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## Parental Involvement, Psychological Distress, Perceived Social Support, Coping Strategy, and Happiness of **School Going Adolescent**

Monica Sharma<sup>1</sup>\*, Neha Kaushik<sup>2</sup>

#### **ABSTRACT**

The interest and realization of the importance of Parental involvement in a child's life has resulted into growing interest in the field of parenting. Parental involvement plays an important part in the child's life at different levels whether it is at school level or in choosing a career or a life partner. The present study attempts to explore the relationship between Parental Involvement with Psychological Distress, Perceived Social Support, Coping Strategies and Happiness along with gender differences if any among boys and girls on the variables of the study. Data was collected by employing Parental Involvement Scale (Voydanoff & Donnelly, 1999), General Health Questionnaire (Goldberg & Williams, 1988), Multidimensional Scale of Perceived Social Support (Zimet et al., 1988), Oxford Happiness Questionnaire (Peter Hills & Michael Argyle, 2002) and Coping Strategy Inventory- Short form (Tobin, 2000) from 60 adolescents (10-19 years, WHO), which included 30 girls and 30 boys. The findings of the study showed that there is no significant gender difference between adolescent boys and girls on all the variables of the study. The correlation analysis results revealed that there is no significant correlation between Parental Involvement and Adolescent's experience of Psychological Distress, Coping Strategies, Perceived Social Support and Happiness. The study also point out significant relationship between other variables of the study which are discussed in detail in the paper. The results have greater implications as they are related with the betterment of the adolescents who are the Nation builders.

**KEYWORDS:** Parental Involvement, Psychological Distress, Perceived Social Support, Happiness, Coping Strategies, Adolescents

<sup>&</sup>lt;sup>1</sup> Clinical Psychologist and Counsellor, IIS University, Jaipur, India

<sup>&</sup>lt;sup>2</sup> Research Scholar, IIS University, Jaipur, India

<sup>\*</sup>Responding Author

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#### INTRODUCTION

When we think about parenting the picture most of the individuals imagine is of changing diapers, chasing a screaming child, messy feeding times, sleepless nights etc. But parenting goes far beyond the requirements for meeting the basic survival needs of the child and parents have significant influence on how their children turnout which includes personality, emotional development, behavioural habits as well as a host of other factors. It is very important for a parent to be present throughout this process of development to give enough support, foster growth and confidence in their child.

The physical presence of parents is not enough, they being emotionally invested and responsive is also essential for a healthier development. Vollinget. al., (2002) pointed out the importance of connection between Parental Involvement and children competencies by concluding on the basis of the results of their research that the emotional involvement of parents does matter and affect the outcome of their child's emotional competencies and their regulations. Thus it can be said that if parents spend quality time with their children they would have less struggle and difficulty in regulating their emotions.

There are many researchers which point out this importance in many aspects of a child's life such as: Emotional Health (Michael et al. 1997), Self Esteem (Gray& Steinberg, 1999), Educational Attainment (Wendy, 2004), Behaviour (Carlson, 2006), Delinquency (Gray, 1972), Sexual Behaviour (Cheryl et al., 2007), Teen Pregnancy (Bruce et.al., 2003), Tobacco Use (Michael et al. 1997), Substance Abuse (Jacinta & Kristin, 2006) and Academic Achievement (Elizabeth & Michelle, 1996). All these researches provide evidences favouring the important role parents play in the development of the child as they grow into adulthood and learn how to navigate through life.

During this process of transition from childhood to adulthood the most critical period of adolescents come. It is a time of shifting dynamics, a tight rope negotiation of new roles and greater freedom. It is an intriguing stage of development filled with many physical, cognitive, social and emotional changes. This is the time when there is an increase in academic demands and the complexity of the school structure which makes the one and the foremost important goal in an adolescent's life i.e. academic success even more difficult to achieve. It's also a time that challenges parents desire to stay connected to their child's learning as well as other important aspects.

Few important aspects we would like to explore are: Psychological Distress, Perceived Social Support, Coping Strategies and Happiness.

#### Psychological Distress

Psychological Distress as defined by Mirowsky & Ross (2002), is an emotional state of suffering characterized by symptoms of loss of interest, sadness, feeling of tension and restlessness. In today's competitive world when the exposure to a stressful event that threatens the physical and mental health, the inability to cope effectively with the stressors and the emotional turmoil that result from this ineffective coping lead to psychological distress. The rates of psychological distress vary according to ethnic group, gender, developmental stage etc. There are continuities between psychological distress in childhood, adolescents and adulthood and there may be some common risk and protective factors relating to it. It has been seen that the psychological distress increases with age in girls and decreases in boys (Meltzer et al., 2000). Parents and adolescents distress are reciprocal to each other. Across time even when earlier emotional states are statistically control. These mutual influence in distress however are gender specific with the strongest cross-lagged associations occurring between mother and son, father and daughter. Further boys are more susceptible to parental distress during early adolescence, girls during early to mid-adolescence (Xiaojia et al., 1995). Adolescents face as many or even more stress than any other age group. They experience greater sensitivity towards their surroundings as well as anticipation for doing well they strive relentlessly to live up to self's or other expectations. This pressure to excel, along with other concerns can drain their energy and result in excessive stress. Excessive stress during the teen years has a harmful impact upon both physical and mental health in later life. Adolescents have to face various challenges in relationship personal and environments besides the customary academic and co- curricular activities toll.

Despite all this the adolescents stress is often neglected. It has been observed that there are many researchers conducted explore the factors contributing to this stress. It is of paramount importance to identify the factors which could act as a buffer against this stress in order to design specific and effective interventions to help adolescents lead a healthier life.

#### Perceived Social Support

Social bonds and supportive relationships are widely recognized as being indispensable to healthy psychological functioning and general well-being, especially in relation to the development and course of psychopathology (Ensel& Lin, 1991, Kessler, Price, & Wortman, 1985; Robinson & Garber, 1999). Social Support refers to one's social bonds, social integration, and primary group relations. It reflects a persons' feeling of being loved, valued, and able to count on others during times of need (Cobb, 1976, in Turner & Brown, 2010). Perceived support or 'emotional support' is the subjective belief that one has a caring and available social network, and is more strongly associated with mental health and well-being than other forms of social support (Turner & Brown, 2010). Researchers have found that social support can both prevent and alleviate stress; individuals with supportive social networks encounter fewer adverse

circumstances and are more resilient to stressful situations when they occur (Cohen & Willis, 1985; Thompson, Flood, & Goodwin, 2006).

To measure social support, individuals' perceptions are commonly studied that's where Perceived Social Support covers in picture. Perceived Social Support refers to a person's perception of readily available support from friends, family, and others. It also shows the complex nature of social support including both the history of the relationship with the individual who provides the supportive behavior and the environmental context (Hobfoll & Vaux, 1993).

Advice and encouragement from sources of support may also increase the likelihood that an individual will rely on active problem solving and information seeking. These techniques may assist students in dealing with various stressors in the environment and facilitate a positive adjustment process (Holahan, Valentiner, & Moos, 1995).

A substantial body of literature shows that early adolescents perceived social support is associated with their academic achievement. These studies also show that early adolescent who perceive their parents, peers or teachers as supportive are fare better in school than those who don't perceive their socializers as such (Wentzel, 1998).

Adolescents is a period of decline in academic motivation and increased negative emotions (Roser et al, 2000). With respect to social support it is a period when youth perceived their parent as less supportive where as their perception of peer support peaks to the maximum (Furman & Buhrmester, 1992)

Similarly, it was revealed in a study by Cumsille and Epstein (1994) that females have been found to receive more perceived social support from their friends than their male counterparts.

#### Coping Strategies

Having considered stress it is important to understand coping. Coping is defined as "Constantly changing Cognitive and Behavioural efforts to manage specific external and/or internal demands that are appraised as taxing or exceeding the resources of the person" (Lazarus & Folkman, 1984, p. 141). Lazarus & Folkman viewed coping not as an automatic behaviour, but one that requires conscious effort by the person to handle the stressful event.

As alluded the development task associated with adolescents pose a unique set of stressors and strain. Included in the normative task of adolescents are developing an identity, differentiating from the family while staying connected and fitting into a peer group. The adolescent's adaptions to these and is achieved through the process of coping which involved cognitive and behavioural strategies directed at eliminating and reducing demands, redefining demands so as to make them

more manageable, increasing resources for dealing with demands or managing tensions which is felt of resulting of perceiving demands.

Children and adolescent both report experiencing stress in their life and that their attempt to cope with that stress although most of the researches on coping are focussed on adult population. It's of recent time that the attention has been shifted to adolescents suggesting that there is development changes in coping during this stage of development and that particular coping strategy vary with gender and the type of stressors experienced by the adolescents.

Coping with stress during adolescence is a thoroughly documented phenomenon, and there is a growing understanding of its relationship with adolescent mental health and illnesses. The scientific literature on adolescent stress and coping has evolved, cementing the proposition that the two concepts are inextricably linked. For example, Lazarus and Folkman's (1984) frame of reference on stress and coping is applied widely in the scientific literature on adolescent stress and coping. According to this framework, stress is conceptualized as a perception of daily hassles and events. Hassles or events are appraised by an individual as threatening or harmful and thus they are considered to be stress factors. Resources are then appraised within the immediate environment to cope with the stress factor, and finally, one uses identified resources to cope with the perceived threat or harm.

Coping can take several forms, such as problem-focused and emotion-focused coping (Lazarus & Folkman, 1984), functional or dysfunctional, adaptive versus maladaptive (O'Connor et al, 2010). Examples of applicable functional coping strategies include social support, parental support, and the above-mentioned problem-focused coping. Dysfunctional coping strategies typically encompass avoidance, wishful thinking, and blame (Carver, Scheier & Weintraub, 1989).

Many researchers have reported Gender Differences in Coping Capabilities of Adolescents. Female adolescents report higher coping capabilities than Males. Females use less distractions and more aggression (Hampel & Petermann, 2005). Females also have higher scores in avoidant coping (Frydenberg and Lewis, 1993). Females tend to show more active approach Coping Strategies (Griffith, Dubow and Ippolito, 2000). Further it is noted that females make effective use of their social support network to cope with stressors (Greenglass, Burke and Konarski, 1998). Similar to these findings Stone & Neale (1984), found that males were more likely to adopt direct action as compared to females who use distraction, relaxation, religion and other Coping Strategies. In contrast, Folkman and Lazarus (1980), showed that Males & Females did not differ significantly in their coping behaviors.

Coping capabilities in both genders seems to vary with each gender having their own distinctive coping patterns. Seiffe- Krenke's (1995), conceptualized the issues and major questions in relation to stress and coping. They pointed out the importance of stressors, internal resources and relationships with parents and peers to be of utmost importance in the coping employed by the adolescents.

#### **Happiness**

Happiness is simply defined by Webesters, as a "state of wellbeing characterized by emotions ranging from contentment to intense joy and a pleasurable or satisfying experience".

One's living in environment is the soul factor that determines one's happiness. It depends on the psychological process, which is influenced by the interaction between individual's psychological traits and their living environment (Kim, 2010; Song, 2010). Adolescent may convey different responses to the same living environment depending on their personal psychological traits. This implies that one's happiness is affected by how they see happiness in their lives as well as how they react to the situations. This is of importance since happy people seem to exhibit better mental health, physical health, and longevity (Denier & Seligman 2002; Lyubomirsky, Diener& King 2005; Siahpush, Spittal & Singh 2008; Veenhoven 2008; Diener & Chan 2011), as well as greater financial success and better coping resources (Lyubomirsky, Diener& King 2005). They also have highly satisfying relationships with friends, romantic partners, and family members (Diener & Seligman 2002; Lyubomirsky, Diener& King 2005), are more flourishing people (Lyubomirsky, Sheldon & Schkade 2005), and can better endure negative emotions (Tugade & Fredrickson 2004; Cohn et al. 2009; Garland et al. 2010).

Most parents want their children to be happy throughout their life. Whether it is by showing them unconditional love or making them do things which interest them. The main purpose is to make them feel happy. Adolescent who experiences high level of happiness show less emotional and behavioral problems. Hence, happiness is more like a journey than a destination (Nima et al, 2012). Empirical findings have also shown that adolescents' perceptions of happiness can change from year to year, from season to season, and from day to day (Csikszentmihalyi & Hunter 2003), as well as that sources of happiness are found to change as adolescents progress through development (Chaplin 2009).

What the parents may call a good strategy in the pursuit of happiness may not be the same as the one's their children practice. According to research emotional closeness with parents influences children happiness and satisfaction in life (Amato, 1994). Also parental support contributes much to adolescents life satisfaction (Young et al, 1995). It has also been observed that conflicts with parents, parents excessive interventions, lack of understanding and corporal punishment are the hindrance factor to psychological wellbeing and happiness of adolescent (Jun, 1996). Further, an

increase number of young people state that discord with parents is the main reason of committing suicide (Song, 2010). All the above mentioned reasons suggest that there is a need to understand the relation of adolescence happiness with parental relationship.

It has been observed that despite the relationship between Parental Involvement and different aspects of adolescent's life most of the researches conducted till date are focusing on academic achievement and success which gives rise to our quest to conduct this research focusing on Parental Involvement and its relationship with variables other than academic achievement or success. As already discussed parents play a significant role in their child's life. There might be certain relations between Parental Involvement and child's development which could help to or act as a buffer against negative emotions which do affect the normal development.

Comparatively new field of psychology that is positive psychology focuses on developing these strengths. So keeping this in Prospective the present research was conducted with the following aims and objectives.

#### **METHODOLOGY**

#### Aims:

- 1. To explore the gender differences if any among adolescent boys and girls on Psychological Distress, Perceived Social Support, Coping Strategies and Happiness.
- 2. To examine the relationship between:
- a. Parental Involvement and Psychological Distress.
- b. Parental Involvement and Perceived Social Support.
- c. Parental Involvement and Coping Strategies.
- d. Parental Involvement and Happiness.
- 3. To examine the relationship among all the mentioned variables (viz., Psychological Distress, Perceived Social Support, Coping Strategies and Happiness).

#### Hypotheses:

- There will be significant difference between adolescent boys and girls on the level of Psychological Distress, Perceived Social Support, Coping Strategies and Happiness experience by them.
- There will be significant relationship between
- Parental Involvement and Psychological Distress. a)
- b) Parental Involvement and Perceived Social Support.
- Parental Involvement and Coping Strategy.
- d) Parental Involvement and Happiness.
- There will be significant relationship among all the mentioned variables (viz., Psychological Distress, Coping Strategies, Perceived Social Support and Happiness).

### Sample:

The sample consisted of 60 adolescents (30 boys and 30 girls) of different grades from English medium schools of Jaipur city. They were selected with the following criteria of inclusion and exclusion:

#### **Inclusion Criteria:**

- Students in 9th- 11<sup>th</sup> grade
- Between the age group of 10-19 years
- Who knew English Language.
- Who gave consent to be the part of the research.

#### **Exclusion Criteria:**

- Subjects with single parent or divorced parents.
- -The subjects with any chronic physical illness and psychiatric illness.

#### Procedure:

Questionnaires were selected to form the basis of this research as they are relatively time and cost effective. In order to test the hypotheses, data was collected from adolescents who met all the inclusion and exclusion criteria's, the questionnaires were kept anonymous in order to reduce the likelihood of respondents giving socially desirable answersand the test were given in random order.

#### Tools employed:

- Parental Involvement Scale (Voydanoff & Donnelly, 1999): The 9 item parental Involvement scale is used to measure how involved parents are in the lives of their children. Items ask whether or not parents have done things for their adolescents during the past 3 months, 6 months or a year. The respondents simply checks off each item on the list that the parent has done during the selected time period. The number of checked off items is summed for a total score.
- General Health Questionnaire (Goldberg & Williams, 1988): The 12-item General Health Questionnaire (GHQ-12) is used routinely as a unidimensional measure of psychological morbidity. Many factor-analytic studies have reported that the GHQ-12 has two or three dimensions, threatening its validity. It is possible that these 'dimensions' are the result of the wording of the GHQ-12, namely its division into positively phrased (PP) and negatively phrased (NP) statements about mood states. Such 'method effects' introduce response bias which should be taken into account when deriving and interpreting factors.
- Multidimensional Scale of Perceived Social Support (Zimet et al., 1988): The 12-item scale that measures perceived support from three domains: family, friends, and a significant other. Participants completing the MSPSS are asked to indicate their agreement with items on a 7-point Likert-type scale, ranging from very strongly disagree to very strongly agree. Total and

subscale scores range from 1 to 7, with higher scores suggesting greater levels of perceived social support.

- Coping Strategy Inventory- Short form (Tobin, 2000): Coping style was measured with the 32-item Coping Strategies Inventory–Short Form (CSI–SF; Tobin, 2000; average a = .90 for two overall factors). The CSI-SF generates two overall coping factors, Engagement and Disengagement, and four secondary factors: Problem Engagement, Problem Disengagement, Emotion Engagement, and Emotion Disengagement. In a comprehensive review of over 100 coping measures, Skinner, Edge, Altman, and Sherwood (2003) recommended the CSI as one of the two best measures of coping for adults, based on its hierarchical structure and inclusiveness of multiple coping styles and strategies.
- Oxford Happiness Questionnaire (Peter Hills & Michael Argyle, 2002): The Oxford Happiness Questionnaire is a 29-item inventory multiple choice instrument which provides a general measure of happiness. Argyle & Hills proposed that happiness depends on frequency and positive affect or joy, high level of satisfaction over a period of time, and the absence of negative feeling such as depression or anxiety. Argyle, Martin & Crossl and (1989) reported an internal reliability of .90 using Cronbach's alpha and a 7-week test-retest reliability of .78. construct validity was developed based on three hypothsised components of happiness: the correlation between the Oxford Happiness Inventory and Positive Affect Scale as measured by the Bradburn Balanced Affect Scale (Bradburn, 1969) was .32. the correlation between the Oxford Happiness Inventory and Argyle's Life Satisfaction Index (Argyle, 1987) was .57, and the correlation between the Oxford Happiness Inventory and Beck Depression Inventory (Beck, 1978) was -.52. Each item of this scale contains six options constructed to reflect incremental steps defined as: Strongly Disagree to Strongly Agree. The respondents will be asked to pick out the one option in each statement which best describes the way you have been feeling over the past week including today.

#### Research Design:

To fulfill the above aims and objectives majorly a Correlational research design was employed.

Statistical Analysis: Pearson Product Moment Correlation was calculated. Further t-test was employed to explore the gender differences.

#### **RESULTS**

Table 1: Mean, SDs and t-value showing comparison between adolescent boys and girls (10-19 years old) on Parental Involvement, Psychological Distress, Perceived Social Support, Coping Strategies and Happiness (n=60)

S.No.	Variables	Gender	Mean	SDs	t- value	Significance
1	Parental Involvement	Male	4.47	1.978	.26	NS
		Female	4.60	1.958		
2	GHQ	Male	8.46	3.99	1.95	NS
		Female	11.06	6.10		
3	Perceived Social Support	Male	60.26	16.01	1.20	NS
		Female	64.66	11.92		
3.1	Significant Others	Male	20.06	6.14	.35	NS
		Female	20.66	4.80		
3.2	Family	Male	21.10	6.38	1.00	NS
		Female	22.56	4.78		
3.3	Friends	Male	19.10	6.52	1.40	NS
		Female	21.10	6.59		
4	Coping Strategies					
4.1	Problem Solving	Male	14.00	2.54	.75	NS
		Female	13.40	3.51		
4.2	Cognitive Restructuring	Male	12.37	4.31	.58	NS
		Female	11.73	4.00	1	
4.3	Expressed Emotions	Male	13.07	4.41	.36	NS
		Female	13.47	4.03		
4.4	Social Contact	Male	11.03	3.26	.76	NS
		Female	10.43	2.80		
4.5	Problem Avoidance	Male	12.47	2.98	.39	NS
		Female	12.17	2.97	1	
4.6	Wishful Thinking	Male	10.90	3.77	.20	NS
	_	Female	11.10	3.66	1	
4.7	Self- Criticism	Male	9.10	3.24	.42	NS
		Female	9.47	3.51	1	
4.8	Social Withdrawal	Male	13.27	3.11	.52	NS
		Female	12.87	2.73	1	
4.9	Engagement	Male	50.07	9.23	.39	NS
		Female	49.03	10.91	1	
4.10	Disengagement	Male	45.73	8.43	.53	NS
		Female	44.60	8.02	1	
5	Happiness	Male	123.76	15.05	.96	NS
		Female	120.03	14.99		

<sup>\*</sup> NS- Not Significant

As shown in Table 1 the "t-values" clearly indicate that there is no significant difference between the boys and girls on measures of the study Parental Involvement(t= .26, p> 0.05), General Health Questionnaire(t= 1.95, p> 0.05), on the measures of Perceived Social Support that are Significant Others(t=1.40, p>0.05), Family(t=1.00, p>0.05), Friends(t=.35, p>0.05),total Perceived Social Support Score (t= 1.20, p> 0.05), on the measures of Coping Strategies that are Problem Solving (t=.75, p> 0.05), Cognitive Restructuring (t= .58, p> 0.05), Express Emotions (t= .36, p> 0.05), Social Contact (t=.76, p> 0.05), Problem Avoidance (t= .39, p> 0.05), Wishful Thinking (t= .20, p> 0.05), Self-Criticism (t=.42, p> 0.05), Social Withdrawal (t= .52, p> 0.05), Engagement (t=.39, p> 0.05) and Disengagement Coping (t=.53, p> 0.05) and Happiness (t= .96, p > 0.05).

Table 2: Correlation coefficient between Parental Involvement and Psychological Distress of adolescent boys and girls within the age range of 10 to 19 years (n=60).

	Parental Involvement	Significance
Psychological Distress	119	NS

<sup>\*</sup>NS- Not significant

Table 2 shows that there is insignificant negative correlation between Parental Involvement and Psychological Distress (r= -.119, p>0.05).

Table 3: Correlation Coefficient between Parental Involvement and Perceived Social Support of adolescent boys and girls within the age range of 10 to 19 years (n=60)

Parental Involvement	Parental Involvement	Significance
Perceived Social Support		
Significant Others	.058	NS
Family	.144	NS
Friends	.107	NS
Perceived Social Support	.116	NS

<sup>\*</sup>NS- Not Significant

Table 4 indicates that there is insignificant positive correlation between Parental Involvement and measures of Perceived Social Support that are Significant Others (r= .058), Family (r= .144), Friends (r= .107) and total Perceived Social Support Score (r= .116) at 0.05 level respectively.

Table 4: Correlation coefficient between Parental Involvement and Coping Strategies of adolescent boys and girls within the age range of 10 to 19 years (n=60).

Parental Involvement	Parental Involvement	Significance
Coping Strategies		
Problem Solving	.118	NS
Cognitive Restructuring	.202	NS
Expressed Emotions	.080	NS
Social Contact	159	NS
Problem Avoidance	050	NS
Wishful Thinking	252	NS
Self- Criticism	225	NS
Social Withdrawal	.071	NS
Engagement	.095	NS
Disengagement	192	NS

<sup>\*</sup>NS- Not Significant

Table 3 shows that there is insignificant positive or negative correlation between Parental Involvement and on the measures of Coping Strategies that are Problem Solving (r= .118), Cognitive Restructuring (r= .202), Expressed Emotions (r= .080), Social Contact (r= -.159), Problem Avoidance (r= -.050), Wishful Thinking (r= -.252), Self-Criticism (r= -.225), SW (r= .071), Engagement (r= .095) and Disengagement (r= -.192) coping strategy at 0.05 level respectively.

Table 5: Correlation coefficient between Parental Involvement and Happiness of adolescent boys and girls within the age range of 10 to 19 years (n=60).

	Parental Involvement	Significance
Happiness	.108	NS

<sup>\*</sup>NS- Not Significant

Table 5 indicates that there is insignificant positive correlation between Parental Involvement and Happiness (r=.108, p>0.05).

Table 6: Correlation coefficient of Psychological Distress with Perceived Social Support, Coping Strategies and Happiness of adolescent boys and girls within the age range of 10 to 19 vears (n=60).

Psyc	hological Distress	Psychological	Significance
Other Variables		Distress	
Perceived Social Support		223	Not Significant
• Significant Others		054	Not Significant
• Family		290*	Significant
• Friends		212	Not Significant

Psychological Distress	Psychological	Significance
Other Variables	Distress	
Coping Strategies		
Problem Solving	342**	Significant
Cognitive Restructuring	058	Not Significant
Express Emotions	246	Not Significant
Social Contact	.086	Not Significant
Problem Avoidance	.091	Not Significant
Wishful Thinking	.376**	Significant
Self- Criticism	.223	Not Significant
Social Withdrawal	175	Not Significant
Social Whitelewar		
Final Coping Strategies		
• Engagement	206	Not Significant
Disengagement	.209	Not Significant
	205*	Cignificant
Happiness	305*	Significant

<sup>\*</sup>Correlation is significant at the 0.05 level (2-tailed)

Table 6 indicates that Psychological Distress is significantly negatively correlated with measure of Perceived Social Support i.e. Family (r= -.290, p<0.05), Problem Solving Coping Strategy (r=.-.342, P<0.01), Happiness (r= -.305, p<0.05) and significantly positively correlated with Wishful Thinking Coping Strategy (r= .376, p<0.01).

Table 7: Correlation coefficient of Coping Strategies with Perceived Social Support and Happiness of adolescent boys and girls within the age range of 10 to 19 years (n=60).

inapplicess of adolescent boys and girls within the age range of 10 to 17 years (n=00).										
Measures of Coping Strategies	PS	CR	EE	SC	PA	WT	Self-C	SW	ENG	DISENG
Other Variables										
Perceived Social Support	.285*	.136	.408**	011	.190	128	245	.083	.292*	048
Significant Others	.271*	.126	.380**	.038	.248	064	170	.054	.286*	.013
• Family	.256*	.081	.248	.050	.216	144	.127	032	.223	053
• Friends	.135	.155	.354**	136	063	104	285*	.141	.193	019
Happiness	.497**	.169	.236	019	007	.055	166	.363**	.292*	.082

<sup>\*</sup>Correlation is significant at the 0.05 level (2-tailed)

(PS= Problem Solving, CR= Cognitive Restructuring, EE= Express Emotions, SC= Social Contact, PA= Problem Avoidance, WT= Wishful Thinking, SELF..... Self-Criticism, SW= Social Withdrawal, ENG= Engagement, DISENG= Disengagement)

<sup>\*\*</sup> Correlation is significant at the 0.01 level (2 tailed)

<sup>\*\*</sup> Correlation is significant at the 0.01 level (2 tailed)

Problem Solving Coping Strategy is significantly positively correlated with measures of Perceived Social Support i.e. Significant Others and Family (r= .271, p<0.05; r= .256, p< 0.05) respectively, total Perceived Social Support Score (r=.285, p< 0.05) and Happiness (r= .497, p< 0.05).

Express Emotions Coping Strategy is significantly positively correlated with Total Perceived Social Support (r= .405, p< 0.01), measures of Perceived Social Support i.e. Significant Others (r= .380, p< 0.01) and Friends (r= .354, p< 0.01).

There is significant negative correlation between Self- Criticism and measure of Perceived Social Support i.e. Friends (r=-.285, p<0.05).

Social Withdrawal Coping Strategy is significantly positively correlated with Happiness.

There is significant positive correlation between Engagement Coping Strategy and measure of Perceived Social Support i.e. Significant others (r= .286, p<0.05), Total Perceived Social Support Score (r= .292, p< 0.05) and Happiness (r= .292, p< 0.05).

Table 8: Correlation coefficient between Perceived Social Support and Happiness of adolescent boys and girls within the age range of 10 to 19 years (n=60).

	Significant	Family	Friends	Total	Perceived	Social	Support
	Others			Score			
Happiness	.240	.171	.050	.208			

<sup>\*</sup>Correlation is significant at the 0.05 level (2-tailed)

(PSS=Perceived Social Support)

There is no significant correlation between Perceived Social Support and Happiness.

#### **DISCUSSION**

Parental Involvement plays an important role in an individual's life. There are many theories that indicate that Parental Involvement has an effect on Childs' behaviour and personality. Children's whose parents are involved with them or children who receive adequate Parental Involvement have a much greater chance to develop into a healthier, knowledgeable, responsible and caring adults.

The first aim of present study was to compare adolescence boy's and girl's on experience of Parental Involvement, Psychological Distress, Perceived Social Support, Coping Strategies and Happiness.

The statistical summary clearly reveals that both the groups do not differ significantly on all the variables of the study i.e. Parental Involvement, Psychological Distress, Perceived Social Support, Coping Strategies and Happiness. It has been seen that in today's world parents give an equal importance to their children irrespective of their gender. As compare to the gender differences which use to prevails in the Indian society earlier. Now girls are well educate, independent and are not limited to household works only. This is why we can see females in all divisions of society and economy doing well and holding equal level of power and position as compared to males which makes it clear that both the genders are treated equally.

The family as an institution has been criticized as a gendered institution that socializes its young to embrace stereotypical gender roles (Chodorow, 1978) which makes it possible that there should be gender differences in terms of Parental Involvement. As the results of present study report no such difference it could be possible because of the changing society and scenario where now father's also want to involve with their kids as their mothers. A survey of parents in 2007, found that fathers help less often with homework than mothers, the quality and content of father's involvement matters more than the quality or time spent by them (Goldman, 2005), however, amongst parents working full time there was no gender difference (Peters et al., 2008).

A research found significant differences in the type of home learning activities that parents undertake with boys as compare to girls. Significantly more girls' parents reported activity such as reading, songs etc. Difference in this aspect of parenting may account for some of the variations in Cognitive and Behavioural outcomes of boys and girls (Sylva et al., 2004).

As parents respond to their children's needs, including developmental and behavioural needs within a context (Mac Epstein, 1993). They adjust their involvement to the content, which includes their children's behaviour and their opportunities for action. Therefore, Parental Involvement almost certainly changes throughout childhood and is tailored, to some extent, to each child's need. As the involvement of parents is tailored for their child's specific need irrespective of their gender, both the genders experience adequate involvement of their parents leading to no gender differences.

The results of the Psychological Distress are not consistent with previous findings. Researches on Psychological Distress shows that females experiences higher level of Psychological Distress than Males (Dalen, 2014; Chung et al., 1998). During adolescence boys and girls experience biological and physical changes, acquire secondary sex characteristics and progress in their identity crystallization (Wagner, 1996). These changes appear to have psychological repercussions, often manifested as a lack of self- confidence, feeling of inferiority, shyness and fear of making mistakes. As discussed in above paragraph adolescents are vulnerable to gender socialization pressure, because they are in the process of developing gender role identification.

They tend to adopt stereotyped expectations of their own as well as their peers. It has been indicated that these gendered typed characteristics lead to difference in the Psychological Distress of boys and girls.

There is reciprocal relationship between Social Support and Psychological Distress, where Social support acts as a buffer against Psychological Distress. The present study further emphasises the same explanation for no gender differences in the experience of Psychological Distress, as it becomes clear from the results which indicate no gender difference on measure of Perceived Social Support, which further indicate that both genders receive equal support leading to fulfillment of their needs, leading to no differences in experiencing Psychological Distress.

Contrary to the findings of the present study, researchers have reported that females perceived more social support than males (Sharir et al., 2007; Kendler et al., 2005). This could be possible because females are more emotional as compared to males; thus they might be able to share their feelings more freely and readily with friends. By doing so, the females perceive having someone to talk to as having adequate social support. On the other hand, males are expected to live up to certain social expectations that have been set and that if they were to share their feelings, it would be deemed as a sign of weakness. Hence, males tend to perceive lower social support because they are more likely to feel that they have no one to express their feelings. Females, who are more likely to stay in the same clique and share personal talks more likely to perceive higher social support than males.

Several studies conducted in adolescent samples suggest that coping responses have some specificity in relation to the particular problem at hand. When teens are asked to indicate the Coping Strategy used to solve a problem, it is difficult to know the specific problem they have in mind and on which they based their reply. A study by Santacana et al. (2012), reported that both boys and girls made greater use of approach coping when facing issues involving the extended family. With regard to the use of Avoidance Coping, multiple comparisons revealed no significant difference between problems in either boys or girls indicating an equivalent use of Avoidant Coping when facing different problems. Further it was concluded that adolescents irrespective of the gender, practice similar strategies with respect to wide array problem.

When happiness is considered there are various researchers which found no significant gender differences in the level of Happiness experienced by adolescent (Sood & gupta, 2011, Ali Eryilmaz, 2010). Malik & Saida (2013), pointed out that there are gender differences in level of happiness between adolescent boys and girls because of different social roles consigned to male and female in society. Contrary to this findings by Vaidya (2014), suggested that there are significant gender difference between boys and girls. This researcher pointed out that these differences are due to the social support both the gender receives. They suggested that girls

receive more social support as compare to boys. As already discussed above these days both the genders are expected to fulfill their gender roles which are at power with each other in the Modern Society and the level of social support they receives is also adequate to their needs which makes it clear why there are no gender differences.

Pearson Product Moment Correlation was employed to explore the relationship between the Dependent Variable i.e., Parental Involvement and the Independent Variable i.e., Psychological Distress, Perceived Social Support, Coping Strategies and Happiness. The results showed that there is no significant correlation between Parental Involvement and Psychological Distress, Coping Strategies, Perceived Social Support and Happiness.

The results of correlation between Parental Involvement and Psychological Distress are contrary with the earlier researches which reported that high level of Parental Involvement leads to low level of Psychological Distress (Gray, 1972; Cheryl et al., 2007). Carlson (2006), reported that adolescent who experiences higher level of Parental Involvement and closer relationships with their parents is less likely to exhibit psychological distress and to engage in risk behaviour. Lower levels of Parental Involvement were associated with higher level of Psychological Distress, and also were associated with lower sleep efficiency and more time spent in bed (Cousins et al., 2007).

The reason for no significant relation between Psychological Distress and Parental Involvement could be that in present research overall Parental Involvement was considered including both the parents (Mother and Father). Whereas the studies which report significant relationship between these variables were conducted keeping the main focus on either of the parents. One such study was conducted by Carlson (2006), who suggested that children with higher level of father's involvement experiences lower level of adolescent's behaviour problems and Psychological Distress.

With respect to correlation between Parental Involvement and Perceived Social Support, during adolescence phase, adolescent perceived that their parents and teachers as less supportive, whereas their perception of peer support peaks to the maximum (Furman & Buhrmester, 1992). This could be considered as an important factor contributing to the result of present study leading to no significant relationship between Perceived Social Support and Parental Involvement. When children reach adolescent they began to spend more time with friends without adult supervision. Friendships often fulfil developmental needs at this stage better than the relationship with parents. Adolescents distance themselves from parents and focus more on peers. Sometimes to the point where the influence of parents is neutralize. It seems logical, then, that peers, at least imparts, would supplant parents (Jeynes, 2005).

Results of correlation between Parental Involvement and Coping Strategies are supporting the earlier researches by indicating that Coping Behaviour/Strategies did not factor much in Parental Involvement (Domini Gomes, 2015). Adolescents coping behaviours are also associated with their other members of the family, peers and teachers along with their parents. The adolescents reported that they cope with the life stressors in a more active manner when they get support, relatedness and competence from their Parents, Family and Peers (Skinner and Wellborn, 1994).

Adolescence is a developmental stage where diverse coping resources and multiple coping strategies are discovered and tested. Gracia (2010), suggested that coping processes are an important protective factor for developing and maintaining the psychological health of adolescent. Coping is an important construct in understanding how adolescents react to the stressors and adjustment they experience in their lives. Researches have also shown that stressors may be tempered by the selection of specific coping strategies and are often related to greater health problems which make it clear why there is a significant relationship between Psychological Distress and Coping Strategies.

As part of the separation- individuation process in adolescence there is a major reorganization of intimate interpersonal relationship with decreased dependence on family and increased closeness to peers. As already discussed this is the time when adolescents see peers as their major source of support. The quality and amount of support affects the well- being. In relation to this the results of the present study indicates significant negative correlation between Psychological Distress and Family as a source of Perceived Social Support. This indicates that despite the shift from family to peers adolescents still depend on family and the quality, quantity and amount of time they spend with family act as a preventive factor against Psychological Distress.

A large literature indicates that people who perceived their family and friends as supportive have lower level of Psychological Distress than those who doubt the supportiveness of social networks. One might expect that this perception of support is linked to Happiness. Indicating that if an individual has an adequate and effective support system their level of Psychological Distress will be low and experience of Happiness will be high. As the results have already pointed out the significant relationship between Perceived Social Support and Psychological Distress, which is high level of Happiness will lead to low level of Psychological Distress leading to a negative relationship as depicted in results. This relationship is explained by the above concept.

The results showed that there is a significant positive relationship between Perceived Social Support, measures of Perceived Social Support (Significant Others, Family and Friends) and Coping Strategies. Social Support provides the most important and significant environmental resources. Support from family and friends play an important role in almost every aspect of

coping. Advice and Encouragement from sources of support may also increase the likelihood that an individual will rely on active problem solving and information seeking. In a one year longitudinal study, it was found that those who were given social support by family and friends could actually cope better in a new surrounding and situation (Halamandris & Power, 1999). Researchers have consistently found that social support help individual to cope with stress.

A study suggested that through social support individuals use adequate coping strategies which decrease the adaptation of difficulties (Fiskensbaum et al., 2006; Holaham et al., 1995) leading to effective coping from difficulties. One explanation could be that social support decreases the use of harmful disengagement coping strategies and increases use of beneficial engagement coping strategies because individuals believe their social networks includes someone who is willing to listen them (Tao et al., 2000).

There is also a significant positive relationship between Coping Strategies and Happiness. Happiness and Coping Strategies both are very unique and subjective in nature for every individual and also varies with situation and time. Consistent with the findings of present study Rajabimoghaddam & Bidjari (2011), found positive correlation between Happiness and Coping Strategies like Self-Control, Problem Solving, Being Responsible Coping Strategies and a negative correlation between Happiness and Problem Avoidance Coping Strategies. Coping theories about happiness states that happy people defined stressors in problem solving strategies therefore experience less negative results whereas unhappy people who evaluate events most uncontrollable, use quick strategies in order to decrease negative results (eg. Problem Avoidance, Social Withdrawal)(Han, 2006). A study done by Hawbam (2014), on adolescents 'reported positive relationship between seeking Social Support, Planful Problem Solving and Happiness and on the other hand a negative association was seen between Happiness and Escape Avoidance Coping Strategies.

Social support is associated with better Psychological Health and Happiness in general and reduces the negative psychological consequences of exposure to stressful events. Thus, leading an individual to achieve happiness in life (Cohen & Wills, 1985). In the Indian context social support has a larger impact as it is the most pertinent characteristics of Indian society. Social Support intensely embedded in social interaction are a part of an ever changing network of social relationships (Sharma & Gulati, 2014). Contrary to this the results of the present study suggest that there is no significant relationship between Perceived Social Support and Happiness in adolescence. Happiness isn't only gain from Social Support but may serve more beneficial by providing it (Brown et al 2003).

### **CONCLUSION**

It can be concluded that in today's modern, fast pace life adolescent's spent most of their time with their friends and peers leading to a major influence of them on the level of Psychological Distress, Perceived Social Support, Coping Strategies employed and Happiness experienced by them. The silver lining of this research is, despite the male dominant Indian Value System a shift is coming wherein both the genders are treated equally, receives equal and adequate amount of Parental Involvement. Adolescent's level of Psychological Distress is affected by Parental Involvement, Perceived Social Support, Coping Strategies and Happiness they experience. All the variables are closely linked to each other playing a significant role in the development and non-development of Psychological Distress. Hence, by providing adequate Parental Involvement, Perceived Social Support, training effective Coping Strategies, would lead to happier individuals. This would further act as a buffer against Psychological Distress leading to betterment of the adolescents who are Nation Builders.

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### **Conflict of Interests**

The author declared no conflict of interests.

#### **REFERENCES**

- Amato, P.R. (1994). Father- child relations, Mother- child relations and offspring psychological well-being in Early Adulthood. Journal of Marriage and Family, 56 (4), 1031-1042. DOI: 10. 2307/353611.
- Argyle, M., Martin, M., & Crossland, J. (1989). Happiness as a function of personality and social encounters. In J. P. Forgas, & J. M. Innes (Eds.), Recent advances in social psychology: An international perspective (pp. 189–203). North-Holland: Elsevier
- Beck, A. (1978). Beck Depression Inventory. Philadelphia: Centre for Cognitive Therapy.
- Bradburn, N. M. (1969). The structure of psychological well-being. Chicago: Aldine.
- Brown, S.L., Nesse, R.M., Vinokur, A.D. & Smith, D.M. (2003). Providing social support may be more beneficial than receiving it: results from a prospective study of mortality. Psychological Sciences, 14 (4), 320-327.
- Bruce J. Ellis et al., (2003). "Does Father Absence Place Daughters at Special Risk for Early Sexual Activity and Teenage Pregnancy?" Child Development 74 (3), 801–821.
- Carlson, M.J. (2006). "Family Structure, Father Involvement, and Adolescent Behavioral Outcomes". *Journal of Marriage and Family*, 68 (1), 137–154.
- Carver, C. S., Scheier, M. F., &Weintrab, J.K. (1989). Assessing Coping Strategies: A theoretically based approach. Journal of Personality and Social Psychology, 56, 267-283.

- Chaplin, L. (2009). Please May I Have a Bike? Better yet, May I Have a Hug? An Examination of Children's and Adolescents' Happiness. *Journal of Happiness Studies*, 10, 541-562. http://dx.doi.org/10.1007/s10902-008-9108-3
- Cheryl B. Aspy et al., "Parental Communication and Youth Sexual Behavior." *Journal of Adolescence 30* (2007): 449-466.
- Chodorow, N. (1978). The Reproduction of Mothering: Psychoanalysis and the Sociology of Gender. Berkeley, California: University of California Press
- Chung, R. C., Bemak, F., & Kagawa-Singer, M. (1998). Gender differences in Psychological Distress among Southeast Asian refugees. *Journal of Nervous and Mental Disease*, 186, 112–119.
- Cobb, S. (1976). Social support as a moderator of life stress. *Psychosomatic Medicine*, 38, 300-314.
- Cohen, G. L., Garcia, J., Purdie-Vaughns, V., Apfel, N., &Brzustoski, P. (2009). Recursive processes in self-affirmation: Intervening to close the minority achievement gap. *Science*, 324, 400-403.
- Cohen, S. & Will, A.A. (1985). Stress, social support, and the buffering hypothesis. *Psychological Bulletien*, 98(2), 310-357.
- Cousins, J., Bootzin, R.R., Stevens, S.J., & Haynes, P.L. (2007). Parental Involvement, Psychological Distress and Sleep. A preliminary examination in sleep- disturbed adolescents with a history of Substance Abuse. *Journal of Family Psychology*, 21(1), 104-113.
- Csikszentmihalyi M. & Hunter J. (2003). Happiness in everyday life: the uses of experience sampling. *Journal of Happiness Studies*, 4, 185–199. 10.1023/A:1024409732742
- Cumsille, P. & Epstein, N. (1994). Family cohesion, Family adaptability, Social Support and Adolescent Depressive Symptoms in Outpatient Clinic Families. *Journal of Family Psychology*, 8(2).
- Dalen, J. (2014). Gender differences in the relationship between school problems, school class context and psychological distress: results from the Young-HUNT 3 study. *Social Psychiatry & Psychiatric Epidemiology*, 49 (2), 183-191.
- Deiner, E. & Seligman, M.E.P. (2002). Very Happy People. Psychological Sciences, 13 (1), 81-84.
- Dew, T. & Huebner, E.S. (2004). Adolescents perceived quality of life: A explanatory investigation. *Journal of School Psychology*, *33*, 185-199.
- Diener, E. & Chan, M.Y. (2011). Happy people live longer: Subjective well-being contributes to health and longevity. Applied Psychology: *Health and Well-being*, *3*(1), 1-43.
- Elizabeth C. C. & Michelle M. F. (1996). "Spending Time with His Kids: Effects of Family Structure on Fathers' and Children's Lives". *Journal of Marriage and Family* 58, 693–707.
- Ensel, W. M. & Lin, N. (1991). The life stress paradigm and psychological distress. *Journal of Health and Social Behavior*, 32,321-341.
- Epstein J.L. (1992). School and family partnerships. In M. Alkin (Ed.), *Encyclopedia of educational research*, (Sixth Edition). New York: MacMillan.

- Eryilmaz and Ali (2010). Turkish adolescent's subjective well-being with respect to age, gender and SES of parents. International Journal of Behavioral, Cognitive, Education and Psychological Sciences, 2 (2), 101 105.
- Fiskensbaum, L. M., Greenglass, E. R., & Eaton, J. (2006). Perceived social support, hassles, and coping among the elderly. *Journal of Applied Gerontology*. 25, 17–30.
- Folkman, S. & Lazarus, R. S. (1980). An analysis of coping in a middle-aged community sample. Journal of Health and Social Behavior, 21, 219-234.
- Frydenberg, E. & Lewis, R (1993). Boys play sport and girls turn to others: Age, gender and ethnicity as determinants of coping. Journal of Adolescence, 16, 253-266.
- Furman, W., &Buhrmester, D. (1992). Age and sex differences in perceptions of networks of personal relationship. Child Development, 63, 103-115.
- Gardner, E.L., Fredrickson, B., Kring, A.M., Johnson, D.P., Meyer, P.S., & Penn, D.L. (2010). Upward spirals of positive emotions counter downward spirals of negativity: Insights from the broaden- and- build theory and affective neuroscience on the treatment of emotion dysfunctions and deficits in psychopathology. Clinical Psychology Review, 30, 849-864.
- Gary F. J. (1972). "Parents, Peers, and Delinquent Action: A Test of the Differential Association Perspective". American Journal of Sociology 78 (3), 562–575.
- Goldberg, D., & Williams, P. (1988). A user's guide to the General Health Questionnaire. Windsor, UK: NFER-Nelson.
- Goldman, R. (2005). Father's Involvement in their children's Education. London: National Family and Parenting Institute.
- Gracia, C. (2010). Conceptualization and measurement of coping during adolescence: a review of literature. Journal of Nursing Scholarship, 42, 165-188.
- Gray, M. R. & Steinberg L. (1999). "Unpacking Authoritative Parenting: Reassessing a Multidimensional Construct". *Journal of Marriage and Family 61(3)*, 574–587.
- Greenglass, E., Burke, R.J., & Konarski, R. (1998). Components of burnout, resource and gender-related differences. Journal of Applied Social Psychology, 28, 1088-1106.
- Griffith, M. A., Dubow, E. F., & Ippolito, M. F. (2000). Developmental and cross-situational differences in adolescents' coping strategies. Journal of youth and adolescence, 29(2), 183-204.
- Hahn, S.E., 2006. "The effects of locus of control on daily exposure. Coping and reactivity to work interpersonal stressors: A diary study". Journal of Personality and Individual Differences, 29, 729-748.
- Hampel, P. & Petermann, F. (2006). Perceived stress, coping and adjustment in adolescents. Journal ofAdolescent Health, 38(4), 409-415. doi:10.1016/j.jadohealth.2005.02.014
- Hawbam, S. (2014). Successful Aging through the eyes of Manipuri elders. Indian *Journal of Health and Well-being.* 5(5), 610 - 613.

- Hills, P. & Argyle, M. (2002). The Oxford Happiness Questionnaire: a compact scale for the measurement of psychological well-being. Personality and Individual Differences, 33, 1073-1082.
- Hobfoll, S. E. & Vaux, A. (1993). Social support: social resources and social context. In L. Golberger & S. Breznitz (Eds.), *Theoretical and Clinical Aspects*. New York: Free Press.
- Holahan, C.J., Valentiner, D.P., & Moos, R.H. (1995). Parental support, coping strategies, and psychological adjustment: An integrative model with late adolescents. Journal of Youth Adolescence, 24, 633–648.
- Holahan, C. J., Valentiner, D. P., & Moos, R. H., (1995). Parental support, coping strategies, and psychological adjustment: An integrative model with late adolescents. Journal of Youth and Adolescence, 24(6), 633-648.
- Huebner, E.S. (2004). Research on assessment of life satisfaction of children and adolescents. Social Indicators Research, 66, 3-33.
- Halamandaris, K. F. & Power, K. G. (1999). Individual differences, social support and coping with the examination stress: A study of the psychosocial and academic adjustment of first year home students. Personality and Individual Differences, 26(4), 665-685. http://dx.doi.org/10.1016/S0191-8869(98)00172-X
- Jacinta B.-T. & Kristin A. M. (2006). "The Father-Child Relationship, Parenting Styles, and Adolescent Risk Behaviors in Intact Families." Journal of Family Issues, 27 (6), 850-881.
- Jeyens, W.H. (2005). The effects of Parental Involvement and Family structure on the academic achievement of adolescents. Marriage and Family Review, 37(3), 99-116.
- Kendler, K. S., Myers, J., & Prescott, C. A. (2005). Sex differences in the relationship between social support and risk for major depression: A longitudinal study of opposite-sex twin pairs. Am I Psychiatrist, 162, 250-256.
- Kessler, R. C., Price, R. H., & Wortman, C. B. (1985). Social factors in psychopathology: Stress, social support, and coping processes. Annual Review of Psychology, 36, 531-572.
- Lazarus, R. S., & Folkman, S. (1984). Stress, appraisal, and coping. New York: Springer.
- Linda, B. & Charles, R. (2004). Adolescent ego development: Relationship to family cohesion and Adaptability.
- Lyubmirsky, S., King, L., & Deiner, L. (2005), The benefits of frequent positive affect: does happiness lead to success? Psychology Bullietin, 131(6), 803-855.
- Lyubomirski S., Sheldon K. M., Schkade D. (2005). Pursuing happiness: the architecture of sustainable change. Review of General Psychology, 55, 95–107.
- Lyubomirsky, S., King, L., & Diener, E. (2005). The benefits of frequent positive affect: Does happiness lead to success? Psychological Bulletin, 131, 803–855.
- Mac Iver, D., & Epstein, J. (1993). Middle school research: not yet mature, but no longer a child. The Elementary School Journal, 93 (5). 519-533.
- Malik, S. and Saida (2013). "Gender differences in self-esteem and happiness among university students." *International Journal of Development and Sustainability*, 2 (1), 445-454.

- Meltzer, H., Gatward, R., Goodman, R., & Ford, T. (2000). Mental Health of Children and Adolescents in Great Britain. London: Stationery Office.
- Mirowsky, J. & Ross, C.E. (2002). "Selecting outcomes for the sociology of mental health: Issues of measurement and dimensionality." Journal of Health and Social Behavior, 43, 152-170.
- Nima, A.A., Archer, T., & Garcia, D. (2012). Adolescents' happiness-increasing strategies. temperament, and character: mediation models on subjective well-being. Health. 4,802–810.
- doi: 10.4236/health.2012.410124.
- O'Connor, R. C., Rasmussen, S. & Hawton, K. (2010). Predicting depression, anxiety and selfharm in adolescents: The role of perfectionism and acute life stress. Behaviour Research and Therapy, 48, 52-59.
- doi: 10.1016/j.brat.2009.09.008.
- Peters, M., Seeds, K., Goldstien, A., & Coleman, N. (2008). Parental Involvement in children's education 2007, Research Report. DCSFRRO34.
- Rajabimoghaddam, S., & Bidjari, A. F. (2011). The study of relation of happiness rate and styles of coping. Procedia-Social and Behavioral Sciences, 30, 2410-2415.
- Resnick, M. D., Bearman, P. S., Blum, R. W., Bauman, K. E., Harris, K. M., Jones, J., Tabor, J., Beuhring, T., Sieving, R. E., Shew, M., Ireland, M., Bearinger, L. H., and Udry, J. R. (1997). "Protecting Adolescents from Harm: Findings from the National Longitudinal Study on Adolescent Health." Journal of the American Medical Association 278 (10), 823-832.
- Robinson, M.S. & Garber, J. (1999). Social Support and psychopathology across the lifespan. In Cicchitti, D. & Cohen, D.J. (Eds.), Developmental Psychopathology, Vol.- 2: Risk Disorder and Adaptation (pp 162-209). New York, NY: Wiley.
- Roeser, R.W., Eccles, J.S., Sameroff, A.J. (2000). School as a context of early adolescents' academic and social-emotional development: A summary of research findings. The Elementary School Journal, 100, 443–471.
- Santacana, Maria Forns., Kirchner, Teresa, Abad, Judit, Amador, Juan Antonio. (2012). Differences between genders in coping: Different coping strategies or different stressors? Anuario de Psicología, 42, 5-18.
- Seiffe-Krenke, I. (1995). Stress, Coping, and Relationships in Adolescence. Hillsdale, NJ: Erlbaum.
- Seiffge-Krenke, I. (2006). Coping With relationship stressors: The impact of different working models of attachment and links to adaptation. Journal of Youth and Adolescence, 35(1), 25–39.
- doi:10.1007/s10964-005-9015-4.
- Sharir, D., Tanasescu, M., Turbow, D., & Maman, Y. (2007). Social support and quality of life among psychiatric patients in residential homes. International Journal of Psychosocial *Rehabilitation*, 11(1), 85-90.

- Sharma, N. & Gulati, J.K. (2014). Self-esteem & Social Support as predictors of Happiness among adolescents living in Socio-economics Hardship. *Asian Journal of Home Science*, 9(2), 402-408.
- Siahpush, M., Spittal, M., & Singh, G.K. (2008). Happiness and Life satisfaction prospectively predict self-rated Health, Physical Health and the presence of Limiting, Long-Term Health conditions. *American Journal of Health Promotion*, 23 (1), 18-26.
- Skinner EA, Wellborn JG. Coping during childhood and adolescence: A motivational perspective. InFeatherman, D., Lerner, R., & Perlmutter, M., (Eds.). *Life-Span Development and Behavior*. Hillsdale, NJ: Erlbaum; 1994. pp. 91–133.
- Skinner, E.A., Edge, K., Altman, J., & Sherwood, H. (2003). Searching for the structure of coping: a review and critique of category systems for classifying ways of coping. *Psychology Bulletin*. 129, 216–69
- Sood, S. & Gupta, R. (2014). Subjective Happiness as Mediator between Personal Growth Initiative and Life Satisfaction in Adolescents. *International Journal of Psychological Studies*, 6 (4), 89.
- Stone, A. A. & Neale, J. M. (1984). New measure of daily coping: Development and preliminary results. *Journal of Personality and Social Psychology*, 46, 892-906.
- Sylva, K., Melhuish, E., Sammons, P., Siraj-Blatchford, I., & Taggart, B. (2004). *Effective preschool education. Final Report, DfES.* London: Institute of Education.
- Tao, S., Dong, Q., Pratt, M. W., Hunsberger, B., &Pancer, S. M. (2000). Social support: Relations to coping and adjustment during the transition to university in the Peoples Republic of China. *Journal of Adolescent Research*, *5*(1), 123-144.
- Thompson, R. A., Flood, M.F., & Goodwin, R. (2006). Social support and developmental psychopathology. In Cicchetti, D. and Cohen, D.J. (Eds.), *Developmental Psychopathology. Vol. 3: Risk, Disorder and Adaptation* (2<sup>nd</sup> edition, pp. 1-37). Hoboken, NJ: Wiley.
- Tobin, D. L. (2000). *Coping strategies therapy for bulimia nervosa*. Washington, DC: American Psychological Association Press.
- Tugade, M.M., Fredrickson, B.L. (2004). Resilient individuals use positive emotions to bounce back from negative emotional experiences. *Journal of Personality and Social Psychology*, 86, 320–333.
- Turner, R.J., Brown, R.L. (2010). Social support and mental health. In: Scheid, T.L., Brown, T.N., (Eds.). *Handbook of the sociology of mental health: Social contexts, theories, and systems* (2nd ed., p. 200-212). New York, NY: Cambridge University Press.
- Vaidya, A. (2014). Happiness correlates of Personality among college students. *International Journal of Innovative Research and Development*, 3 (3), 328-334.

- Veenhoven, R. (2008). Effects of happiness on physical health and the consequences for preventive health care. Journal of Happiness Studies, 9, 449-469. DOI425-443,10.1007/s10902-006-9037-y
- Volling, B.L., McElwain, N. L., Notaro, P.C., & Herrera, C. (2002). Parents' emotional availability and infant emotional competence: Predictors of parent-infant attachment and emerging self-regulation. Journal of Family Psychology, 16, 447–465.
- Voydanoff, P. & Donnelly, B.W. (1999). Risk and protective factors for psychological adjustment and grades among adolescents. Journal of Family Issues, 20, 328–349.
- Wendy M. B. (2004). "Parent Involvement in Elementary School and Educational Attainment." Children and Youth Services Review, 26, 39–62.
- Wentzel, K. R. (1998). Social relationships and motivation in middle school: The role of parents, teachers, and peers. Journal of Educational Psychology. 90 (2), 202-209.
- Xiaojia, G., Conger, R.D., Frederick, O., Shanahan, M., & Glen, H. E. Jr. (1995). Mutual influences in parent and adolescent psychological distress. Developmental Psychology, *31(3)*, 406-419.
- Young, M.H., Miller, B.C., Norton, M.C., & Hill, E.J. (1995). The effect of parental supportive behaviors on life satisfaction of adolescent offspring. Journal of marriage and the Family, 57, 813-822.
- Zimet, G.D., Dahlem, N.W., Zimet, S.G. & Farley, G.K. (1988). The Multidimensional Scale of Perceived Social Support. Journal of Personality Assessment, 52, 30-41.