the adolescents 52.9 % (n= 46) were in form 3 while 47.1 % (n=41) were in form 4. Questionnaires were completed by the adolescent boys only.

Measures Paternal Nurturance Scale (PNS)

The Paternal Nurturance Scale (PNS) used in this study was developed by Buri, in 1989 from the United States of America. PNS is a 24-item measure on paternal nurturance from the point of view of a child of any age. It is represented as expression of warmth, care, love, affirmation, and support to the child. PNS assessed nurturance, as perceived by adolescents, in line with the researcher's topic on paternal care.

Depression Scale (CES-DC)

The researcher also assessed the presence of depression by using the Center Epidemiological Studies Depression Scale for Children (CES-DC), developed by Weissman (1980). The scale is a 20-item scale that measures depression among children and adolescents. In this study, the researcher included two additional items to assess levels of irritability and aggression making the total number of questions on the scale 22. In this scale, participants were given a list of feelings and behaviours and asked to indicate how often they experienced these feelings and behaviours in the past week.

Data Analysis

The researcher used descriptive and inferential statistics to analyze the data collected. Descriptive statistics was used to measure mean, mode, median and standard deviation of paternal care and depression. Pearson's correlation coefficient was used to assess the relationship between paternal care and depression. All these analyses were done using the Statistical Package for Social Sciences (SPSS).

Findings Perceived paternal care and depression

The table below highlights descriptive statistics of paternal care. The mean score of perceived paternal care was 3.74 while the median was 3.91 indicating that the respondents perceived their fathers to have high levels of care.

Table 1: Descriptive Statistics of Perceived Paternal Care

Statistics

Values

N	87
Mean	3.7496
Median	3.9130
Mode	3.61
Range	3.26
Std. deviation	.73779

The table below explains the general levels of perceived paternal care. Paternal care was categorized into high and low levels. The mean of all questions was calculated and a scale of (15) developed. The scale categorized paternal care into two levels, 1-3 as low levels of paternal care and 3-5 as high levels of paternal care. The study revealed that 17.3% of the respondents perceived their fathers as those with low levels of care while 82.7% perceived their fathers as those with high levels of care.

Perceived paternal care levels Table 2: Perceived Paternal Care Levels

Categories	Frequency	Percentage
Low	15	17.3%
High	72	82.7%
Total	87	100%

Descriptive Statistics of Depression

The mean score for depression was seen to be 2.33 while the median was 2.36 indicating that majority of the students had low depressive symptoms.

Table 3: Descriptive Statistics of Depression

Statistics	Values
N	87
Mean	2.3339
Median	2.3636
Mode	2.36
Range	2.09
Std. deviation	.45119

The researcher developed a scale to determine the depression levels of the students. The scale was 1.0-2.4 for low levels of depression while 2.5-4.0 was for high levels of depression. The findings revealed that 65.5% of the respondents had low depression levels while 34.5% of the respondents exhibited high levels of depression.

Depression levels Table 4: Depression Symptoms

Categories	Frequency	Percentage
Low	57	65.5%
High	30	34.5% Total
87	100%	

Relationship between Paternal Care and Depressive Symptoms

The study aimed to determine the relationship between paternal care and depressive symptoms. Spearman's correlation coefficient was used to make this determination. A negative correlation was found, that is, $r = -0.239$, $p\text{-value} < 0.05$, indicating a significant relationship between paternal care and depression among adolescent boys. This means that when paternal care goes up, depressive levels automatically decrease. The study revealed that adolescents who had low levels of paternal care had depressive symptoms.

The table below gives details of the correlation between perceived paternal care and depressive symptoms among adolescent boys in Kiambu County.

Correlation between perceived paternal care and depressive symptoms Table 6: Perceived paternal care and depressive symptoms

		Paternal Care	Depression
Paternal care	Pearson Correlation	1	-.239*
	Sig.(2-tailed)		.026
	N	87	87
Depression	Pearson Correlation	-.239*	1
	Sig. (2-tailed)	.026	
	N	87	87

*. Correlation is significant at the 0.05 level (2-tailed).

Discussions

There is a significant negative relationship between paternal care and depression. This results are similar to the results reported by Ndeti, Khasakala, Mathai and Harder (2013) who conducted a study on major depressive disorder in a Kenyan youth sample to investigate the relationship between parenting behaviour and parental psychiatric disorders. Many youths aged 16-18years had major depressive disorder, which was attributed to rejecting paternal behaviours. Rejecting paternal behaviour may play a role in the development of major depressive disorders among adolescents.

It would be great to examine the indicators of love displayed by paternal figures towards the adolescent boys. This is because adolescents in this study perceived love from their parents as providence and not emotional attachment, care, affection or support.

- i. Fathers need to understand how their behaviours affect the development of depression among adolescent boys through participating in trainings.
- ii. Counselors should organize seminars with fathers and adolescents to discuss how their behaviours influence the development of depressive symptoms among adolescent boys.

- iii. Counselors should use these standardized tools among adolescents they should be contextualized to fit the Kenyan context.

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