



Comparison of Interpersonal Problems in Neglected and Normally-Raised Adolescents

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Abstract

This causal-comparative post-event survey compared interpersonal problems (IPs) among neglected and normally-raised (NR) adolescents. The statistical population consisted of 75 neglected "12-18-year-old" male and female adolescents living in charity centers "Parto Mehr-e Yazdan" (for boys) and "Shekoofeh" (for girls) in Zanjan (Iran) in 2017. In parallel, the study investigated 75 NR adolescents studying in the schools of "Isar" (for girls) and "Nabovvat" (for boys) in this city in the same academic year. All the participants (n: 150) were selected by convenience and targeted sampling methods. Data were first collected using the Inventory of Interpersonal Problems-32 (IIP-32) and then analyzed using "independent t-test" and "multivariate analysis of variance (MANOVA)". IPs and associated components (e.g., assertiveness and agreeableness, aggression, and dependence) were much more noticeable in neglected adolescents than in their NR counterparts. However, there was no significant difference between the two groups for components of "support and participation", "openness to experiences", and "conscientiousness".

Keywords: Interpersonal problems, Neglect, Assertiveness, Agreeableness, Aggression

DOI Number: 10.48047/nq.2024.22.2.NQ24031

NeuroQuantology 2024; 22(2):296-303

Introduction

Adolescents constitute a significant portion of the global population such that they account, for example, for nearly 50% of the total population in developing nations. The health of children and adolescents is a key issue in every society, and reflecting on their mental health allows them to be mentally and physically more vigorous and more efficiently serve their social roles (Omid Rad and Hekmat, 2016). This age period comes with meaningful impacts on the lives of individuals and society, as this phase of life markedly underpins the behavior in the adult years, and notably, most mental health issues are initiated in adolescence and early adulthood (Shakiba and Ziai, 2011). As a key influential factor, the family plays a unique role in the upbringing and rearing of children at different ages, particularly during childhood and adolescence (Lewis, Maltby & Day, 2005, quoted by Bavaghar Zaami, 2012). As professionally postulated, a heartfelt and kindly family space that is decorated with good and sincere relationships shared by family members usually

rear healthy individuals possessing a positive personality, whilst no support from the family or living in a collapsed family triggers sorts of deviations in adolescence (Kapanee & Kiran, 2007).

Neglect is a perilous family factor for adolescents, where neglected adolescents will strongly suffer from deprivations, a sense of failure, and even mental grievances and traumas (Mohebbi et al., 2011). When comparing their lives with those of normally-raised (NS) counterparts, neglected children and adolescents find themselves amidst irrevocable catastrophes that underpin aggression and incompatibility. Again, since adolescence is a key phase of life that largely contributes to constructing and featuring the personality, behavioral issues in this period might be manifested as permanent characteristics in the latter life stages. Thus, perceiving the factors that are effective in getting these problems and behavioral abnormalities of adolescents addressed and planning to correct and promote these factors will be key steps in preventing mental disorders in adulthood (Karimi, 2014).

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Interpersonal problems (IPs) are factors that are initiated and influenced by living in an orphanage and/or when the children (teens) cannot be cared for (by biological parents) (Mburugu, 2012). By definition, IPs refer to problems in relationships and cooperation with others, and not taking effective problem-solving plans to efficiently address these life issues (Dimeff & Koerner, 2007). In their study and by the precise analysis of problems noted in clinical interviews, Horowitz et al. (1988) (quoted by Fath et al., 2013) recognized and summarized some IPs like issues with decisiveness, agreeableness, submission, intimacy, responsibility, and self-control. In a 2012 study in Kenya, Mburugo found that neglected students living in institutions develop more problems in interpersonal relationships than their NR counterparts. IPs account for a large portion of problems dealt with in psychotherapy sessions (Horowitz, 2004; quoted by Fath et al., 2013). These problems happen due to experiences related to others and act as a major source of distress (Lawson & Brossart, 2009). IPs arise due to a plethora of emotional, cognitive, personality, and communicative variables. When clients start psychotherapy, they frequently point out the IPs they have seen in themselves such as difficulties in getting close to others and with assertiveness, problems caused by excessive competitiveness, etc. (Horowitz, L. M., Dryer, D. C., & Krasnoperova, 1997; quoted by Fath et al., 2013).

IPs are inevitable events and the strategy adopted to manage and fix them culminates in various consequences. For example, improper management elevates interpersonal stress, whilst proper management ensures maintaining interpersonal relationships and promotes psychological well-being. Constant exposure to IPs predisposes the person to anger, hostility, and avoidance of social interactions and affects his or her ability to build supportive and close relationships (Tse & Yip, 2009). The person's failure to realize his/her interpersonal goals culminates in psychological distress and behavioral dysfunction. Since individuals have specific interpersonal goals, they may experience different types of IPs and each IP will accelerate the creation of non-adaptive behaviors in the person (Horowitz, 2004, quoted by Fath et al., 2013). IPs are issues that are perceived in relation to others and cause mental disturbance or are associated with such discomforts (or mental disturbances) (Horowitz et al., 1988, quoted by

Fath et al., 2013). Overall, IPs can be assessed in terms of various aspects such as assertiveness, submission, responsibility, self-control, and agreeableness.

Assertiveness is the power to speak up for yourself and to say no to the requests of others if unwilling to meet them. The concept of assertiveness has been expanded in recent decades and nowadays it covers showing interpersonal competencies (when exposed to conflicts) and being able to maintain relationships (with others) (Bekker et al., 2008). Dinçyürek et al. (2012) defined assertiveness as confidence, self-displaying effectively, acting effectively, safe behavior, and confident assertiveness. Assertiveness is a pattern of interpersonal relationships and is about defending their rights while respecting (i.e., not denying) the rights of others. Assertiveness is, in turn, assertive (but healthy) behaviors and falls in the middle of a continuum in which aggression is on one extreme and passivity (shyness) is on the other. Assertiveness is not about doing anything or whatever we want but is about ensuring equality. This viewpoint allows for building bonds such as trust, warmth, intimacy, and love between people for self-expression (Volten-Akar, 2003; quoted by Dinçyürek et al., 2012). Indecisiveness (lack of decisiveness) is an IP that manifests in social situations and work, family, and collective interactions and provokes issues and mental disorders like aggression, depression, and inferiority (Faghirpoor, 2018).

People exhibit tailored traits underneath their personalities allowing them to define themselves as a unique individual. Personality traits grow from birth under specific cultural and social spaces. Most individuals develop various personality traits, but each person is labeled with a certain personality element. It is typical to see different personality traits organized as they collectively determine how a person responds to the surrounding world. For example, assertiveness allows the person to be frank in all interactions of life, to be courageous and unafraid, to exhibit leadership qualities, and to show willingness to be a leader and take the lead (of things). Contrarily, unassertive people fear to express their opinions, are fearful to meet others and dispute with them, are obedient, behave as others want, and hesitate to express their opposition to others' opinions (Khohkar, 2007, quoted by Hedayati, 2012).

Manikandan and Subramanian (2012) consider

submission or passive behavior to be shyness. Submissive individuals think that they must never oppose anyone and that they shall accept others as dominant people and ponder any disapproval as a sign of their misbehavior. Uncertainty, worry, inability, lack of authority, anxiety, and fear are the main characteristics of submissive behavior. Submissiveness can happen for many reasons like dominance, love, or anxiety. Contrarily, assertiveness defines the level of assertiveness, strength, efficacy, and self-confidence in the individual, where all these factors determine the person's strength (Hareli et al., 2009).

Responsibility is a concept that forces people to sturdily follow their goals, build a proper link with others, and live in a consistent and cooperative community, and thereby comes with a huge impact on the lives of individuals (Bierhoff, 2008). Responsibility is defined as being liable to someone or something and is equivalent to professional ethics, as an ethical person exhibits two characteristic traits: 1) "responsibility and being accountable to it, and 2) predictability. Overall, enhanced responsibility and predictability make the person to behave more ethically. According to Rafatian (2010), "responsibility is the ability for accepting a work, being liable to it, and implement the work (task) requested from someone, and the person has the right to accept or reject it, and it appears in the correct process of human development".

Self-control is the person's capacity to overcome and prevent his/her intolerable and unwanted impulses and to manage his/her behaviors, thoughts, and emotions (Tangney et al., 2004, quoted by Zarei et al., 2017). It is an accessible inner power to block, reject, or alter responses that are influenced by ethical beliefs, social aspects, level of religiosity of parents, individual's participation in activities, and religious customs (Wikström & Treiber, 2007). Again, self-control may be the result of psychological processes, certain habits, learning, or situational pressure (Baumeister & Vonasch, 2015). Research shows that self-control (as a social skill) can determine the rate of success in life and is significantly and positively correlated with mental health, proper expression of needs and feelings, positive interpersonal relationships, psychological adjustment, advancement in homework, academic performance, and well-being (Tangney et al., 2004, quoted by Zarei et al., 2017).

Agreeableness is an advantage over loneliness (Chicke & bouss, 1981; quoted by Fath et al.,

2012). In their study, Chicke and Bouss found that shyness is the same as low agreeableness. They regarded shyness to be a perceived tension in the presence of others, which is best characterized by mental anxiety and avoidance of social behavior (Fath et al., 2012). An uplift in the number of those who can difficulty communicate with others and are afraid of social encounters and shyness, know nothing about what to say and how to behave in the crowd, develop a sense of inability to talk with people and fail to cooperate with them, and are unable to make decisions for everyday issues all have intensified the spread of anxiety, depression, and social isolation. All these cause social rejection and result in a repeated vicious cycle. Currently, the growth and persistence of shyness are explained by some cognitive models that concentrate on the role of cognitions and maladaptive responses in calling this experience (Koydemir & Demir, 2008). Theoretically, these people demonstrate a unique pattern of cognition that functions to maintain the level of anxiety and inhibited behavior and suppose others to be extremely evaluative and critical. It has been seen that harsh, irrational, and absolute thinking patterns in interpersonal relationships will disrupt interactions. Neglected children and adolescents are the unpleasant reality of society and they are deprived of the love and education of their parents. Such deprivation exerts multiple negative impacts on these groups, as in each step of growth and personality formation, the person desires some needs like belonging, admiration, and affection, whilst neglected children and adolescents find these needs unmet and thereby grieve from predicaments and harms caused by a weak family strength that make them absolute victims (Ahmadi, 2011). Studying multiple dimensions of this problem and its associated issues and negative outcomes can efficiently reduce concerns of neglected children and adolescents. Thus, this research evaluates the consequences of neglect in terms of IPs.

Research methodology

This causal-comparative post-event survey enrolled a statistical population consisting of 75 neglected "12-18-year-old" male and female adolescents living in charity centers "Parto Mehr-e Yazdan" (for boys) and "Shekoofeh" (for girls) in Zanzan (Iran) in 2017. In parallel, the study evaluated 75 NR adolescents studying in the schools of "Isar" (for girls) and "Nabovvat" (for boys) in this city in the same academic year.



After obtaining the required permits from the Welfare Organization of Zanjan province, 75 adolescents (30 girls and 45 boys) were selected through the convenience sampling method from charity centers "Parto Mehr-e Yazdan" (for boys) and "Shekoofeh" (for girls) in Zanjan. Similarly, after obtaining the required permits from the Department of Education of Zanjan Province, 75 NR adolescents (28 girls and 47 boys) were chosen through the convenience sampling method from the schools of "Isar" (for girls) and "Nabovvat" (for boys) in this city in the same academic year. Ultimately, the two groups were matched for age and gender dimensions. Inclusion criteria were 1) falling in the age range of 14 to 18 years, 2) studying at high schools, 3) and being an adolescent living in boarding welfare centers (for the neglected group).

Research tools

Inventory of Interpersonal Problems-32 (IIP-32)

IIP-32 was designed by Barkham et al. in 1996. In an early study in 1994 by Barkham et al., six items were found for this inventory after performing exploratory factor analysis (EFA). The 36-item form of IIP (IIP-32) is applicable to both patients and normal individuals living in society.

These items are scored based on a five-point Likert scale from zero (at all) to five (intensely). In a 2013 study by Fath et al., the reliability of this inventory was assessed using Cronbach's alfa and Bisection Method. In their study, the α value for assertiveness and agreeableness, openness to experiences, conscientiousness, aggression, support and participation, and dependency were 0.80, 0.70, 0.61, 0.88, 0.77, and 0.61, respectively, and a total value of α for this inventory was 0.83 (n: 384). A significantly positive correlation between IPs and emotional dyslexia implies the convergent validity of IIP-32.

Data were analyzed in SPSS using descriptive statistics (mean \pm SD) and inferential statistics (MANOVA).

Findings

The values (mean \pm SD) for the study variables for participants are given in Table 1.

Variable/group	Neglected adolescents		NR adolescents	
	Mean	SD	Mean	SD
Suicidal thoughts	13.57	5.53	12.66	4.36
Assertiveness and agreeableness	11.73	3.87	9.44	3.51

Openness to experiences	13.38	6.64	12.06	6.09
Conscientiousness	11.18	5.17	10.82	4.82
Aggression	13.36	7.01	10.61	5.52
Support and participation	12.42	5.71	12.28	6.17
Dependency	14.24	6.37	11.30	4.97
IPs (total score)	76.44	12.93	66.53	10.69

The normality of the scores of the dependent variables was studied using the Kolmogorov-Smirnov (KS) test, and the results are given in Table 2.

Variable	Group	Absolute KS value	Sign.
Assertiveness and agreeableness	Neglected	0.09	0.08
	NR	0.07	0.20
Openness to experiences	Neglected	0.06	0.20
	NR	0.08	0.20
Conscientiousness	Neglected	0.07	0.20
	NR	0.09	0.20
Aggression	Neglected	0.11	0.05
	NR	0.08	0.20
Support and participation	Neglected	0.08	0.20
	NR	0.09	0.20
Dependency	Neglected	0.10	0.05
	NR	0.07	0.20
IPs (total score)	Neglected	0.08	0.20
	NR	0.10	0.05

According to Table 2, the hypothesis of normal distribution of scores of components of IPs in the study has been met, as the values obtained are not significant at $p < 0.05$.

Box's M test	DoF 1	DoF 2	F	Sign.
22.30	21	80562.87	1.01	0.43

As given in Table 3, the hypothesis of homogeneity of variance/covariance matrices in scores of components of IPs has been met ($p < 0.05$; $F = 1.01$; $\text{Box's } M = 22.30$)

Levene's test				
Variable	DoF	DoF	F	Sign.



	1	2		
Assertiveness and agreeableness	1	148	0.70	0.40
Openness to experiences	1	148	1.02	0.31
Conscientiousness	1	148	1.03	0.31
Aggression	1	148	3.32	0.07
Support and participation	1	148	0.68	0.40
Dependency	1	148	3.48	0.06

According to Table 4, the assumption of homogeneity of variances has been met, as the F values obtained for the components of IPs are not significant at $p < 0.05$.

Table 5. The independent t-test results for the difference in the mean (total) score of IPs in the study groups

Variable	Equity of variances		t-test		
	F	p-value	t	DoF	Sig.
IPs	3.55	0.06	5.11	148	0.0001

According to Table 5, the t-test results show that the mean values of IPs among neglected adolescents are significantly higher than those among NR adolescents.

Table 6. MANOVA results for the variable's main effect on components of IPs in the study groups

Variable	Test	Value	F	Hypothesis DoF	Error DoF	Sig.
Group	Pillai's Trace- Bartlett's Test of Sphericity	0.21	6.40	6	143	0.0001
	Wilk's Lambda	0.78	6.40	6	143	0.0001
	Hotelling's Trace	0.26	6.40	6	143	0.0001
	Roy's Largest Root	0.26	6.40	6	143	0.0001

As given in Table 6, Wilk's Lambda values show a significant effect of the group on components of IPs ($p < 0.05$; $F = 6.40$; Wilks' lambda = 0.78). This test allowed the usability of MANOVA.

among neglected adolescents than those among NR adolescents. However, there was no significant difference between the two groups in terms of the mean values for IP components of "support and participation" ($p = 0.88$; $F = 0.02$), "openness to experiences" ($p = 0.20$; $F = 1.60$), and "conscientiousness" ($p = 0.66$; $F = 0.19$).

Table 7. MANOVA results for components of IPs in the study groups

Dependent variable	Mean square	D of	Sum of squares (SS)	F	Sign.
Assertiveness and agreeableness	197.22	1	197.22	14.41	0.0001
Openness to experiences	65.34	1	65.34	1.60	0.20
Conscientiousness	4.86	1	4.86	0.19	0.66
Aggression	305.30	1	305.30	7.68	0.006
Support and participation	0.80	1	0.80	0.02	0.88
Dependency	322.66	1	322.66	9.85	0.001

According to Table 7, MANOVA results showed that the mean values of components of IPs {assertiveness and agreeableness ($p = 0.0001$; $F = 14.41$); aggression ($p = 0.006$; $F = 7.68$); dependency ($p = 0.001$; $F = 11.37$)} are higher

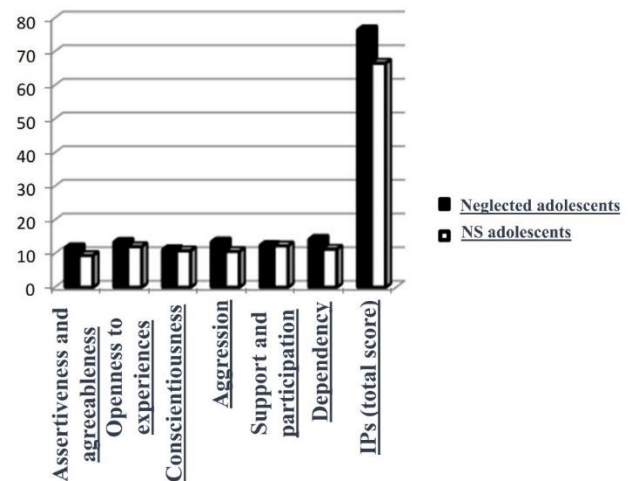


Figure 1. Comparison of the mean scores of IPs

Conclusion

According to the results, IPs and associated components such as "assertiveness and agreeableness", "aggression" and "dependency" are more intense in neglected adolescents than those in NR adolescents. However, there was no



significant difference between the two groups in terms of IP components of “support and participation”, “openness to experiences”, and “conscientiousness”. These findings agree with those reported by Kaur et al. (2018), Vinnakota and Kaur (2018), Rahman et al. (2012), Voriia et al. (1998), Hesar Sorkhi et al. (2016), and Moslehi (1994).

To further clarify these findings, it can be said that neglected children have lived in families with many problems such as addiction, mental illnesses of parents, having their parents in jail, poverty, rejection, etc., before living in care centers. Some of these children have experienced severe abuse and violence such that these issues have permanently negative mental and physical impacts on these groups. Experiencing such abuses and violence will exert negative outcomes during adolescence and adulthood and manifest into aggressive behaviors in neglected adolescents. Contrarily, NR adolescents living in healthy and warm families possess a stable personality that is not evident in those neglected counterparts who live in crowded spaces. Neglected adolescents are not eager to live in such spaces. Thus, they find no way to show themselves and express their desires and are incapable of articulating their opinions. Again, they have lower self-esteem than those NR adolescents who lived in normal families. Thus, living in care centers and having low self-esteem diminish assertiveness in neglected adolescents. Living in care centers provides no sufficient opportunities for children and adolescents to learn more and promote their social skills that are mostly obtained through experience and education. As a result of this, these adolescents are less adaptable to others (Soleymanifar, 2009). Thus, poor social skills make these adolescents difficulty establishing effective connections with others.

A limited sample size in this study restricts generalizing the results. The plan of this study further imposes some restrictions in the interpretation of data and casual documents of the study variables, which need to be reflected. To decline IPs among neglected adolescents, it is advised to furnish care and education programs with plans to empower these adolescents in managing aggression and building effective connections with others.

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