Predictors of adolescent students' psychological problems: The mediating role of paternal rejection in Turkish Cypriot sample

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Abstract

The purpose of the study is to investigate the mediating role of paternal rejection (hostility, neglect, undifferentiated rejection and control) on the association between maternal rejection and psychological problems (depression, anxiety, negative self, hostility and somatization) on adolescents. The sample was consist of 200 adolescents whose ranged in age from 15 to 18 years (M age 16.59 years, SD = 0.63 years) in Turkish Republic of Northern Cyprus (TRNC). The demographic information relating to the 68% (n=136) female and 32% (n=64) male sample was presented. The Parental Acceptance-Rejection Questionnaire and Brief Symptom Inventory were administered to the sample group. Perceived undifferentiated rejection from mother as a predictor of depression, anxiety, somatization and negative-self scores. Perceived warmth from father as a predictor of hostility. There was a negative relationship between warmth from father and hostility scores of adolescents'. In addition, warmth form father was a mediation effect on the perceived undifferentiated rejection from mother related to depression, anxiety and hostility.

Keywords: adolescents; mediating role; parental rejection; paternal rejection; psychological problems.

1. Introduction

Adolescence is known as a period of constant development and change. An individual moving from childhood to maturity is not only undergoing physical and social changes but also cognitive, emotional and spiritual changes at the same time (Karabekiroğlu, 2009). Along with the necessary acceleration and increase in areas of change, the number of individuals suffering from mental health problems increases in adolescence in comparison to childhood (Kim, 2003). Education systems consist of counselling for the problematic behaviours. In this line the researcher addressed to predictors of the adolescents' psychological problems.

Children all around the world need positive feedback (acceptance) from their figures of attachment (Rohner, 2004). The results of meta-analysis, evaluating the results of 43 studies in 15 different countries on 7563 test subjects, show that the interpretation of parental acceptance is universally linked to psychological adjustment (Khaleque&Rohner, 2002). The importance of parental acceptance on the psychological and social development of the child is widely accepted in parental warmth / affection research (Khaleque, 2013; Lila, Garcia & Garcia, 2007).

Parental acceptance–rejection theory (PARTheory) is fundamentally a theory which aims to explore and explain interpersonal relations, particularly the reasons for perceived acceptance – rejection during childhood, the possible effects of this on the behavioural, cognitive and emotional

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development and socialization of children and adults and the effects of these on their other relationships throughout their lives (Rohner, 1986; Rohner, Khaleque&Cournoyer, 2005). The PARTheory have five subscale. Warmth dimension is related to the type of bond experienced between parent and child. Parents use physical, verbal and symbolic behaviour to express their emotions (Kourkoutos&Erkman, 2011). On the other hand, the hostility and aggression describes feeling animosity and displaying aggressive behaviour. Indifference and neglect parents are behaving indifferently and showing negligence. Undifferentiated rejection is the other rejection and it's describe, the child's belief that the parent does not love them even though the parent is not cold, neglecting or aggressive (Rohner, 2004).

The adjustment and well-being of the child is related to their inter-personal acceptance – rejection experiences (Erkman&Rohner, 2006). Accepting and warm parents are more likely to have well-adjusted happy children (Cicchetti, 2010; Lamb, 2012; Rohner, 2004). As opposed to rejecting parents who are more likely to have children with a lower level of adjustment (Khaleque&Rohner, 2002; Rohner, 2004). It is widely accepted that the most important factor in mental health is perceived parental rejection (Khaleque&Rohner, 2002; Rohner&Britner, 2002). It has been expressed by parental acceptance–rejection theory research that perceived parental acceptance is positively significant for the psychological adjustment, behavioural functionality and positive worldview of children (Khaleque&Rohner, 2002). Rejection does not only damage the child's self-perception but it also leads to their feeling that their family relations are strained and that they are alienated from their own identity (Dwairy, 2010).

Many Theories draw our attention to significant relations between parent-child interactions or parental acceptance/rejection and children's adjustment such as depression, anxiety (Epkins& Heckler, 2011; Rapee, 2012) and social anxiety (Ollendick& Benoit, 2012). Dwairy (2010) reported that Bedouin and Jordanian parents were found to be the most rejecting families and Polish fathers were reported to be the least accepting parent. Similar results in acceptance and rejection were collected from the other countries. In addition, Rohner and Khaleque (2005) reported that there was a relationship between parental rejection and. depressive symptoms, anxiety, social withdrawal, externalizing behaviours, and delinquency.

2. Purpose

In the present study, we hypothesize that perceived rejection (hostility, neglect, undifferentiated rejection and control) is associated to depression, anxiety, somatization, hostility and negative self. Another hypothesize that perceived rejection form father is a mediation variable on the relationship between mother rejection and psychological problems of adolescents.

The purpose of this study was to examine the mediating effect of paternal rejection on the relationship between perceived maternal rejection and depression, anxiety, hostility, somatization and negative-self scores of the adolescents'. In this context, answers to the following questions were sought for the aim in this study:

(1)Were there any significant differences between origin and psychological problems of adolescents?

(2)Were there any significant differences between psychological problems and the socioeconomic statue of adolescents' family?

(3)Were there any significant relationships between maternal acceptance-rejection, paternal acceptance-rejection (and subscales) and psychological problems of adolescents?

(4)Did maternal and paternal rejection (and subscales) as predictors of psychological problems?

(5)Did paternal rejection mediate the relationship between maternal rejection (and subscales) and adolescents' psychological problems?

3. Method and material

3.1. Population and sample selection

Participants were high school students included from eight public high schools in Turkish Republic of Northern Cyprus (TRNC). Students who left fields empty or students whose mother, father or both were decreased were excluded from the group and their data was not included in the analysis, so the final number of students in the sample group was reduced to 200.Adolesents ranged in age from 15 to 18 years (M age 16.59 years, SD = 0.63 years).The demographic information relating to the 68% (n=136) female and 32% (n=64) male sample was presented.

3.2. Type of study

The relational scanning model was used in this study. The description of the present situation, the existence or degree of change between two, or more, variables in order to maternal acceptance-rejection, paternal acceptance-rejection, and psychological problems of the adolescents.

3.3. Data collection tools

3.3.1. Personal Information Form

Participants completed the form, where they reported their age, gender, origin, socio-economic statues of their parents and other demographic information.

3.3.2. Parental Acceptance – Rejection Questionnaire Child Form (Child PARQ/Control)

Parental acceptance – rejection questionnaire child form was developed to evaluate the level of parental rejection and parental control perceived by the child. The scale was originally developed as PARQ by Rohner (Rohner, 1986) and later took on its final version of the 73 item PARQ/ Control when the control scale was added. Parental rejection 1) Warmth (and its opposite, coldness, 2) Hostility, 3) Complacency and neglect, 4) Undifferentiated rejection is evaluated by PARQ and Control is evaluated by the 13 item Control Scale. The scale is evaluated as "Almost Never True" 1 point, "Rarely True" 2 points, "Sometimes True" 3 points and "Almost Always True" 4 points. The Warmth scale, Complacency and Neglect scales are evaluated in the opposite way. High scores show a low level of perceived warmth and maximum rejection. Meta-analysis research by Rohner and Britner (2002) found that PARQ/Control Child Form had an internal consistency of 0.89 for parental rejection and 0.71 for control.

PARQ was first applied in Turkish by Erdem and PARQ/Control was first applied by Erkman and Rohner (2006). According to the data collected from the children the internal consistency of the Mother Form was 0.91 for warmth, 0.87 for hostility, 0.86 for complacency, 0.81 for undifferentiated rejection and 0.74 for control. The total internal consistency for perception of mother was found to be 0.81. The internal consistency of the Father Form was found to be 0.94, 0.91, 0.86, 0.58, 0.76 for warmth, complacency, undifferentiated rejection and control respectively and the total internal consistency was found to be 0.85. The 73 item version of the PARQ/Control Child's Form was used in this study.

3.3.3. Brief Symptom Inventory (BSI)

SCL-90 is a tool which performs a general psychopathological evaluation. BSI developed by Degoratis (1992) is a short version of the conventional 90 item SCL-90 and the form can be completed in around 5-10 minutes. The BSI is a likert scale made up of 53 items. Each item is graded between 0-4 corresponding with answers "not at all" to "extremely". In the original scale the primary symptom dimensions include "somatization", "obsessive compulsive disorder", "interpersonal sensitivity", "depression", "anxiety", "hostility", "phobic anxiety", "paranoid

ideation" and "psychoticism".

The Turkish version of the BSI was created by Sahin and Durak in (1994). The primary symptom dimensions relevant to the Turkish population were placed in the following order; somatization, depression, anxiety, hostility and negative self.

In their 2002 research in relation to using their form with adolescents Sahin and co determined five factors comprised of depression (14 items), somatization (7 items), anxiety (17 items), negative self (9 items) and hostility (4 items). Their internal consistency for the primary symptom dimensions points were 0.88 for depression, 0.84 for anxiety, 0.74 for negative self, 0.70 for somatization, 0.73 for hostility and the coefficient for internal consistency of the total points of the scale was found to be 0.94.

3.4. Evaluation of data

In this study, the differences amongst origin and socioeconomic statues of the adolescents were calculated by Independent Sample T-Test and One Way ANOVA analysis. In addition, the relationships between maternal acceptance-rejection, paternal acceptance-rejection and psychological problems of adolescents were calculated by Pearson Product-Moment Correlation analysis, and Multiple regression was used to analysis of explained to predictors of psychological problems. In addition, at this study relational screening analysis used, and mediation effect of perceived paternal rejection was analysed using Baron and Kenny's (1986) mediation analysis method. The aim of that study is to predict the causality between dependent and independent variables using mediation variables analysis. To investigate the indirect effect amount of mediator variable which causes the mediation effect of independent variable above dependent variable in the relation between dependent and independent variables.

Mediation variable analysis mostly used at social sciences and medical researches, but also different disciplines use it as a research method (Montoya & Hayes, 2016). Baron and Kenny (1986) indicates that to analyse the effect of mediator variable 3 criteria have to be actualized:

1.   Independent variable have a significant effect on a mediator variable (way a).
2.   Mediator variable have a significant effect on an independent variable (way b).
3.   Independent variable have a significant effect on dependent variable (way c).

After all criteria actualized mediator variable and independent variable valued by regression analysis, the effect of independent variable on dependent variable should decrease or come to zero. To form an estimate of mediation variable (PROCESS) were used, it is an extra macro that is downloading to the Hayes's (2016) SPSS program. In this program mediation effect could be evaluated as: total effect, direct effect and indirect effect scores of mediation variable effect on dependent variable (Preacher & Hayes, 2008). Different studies used stepwise regression to evaluate effect among variables, this new macro makes it more useful. To evaluate the significance of an effect amount, different researchers suggest to use Sobel test and by this way to execute bootstrap credence interval (Reutter &Bigatti, 2014). In Sobel test, significance is defining with Z score coefficient, and this score have to be more than 1.93 and p value have to be significant (Fraziar, Tix& Baron, 2004). The vastness of effect is calculated by extraction direct effect score from total effect score. Therefore, it is important to see the bootstrap credence interval, lower limit and higher limit should be subzero or surzero (Preacher & Hayes, 2008). In model formation, Hayes, suggest to name ways in a such way: 'c way' from independent variable to dependent variable; 'c1 way' of independent variable through mediator variable to dependent variable; 'a way' from independent variable to mediator variable; 'b way' from mediator variable to dependent variable (Montoya & Hayes, 2016).

4. Results

The findings revealed (table 1) that although there was no significant difference in the somatization and hostility symptoms in the terms of origin. On the other hand, there was a significant difference in the depression, negative self and anxiety scores in the terms of origin $(F_{(2,197)}= 9.812, p<0.001; F_{(2,197)}=7.812, p<0.01; F_{(2,197)}= 5.970, p<0.01)$. In this respect, findings showed that adolescents who born in Turkey had more negative self, depression and anxiety scores when compared to scores of adolescents who born in TRNC.

Table 1
Differences of origin.

		Mean	F	p
Negative Self			7.812	0.001**
	TRNC	20.6525		
	TC	25.7600		
	Other	19.5556		
Depression			9.576	0.000***
	TRNC	23.7518		
	TC	30.8600		
	Other	23.2222		
Anxiety			5.970	0.003**
	TRNC	22.5035		
	TC	26.6800		
	Other	20.5556		
Somatization			1.918	0.150
	TRNC	11.9645		
	TC	12.8200		
	Other	9.6667		
Hostility			2.225	0.111
	TRNC	15.4113		
	TC	17.2200		
	Other	14.8889		

$p**<0.01; p***<0.001$

In order to see whether scores of somatization showed significant difference in socioeconomic statues of their parents, ANOVA was performed $(F_{(3,196)}= 4.508, p<0.01)$.The middle income adolescents had highest somatization scores than other incomes adolescents. In order to see which socioeconomic statues differed significantly, a post-hoc test was carried out. Tukey post hoc test released that adolescents who had low socioeconomic statues (2.95905 + 1.27567) showed low somatization symptoms than middle (4.33750 + 1.23726) or high (3.88859 + 1.31115) income adolescents. There was no significant difference between depression, anxiety, hostility and negative-self scores in the term of income $(F_{(3,196)}= 2.446, p>0.05; F_{(3,196)}= 2.281, p>0.05); F_{(3,196)}= 0.702, p>0.05; F_{(3,196)}= 2.174, p>0.05)$. (Table2)

Table 2
Differences of income.

		Mean	F	p
Negative Self			2.174	0.092
	Low	24.6250		
	Middle	23.5517		
	High	20.9000		
	Rather high	20.5217		
Depression			2.446	0.065
	Low	30.6875		
	Middle	26.8621		
	High	24.6250		
	Rather high	23.5217		
Anxiety			2.281	0.081
	Low	26.8750		
	Middle	24.7759		
	High	22.2875		
	Rather high	22.6522		
Hostility			0.702	0.552
	Low	17.1250		
	Middle	16.3103		
	High	15.3125		
	Rather high	15.7174		
Somatization			4.508	0.004**
Low	Middle	2.95905+ 1.27567		0.097
	High	4.33750 + 1.2316		0.003**
	Rather high	3.88859 + 1.31115		0.018*

p*<0.05; p**<0.01; p***<0.001

We examined the independent and specific relations of child-reported maternal and paternal warmth, hostility, neglect, undifferential rejection and behavioural control to each of adolescents' depression, anxiety, hostility, somatization, negative self and hostility symptoms. Multiple regression analyses were conducted.

Table 3

Relationships between psychological problems and perceived parental attitudes.

	1	2	3	4	5	6	7	8	9	10	11	12	13	14
Anxiety	-													
Depression	0.820**	-												
Hostility	0.725**	0.709**	-											
Somatization	0.667**	0.674**	0.532**	-										
Negative Self	0.824**	0.831**	0.707**	0.579**	-									
M-Warmth	-0.151*	-0.250**	-0.220**	-0.211**	-0.186**	-								
M-Hostility	0.339**	0.376**	0.356**	0.347**	0.338**	-0.529**	-							
M-Neglect	0.309**	0.380**	0.285**	0.349**	0.331**	-0.724**	0.721**	-						
M-Undifferentiated reject	0.405**	0.453**	0.381**	0.424**	0.429**	-0.471**	0.873**	0.747**	-					
M-Control	0.159*	0.089	0.148*	0.114	0.082	-0.060	0.304**	0.081	0.268**	-				
F-Warmth	-0.262**	-0.280**	-0.329**	-0.209**	-0.247**	0.492**	-0.265**	-0.405**	-0.250**	0.037	-			
F-Hostility	0.326**	0.265**	0.318**	0.266**	0.365**	-0.236**	0.513**	0.475**	0.520**	0.130	-0.472**	-		
F-Neglect	0.332**	0.343**	0.316**	0.294**	0.351**	-0.376**	0.433**	0.545**	0.460**	-0.015	-0.800**	0.651**	-	
F-Undifferentiated reject	0.345**	0.285**	0.351**	0.280**	0.355*	-0.273**	0.516**	0.539**	0.594**	0.051	-0.521**	0.873**	0.709**	-
F-Control	0.229**	0.112	0.140*	0.149*	0.115	0.053	0.221**	0.055	0.161*	0.603**	0.016	0.338	-0.013	0.213**

*p<0.05; **p<0.01; ***p<0.001

M-Hostility: perceived hostility from mother; M-Neglect: perceived neglect from mother; M-Undifferentiated reject: perceived undifferentiated rejection from mother; M-Control: perceived control from mother

F-Hostility: perceived hostility from father; F-Neglect: perceived neglect from father; F-Undifferentiated reject: perceived undifferentiated rejection from father; F-Control: perceived control from father

Table 4

Predictors of Psychological Problems.

Predictors	Depression				Anxiety				Hostility				Somatization				Negative Self			
	R^2	ΔR^2	F	β	R^2	ΔR^2	F	β	R^2	ΔR^2	F	β	R^2	ΔR^2	F	β	R^2	ΔR^2	F	β
All Variables	0.264	0.225	6.786***		0.242	0.202	6.022***		0.225	0.184	5.495***		0.218	0.177	5.278***		0.243	0.203	6.078***	
M-Warmth				0.057				0.128				0.055				0.029				0.025
M-Hostility				-0.158				-0.116				0.076				-0.180				-0.241
M-Neglect				0.057				0.040				-0.081				0.059				-0.024
M-Undi.				0.603***				0.460**				0.307				0.546**				0.591***
M-Control				-0.101				-0.044				0.036				-0.075				-0.064
F-Warmth				-0.177				-0.178				-0.365**				-0.061				-0.059
F-Hostility				0.012				-0.020				-0.016				0.026				0.242
F-Neglect				0.148				0.106				-0.151				0.163				0.157
F-Undi.				-0.244				-0.051				0.107				-0.179				-0.219
F-Control				0.157				0.221				0.040				0.174				0.079

*p<0.05; **p<.01; ***p<0.001

M-Hostility: perceived hostility from mother; M-Neglect: perceived neglect from mother; M-Undi. reject: perceived undifferentiated rejection from mother; M-Control: perceived control from mother

F-Hostility: perceived hostility from father; F-Neglect: perceived neglect from father; F-Undi. reject: perceived undifferentiated rejection from father; F-Control: perceived control from father

As shown Table 3, the correlations among adolescents' symptom and parental acceptance/rejection measures. The results as shown, neither mother- nor father-behavioural control was significantly related to adolescents' depression and negative-self scores. On the other hand, there was significant relations between perceived undifferentiated rejection from mother and adolescents' depression, anxiety, somatization, negative self and hostility score.

The present study was examined the predictors of depression, anxiety, somatization, hostility and negative self. A multiple regression analysis using maternal/paternal acceptance/rejection subscales as the independent variables and depression as the dependent variable was significant $R^2 = 0.264$, $F_{(10,189)} = 6.786$, $p = 0.000$. Maternal undifferentiated rejection significantly predicted somatization ($\beta = 0.546$, $p < 0.01$), negative self ($\beta = 0.591$, $p < 0.001$), depression ($\beta = 0.603$, $p < 0.001$) and anxiety ($\beta = 0.460$, $p < 0.01$).

As shown in Table 4, when adolescents perceived high undifferentiated rejection from mother, adolescents had high depression, somatization, negative self and anxiety scores. In addition, the perceived warmth from father as a predictor of adolescents' hostility. There was a negative relations between warmth form father and adolescents' hostility scores.

In Scheme 1, it is seen that, standardized regression coefficient for 'a way' is -.250 and significance level is .000; standardized regression coefficient for 'b way' is -.280 and significance level is .000; standardized regression coefficient for 'c way' is .453 and significance level is .000 was defined. Analysing all results of that study, it is seen that all three criteria of Baron and Kenny are realized.

Shape 1

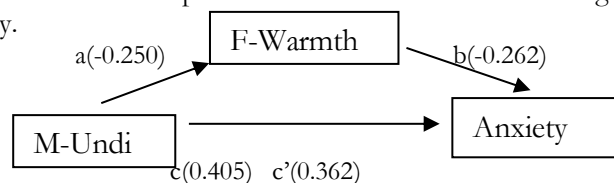Mediational role effect of perceived warmth form father among undifferentiated rejection from mother and depression.
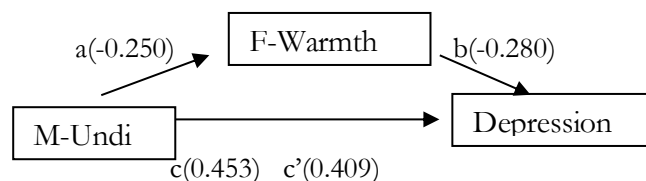
z=2.1443, p=.03

As the next step, in the aim to evaluate mediation variable effect, mediator variable was included into model. Evaluating 'c1 way' β value decreased from .453 to .409 (p= .000), and defined as significant.

In Scheme 2, it is seen that, standardized regression coefficient for 'a way' is -.250 and significance level is .000; standardized regression coefficient for 'b way' is -.262 and significance level is .000; standardized regression coefficient for 'c way' is .405 and significance level is .000 was defined. As the next step, in the aim to evaluate mediation variable effect, mediator variable was included into model. Evaluating 'c1 way' β value decreased from .405 to .362 (p= .000), and defined as significant.

Shape 2

Mediational role effect of perceived warmth form father among undifferentiated rejection from mother and anxiety.


z= 2.0626, p=.04

In Scheme 3, it is seen that, standardized regression coefficient for 'a way' is -.250 and significance level is .000; standardized regression coefficient for 'b way' is -.329 and significance level is .000; standardized regression coefficient for 'c way' is .381 and significance level is .000 was defined. As the next step, in the aim to evaluate mediation variable effect, mediator variable was included into model. Evaluating 'c1 way' β value decreased from .381 to .319 (p= .000), and defined as significant.

Shape 3

Mediational role effect of perceived warmth form father among undifferentiated rejection from mother and hostility.
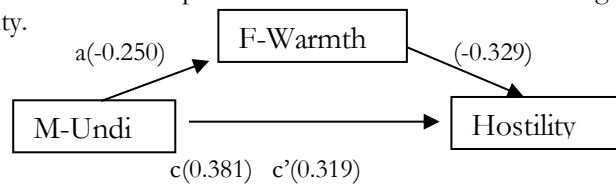
z= 2.5781, p=.01

To understand do these reduction were due to the effect of mediator variable, Sobel test were done. In Table 5, it is clear that direct effect score is decreased. Evaluating the total effect and direct effect, it is indicated that, the difference is 9% of indirect effect value for association between undifferentiated rejection and depression. The difference is % 7 of indirect effect value for anxiety and % 6 of indirect effect value for hostility. The presence and significance of indirect effect, was analysed with Bootstrap credence interval.

Table 5
Mediational Role of Perceived Warmth from Father.

Mediation Effect Relation of Perceived Warmth from Father	Total Effect	Direct Effect	Indirect Effect	Bootstrap Credence IntervalBoLLCI-BoULCI	Mediation Effect Type
M.Undi-depression	0,889	0,802	0,087	0,0206-0,2004	Partial
M.Undi-anxiety	0,609	0,544	0,065	0,0134-0,0201	Partial
M.Undi-hostility	0,390	0,326	0,064	0,0212-0,1386	Partial

The analysis of the results, show that lower and higher limits are surzero. According to it could be postulated, that perceived warmth from father have a partial mediation effect on perceived undifferentiated rejection from mother and depression, anxiety and hostility.

In addition, no significant result was defined, Z score was indicated lower than 1.96. According to that, it could be proposed, that perceived warmth from father have no mediation role on association between perceived undifferentiated rejection from mother and negative-self score (z=1,8789, p>.05). As in other subscale results, no any significant correlations were existed among perceived rejection subscales from mother and psychological problems.

5. Discussion

Adolescence is known as a period of constant development and change. Along with the necessary acceleration and increase in areas of change, the number of individuals suffering from mental health problems increases in adolescence in comparison to childhood (Kim, 2003). Mental health problems were explained many variables in many studies. The study focus on the parental relationship, origin and socioeconomic levels effects on the psychological problems. Accordingly, several studies related that a significant relation between mental health and immigration. In addition, Turkish immigrants had high scores of depression and anxiety disorders than the prevalence do the background population (Balkir&Barnow, 2016). In the present study, there was a significant difference between origin and psychological problems. Adolescents whose come from Turkey had more negative self, depression and anxiety scores than adolescents whose live in North Cyprus. The reason showed that immigration had an effect on the adolescents' problems. In addition, the results showed that the socioeconomic levels had an effect on somatization scores of adolescents'. The middle income adolescents had highest somatization scores than other incomes adolescents. It was released that adolescents who had low socioeconomic statues showed low somatization symptoms than middle or high income adolescents. There was no significant difference between depression, anxiety, hostility and negative-self scores in the term of income.

PARTheory defines warmth as the quality of the bond of love between parent and child. Parental warmth has two dimensions; acceptance is at one end and rejection at the other (Rohner, Khaleque&Cournoyer, 2005). This study has shown that a significant relationship was occur between adolescents' psychological problems and perceived rejection traits from their parents. PARTheory accepts the warmth dimension as the quality of the relationship between parent and child (Rohner, Khaleque&Cournoyer, 2005). Love and warmth are important requirements for a child (Ansari, 2002). Parental rejection is accepted as the most important factor relating to mental health (Khaleque&Rohner, 2002). Mothers were perceived to be more accepting compared to fathers. The importance of parental acceptance on the psychological and social development of the child is widely accepted throughout research on parental warmth (Lila, Garcia & Garcia, 2007). Lerner (2002) states that positive parent-child interaction (warm and close relationships, where there is no animosity) is related to the psychological and social health of the adolescent. In this study found relationship between perceived parental rejection and psychological problems. When we evaluate literature there is a similar point of view of the evidence collected. Perceived undifferentiated rejection from mother as a predictor of depression, anxiety, somatization and negative-self scores. According to Dwairy (2010), perceived control from the father was related to psychological problems in western culture. In another study reported that a significant relationship between depression and perceived control from the mother (Park, 2009). However, the perceived control from father was not found to be significant predictor of any psychological problem in this study. This can be explained by intercultural differences. In addition, perceived hostility and neglect from parents was not found to be significant predictor of these problems. Perceived warmth from father as a predictor of hostility. There was a negative relationship between warmth from father and hostility scores of adolescents'. A relationship between various fundamental personality traits and various coping strategies of parental rejection and psychological complaints, especially depression and anxiety was observed (Işık, 2010). It was observed that parental acceptance explains 26% of differences in psychological adjustment of children (Kim &Rohner, 2002).

6. Conclusions and recommendations

When comparing the results to literary evidence, although there were some similarities, the differences can be explained by cultural characteristics. The adolescent's adjustment and health were related to their experiences of acceptance and rejection in their interpersonal relationships. This study emphasizes the importance of the family relations in adolescence in terms of psychological health.

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