

A Review of the Impact of Parenting Styles on Depressive Emotions in Adolescents

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Abstract. This review examines the mechanisms through which parenting styles influence depressive emotions in adolescents within the context of contemporary changes in Chinese family structures, and proposes corresponding intervention strategies. Grounded in attachment theory and family systems theory, the paper systematically outlines the core characteristics of authoritative, authoritarian, permissive, and neglectful parenting styles. It further explores the underlying mechanisms through multiple pathways including emotional regulation, cognitive schemas, and neuroendocrine responses. The study indicates that authoritative parenting serves as a protective factor against depressive emotions, while non-authoritative parenting styles significantly increase the risk of depression among adolescents. Based on these findings, intervention strategies are proposed in two main directions: parental training in nurturing skills and restoration of family system functioning. These aim to improve the quality of parent-child interaction and enhance adolescents' emotional adaptability. This research provides a theoretical basis for understanding the psychological pathways underlying the weakening of family emotional function and offers practical references for family-based psychological interventions.

Keywords: Depression, Parenting styles, Adolescents, Chinese family structures

1. Introduction

Contemporary Chinese family structures are undergoing profound changes, with a growing number of dual-career households in urban areas. Busy work schedules have significantly reduced the time parents spend interacting with their children. According to a Tsinghua University study, fathers spend an average of only 37 minutes per day in effective companionship with their children, and 72% of working parents spend less than 90 minutes per day with their children. Nearly half of these interactions are interrupted by mobile phone use, making it difficult to meet adolescents' emotional needs. The traditional model of a "strict father and kind mother" often influences fathers to be absent [1]. Data from 2023 show that 61.7% of fathers spend no more than four hours with their children on workdays. At the same time, influenced by individualistic culture, contemporary adolescents increasingly expect their parents to respect their autonomy. This intergenerational value gap further amplifies the negative effects of authoritarian parenting, weakening family emotional functioning and even becoming a source of psychological stress for adolescents. Against this backdrop, this study focuses on the mechanisms through which parenting styles influence depressive emotions in

adolescents and proposes intervention strategies. It specifically explores how different parenting styles affect adolescent depression through emotional, cognitive, and neuroendocrine pathways, given the prevalence of dual-career families, lack of parent-child companionship, and intergenerational value conflicts. Using a literature review approach, this study integrates theoretical and empirical evidence to reveal the psychological pathways behind weakened family emotional functioning, providing a theoretical basis and practical guidance for improving parent-child interaction and alleviating adolescent depression.

2. Theoretical basis

2.1. Attachment theory: the foundation of emotional security

Bowlby's [2] attachment theory emphasizes that the internal working model formed through early parent-child interactions serves as the cornerstone of an individual's emotional regulation ability. This internal psychological representation continues to influence how adolescents perceive themselves and others: those with secure attachment view caregivers as reliable emotional supports, thereby establishing a "secure base" effect—enabling them to explore the environment autonomously while seeking support when facing setbacks [3]. In contrast, insecure attachment leads to dual dysfunction, manifesting as suppressed emotional expression and impaired regulatory mechanisms, such as reduced prefrontal cortex control over the amygdala, resulting in oversensitivity to negative stimuli (e.g., pathological shame triggered by social failure). Neuroscience research further confirms that secure attachment promotes the coordinated development of the limbic system and the cerebral cortex, providing a physiological basis for buffering depressive emotions in adolescents [4].

Since Bowlby, the Strange Situation Procedure has been a key breakthrough, categorizing infant attachment into secure (65%-70%), avoidant (20%), anxious (10%), and later added disorganized types. This classification provides a methodological basis for studying adolescent attachment. Modern neuroscience further reveals that secure attachment regulates the hypothalamic-pituitary-adrenal (HPA) axis, reducing the neurotoxic effects of cortisol on the hippocampus. It is worth noting that the application of attachment theory may vary across cultures and should be re-examined within culture-specific frameworks.

2.2. Family systems theory: the amplifying effect of dynamic interaction

Minuchin's [5] family systems theory reveals that the family is an organic whole for emotional transmission, with pathological states often manifesting as triangulation—when parents impose marital conflicts onto their children, forcing adolescents into the role of "emotional arbitrators." This role displacement triggers a triple crisis: first, chronic stress load, where continuous involvement in conflicts leads to abnormal activation of the HPA axis and long-term elevation of cortisol levels; second, disintegration of self-boundaries, causing adolescents to become overly focused on parental needs while suppressing their own emotional expression; and third, intergenerational transmission risk, where dysfunctional patterns learned in youth may persist into future families [6].

Building on Minuchin's structural model, the concept of intergenerational transmission indicates that emotional patterns and anxiety levels within families are passed down through conscious and unconscious processes. Parents' unresolved anxiety is transmitted to children not only through daily interactions and teachings but also unconsciously, for example, through triangulation mechanisms in stressful family situations, where children inadvertently internalize these emotions, forming a cross-

generational cycle of "emotional inheritance" that profoundly affects their emotional patterns and anxiety coping methods in their own family relationships. With the rise of digitalization, triangulation patterns in family relationships have evolved into digital media triangulation, where children become participants in parental conflicts through digital media, breaking original family boundaries and forming a new model of family triangulation.

3. Types of parenting styles

Baumrind [7] identified three classic parenting styles through observations of preschool children's family interactions: authoritative, authoritarian, and permissive. These are based on combinations of parental "demandingness" and "responsiveness":

Authoritative: High demandingness and high responsiveness, guiding children through clear rules and emotional support while respecting their autonomy.

Authoritarian: High demandingness but low responsiveness, characterized by strict control and commands with little attention to children's emotional needs or autonomy.

Permissive: Low demandingness and high responsiveness, lacking behavioral constraints and guidance despite fulfilling emotional needs.

Later, Maccoby and Martin added the "neglectful" parenting style to Baumrind's model, forming a two-dimensional framework of demandingness and responsiveness.

Extensive research shows a significant association between parenting styles and adolescent depressive emotions. On the positive side, authoritative parenting is generally considered a protective factor. These parents provide high emotional responsiveness and reasonable behavioral demands, helping adolescents develop secure attachment, effective emotional regulation skills, and a positive self-concept, thereby significantly reducing the risk of depression [7,8]. In contrast, non-authoritative parenting styles are often associated with higher levels of depressive emotions. The high control and low responsiveness of authoritarian parenting can lead to feelings of helplessness and low self-esteem in adolescents, whose emotional needs are neglected and negative emotions internalized as depressive symptoms [9]. Although permissive parenting is warm, it lacks necessary behavioral guidance and boundaries, making it difficult for adolescents to develop effective coping strategies and resilience, leading to emotional issues when facing setbacks [10]. Neglectful parenting is the most damaging model for psychological development, as parents provide neither care nor supervision, resulting in strong feelings of insecurity and worthlessness in children, greatly increasing the risk of depression [11,12].

Emotional regulation, cognitive schemas, and neuroendocrine responses are the primary pathways through which these effects manifest. Additionally, through continued negative evaluations in daily interactions, they internalize into "self-critical" cognitive schemas; and may cause dysfunction of the HPA axis, with long-term elevated cortisol levels, collectively contributing to the development and progression of depressive emotions [3,4].

4. Mechanisms of how parenting styles influence depressive emotions in adolescents

4.1. Emotional regulation pathway: the mediating role of parent-child relationship quality

According to Brumariu & Kerns [3], neglectful parenting damages the emotional bond between parent and child, weakening the adolescent's "secure base," leading to inhibited emotional expression and impaired regulation abilities. The quality of the parent-child relationship plays a key mediating role: such parenting reduces intimacy and emotional communication, affecting the

development and function of the prefrontal-amygdala pathway. This neural dysfunction manifests as oversensitivity to negative stimuli and a reduced ability to experience positive emotions [4,9].

4.2. Cognitive schema pathway: the mediating mechanism of self-esteem

Social learning theory emphasizes that parental evaluations are a crucial source of self-perception for adolescents. Frequent criticism and belittling in authoritarian parenting internalize to damage adolescents' self-esteem, forming negative self-schema. Research finds that low self-esteem is a core mediating variable connecting authoritarian parenting and depressive emotions. Adolescents integrate parental negative evaluations into their self-concept, generating "self-criticism" and "feelings of worthlessness," significantly increasing the risk of depression [9,11].

4.3. Neuroendocrine pathway: parent-child conflict and HPA axis dysfunction

Family conflict worsens parent-child relationship quality through triangulation, persistently activating the HPA axis and causing abnormal elevation of cortisol levels. Parent-child conflict plays a key mediating role here: high-conflict environments keep adolescents in a prolonged state of stress, and the neurotoxic effects of cortisol particularly affect the hippocampus, potentially reducing its volume and impacting emotional regulation and cognitive function [6,12]. This pathway reveals the deep impact of family environment on adolescent depression through neuroendocrine mechanisms.

5. Strategies to alleviate adolescent depressive emotions through parenting style adjustments

On one hand, reconstructing parental nurturing skills through authoritative parenting training can involve "emotional responsiveness-rule negotiation" dual-module workshops. First, train parents to recognize children's non-verbal emotional signals (e.g., silence, avoidance) using Gottman's [13] five-step emotion coaching method: parents should keenly perceive their child's emotions, not just surface behavior but capture hidden feelings; then, view emotional moments as opportunities for intimacy and guidance; next, through listening and empathy, validate the child's emotions, making them feel understood; then help the child label emotions with words to clearly recognize their feelings; finally, set behavioral limits while guiding the child to think about and solve the problems triggering emotions, helping them understand and cope with various emotions. Second, rule negotiation: replace one-way commands with "family meetings," e.g., jointly formulate mobile phone usage agreements.

On the other hand, restore family system functioning to break the triangulation cycle: establish a "parental conflict isolation principle"—strictly prohibit children from conveying hostile remarks or acting as mediators; then implement daily 15-minute 'golden conversations': avoid preaching and evaluation, focus solely on listening to the child's daily experiences.

6. Conclusion

Based on the practical background of contemporary changes in Chinese family structures, this study systematically reviews the mechanisms through which parenting styles influence depressive emotions in adolescents and proposes intervention strategies. Addressing the core issues raised in the introduction, the paper integrates attachment theory, family systems theory, and relevant empirical research to clarify the protective role of authoritative parenting and the specific pathways through which non-authoritative parenting exacerbates depression risk by impairing emotional

regulation, forming negative self-schema, and causing HPA axis dysfunction. Meanwhile, intervention strategies are proposed through parental skill reconstruction and family system restoration.

However, this study has limitations. First, as a review, it lacks original data collection and empirical testing, relying on existing literature, which may involve publication bias. Second, discussion of the characteristics of parenting styles in the Chinese cultural context (e.g., the "strict father and kind mother" model) and culture-specific mechanisms linking them to depressive emotions is insufficient. Furthermore, the actual effectiveness of the intervention strategies needs further verification.

Future research could focus on the following aspects: first, conduct longitudinal studies to clarify the long-term effects of different parenting styles on depressive emotions and the stability of mediating mechanisms; second, develop localized parenting style assessment tools and intervention programs within the Chinese cultural context, particularly focusing on the role of fathers and the impact of digital media use on parent-child relationships; third, incorporate digital health technologies (e.g., app-based emotion diaries, parent-child interaction monitoring tools) to enhance the timeliness and precision of interventions; fourth, strengthen interdisciplinary collaboration, integrating perspectives from psychology, neuroscience, and sociology to promote the coordinated development of theory and practice.

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