THE RELATIONSHIP BETWEEN PERCEIVED AUTHORITARIAN PARENTING STYLE AND OBSESSIVE-COMPULSIVE PERSONALITY DISORDER SYMPTOMS AMONG UNIVERSITY STUDENTS: THE MEDIATING EFFECT OF TYPE-D PERSONALITY AND RESILIENCE

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by

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<tr>
<td>APA</td>
<td>American Psychiatric Association</td>
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<tr>
<td>APS</td>
<td>Authoritarian parenting style</td>
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<tr>
<td>CD-RISC-25</td>
<td>Connor-Davidson Resilience Scale</td>
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<td>DS14</td>
<td>Type D Scale</td>
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<tr>
<td>DSM</td>
<td>Diagnostic and Statistical Manual</td>
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<td>FFM</td>
<td>Five Factor Models</td>
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<tr>
<td>FFOCI</td>
<td>Five Factor Obsessive Compulsive Inventory</td>
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<tr>
<td>ICD-10</td>
<td>International Classification of Diseases</td>
</tr>
<tr>
<td>NA</td>
<td>Negative affectivity</td>
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<tr>
<td>OCPD</td>
<td>Obsessive Compulsive Personality Disorder</td>
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<tr>
<td>PAPS</td>
<td>Perceived Authoritarian parenting style</td>
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<td>PAQ</td>
<td>Parent Authority Questionnaire</td>
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<td>PD</td>
<td>Personality Disorder</td>
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<td>SI</td>
<td>Social Inhibition</td>
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<td>TDP</td>
<td>Type D – Personality</td>
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HUBUNGAN DI ANTARA PENERIMAAN GAYA KEIBUBAPAAN AUTORITARIAN DAN SIMPTOM KECELARUAN PERSONALITI OBSESSIF-KOMPULSIF DALAM KALANGAN PELAJAR UNIVERSITI: KESAN PERANTARA PERSONALITI JENIS D DAN RESILIENSI

ABSTRAK

Kajian ini bertujuan untuk mengenalpasti kesan pengantara dari personaliti Jenis D dan resiliensi terhadap Gaya Keibubapaan Autoritarian (PAPS) dan simptom Personaliti Obsessif-Kompulsif (OCPD) dalam kalangan pelajar ijazah pertama di sebuah universiti di Pulau Pinang, Malaysia. Satu kajian telah dijalankan dalam kalangan 122 pelajar ijazah pertama pada tahun akademik 2016, yang mana para peserta telah pohon untuk melengkapkan soal selidik yang terdiri daripada Parental Authority Questionnaire (PAQ), Type–D Personality scale (DS14), Five-Factor Obsessive Compulsive Inventory (FFOCI), and Connor–Davidson Resilience Scale (CD-RISC-25). Kajian ini adalah kajian berbentuk kuantitatif kerana matlamat utamanya ialah untuk mengkaji hubungan antara pembolehubah, dan bukannya secara mendalam tentang fenomena ini. Ujian validiti, kebolehpercayaan, dan hipotesis telah dijalankan dengan menggunakan PLS-SEM. Keputusan kajian menunjukkan bahawa PAPS memberikan kesan yang signifikan terhadap OCPD, TDP, dan resiliensi. Kesan pengantaraan yang signifikan pula telah ditunjukkan oleh TDP, manakala resiliensi tidak menunjukkan sebarang kesan pengantaraan kepada hubungan PAPS dan OCPD. Keputusan kajian menunjukkan kewujudan TDP dalam kalangan responden memberi kesan pengantaraan antara PAPS dan OCPD, manakala resiliensi tidak memiliki kesan pengantara yang sama. Implikasi keputusan dan cadangan kajian lanjutan dibincangkan dalam bahagian akhir tesis ini.
THE RELATIONSHIP BETWEEN PERCEIVED AUTHORITARIAN PARENTING STYLE AND OBSESSIVE-COMPULSIVE PERSONALITY DISORDER SYMPTOMS AMONG UNIVERSITY STUDENTS: THE MEDIATING EFFECT OF TYPE-D PERSONALITY AND RESILIENCE

ABSTRACT

This study aims to investigate the occurrence of mediating effect of Type-D personality (TDP) and resilience on the effect of perceived authoritarian parenting style (PAPS) on obsessive-compulsive personality disorders (OCPD) among undergraduate students in a university in Penang, Malaysia. A survey was conducted among 122 undergraduate students in academic year 2016, where participants were asked to complete a set of questionnaire that consisted of Parental Authority Questionnaire (PAQ), Type–D Personality scale (DS14), Five-Factor Obsessive Compulsive Inventory (FFOCI), and Connor–Davidson Resilience Scale (CD-RISC-25). Quantitative approach was chosen because interrelationship among variables is the overarching aim of this study instead of the depth of the phenomenon. Tests of validity, reliability, and hypotheses were conducted by using PLS-SEM. Significant influence of PAPS have discovered on OCPD, TDP, and resilience. Mediation effect was indicated by TDP, while resilience did not show any mediation effect on the relationship between PAPS and OCPD. The results indicated that the existence of TDP among participants mediates the effect of their PAPS on their OCPD, while their resilience did not mediate the same effect. Implications of the results and recommendations for further research are discussed.
CHAPTER ONE

INTRODUCTION

Studies in on core personality characteristics are imperative because these play a major role in studies on the individual’s behaviour, which include gene function, brain biochemical activity, and physiological reactivity (Pervin & Cervone, 2009; Condén, 2014). Through a dynamic and complex interplay among core personality characteristics, cultural context, social environment, life experiences from infancy through late adolescence, and one’s family can strengthen or weaken a person’s traits (Barrick & Mount, 1991; Baumrind, 1991; Pervin, 2003), that is possible to be affected by imposing physical punishments or ignoring children his/her demands which may affect their development and cause behavioural disorders that may lead to unwanted damaging effects on their growth, thereby resulting in misbehaviour problems (Baumrind, 1991; Miller, 2010).

Parenting pattern or style is categorized into two dimensions: responsiveness and demanding (Baumrind, 1967). Consequently, these two dimensions led to three parenting styles as follows: authoritative parenting style, which has high responsiveness and high demand, the authoritarian parenting style (APS), which has low responsiveness and high demand, and the permissive parenting style, which has high responsiveness and low demand. It has been proven that the APS was proven to be directly related to children’s misbehaviour. also, has a low level of admission and close ties, a high level of mandatory control and a low level of giving independence (Baumrind, 1991; Moradian et al., 2014; Care, 2015).
Therefore, APS adversely affects children’s individual personalities and qualities, which consequently affect their lives well into adulthood (Alizadeh, 2011). Furthermore, the negative influences of APS on children also include the development of a group of personality disorders negatively affecting school achievement, negative relationship with creativity, sociability-competence, peer acceptance and school adjustment, while promoting aggression and negative perfectionism (Cicchetti & Crick, 2000; Pong et al., 2014; Mehrinejada et al., 2015; Newman et al., 2015).

The negative perfectionism is one of the main characteristics of individuals with obsessive-compulsive personality disorder (OCPD) that occurs during late adolescence or early adulthood (Cicchetti & Crick, 2000; Hendriksen, 2015). Additionally, properties such as excessive devotion to work that impairs social and family activities, excessive fixation with lists, minor details, perfectionism that interferes with finishing tasks, rigid following of moral and ethical codes, unwillingness to assign tasks unless others perform exactly as asked, lack of generosity; extreme frugality without reason, hoarding behaviours (Noppen, 2010; Hagen, 2016).

Apart from the aforementioned OCPD, another issue related to the APS was discovered along the way with the passage of time, which is called Type D- personality (TDP) or distressed personality which lead the individuals to show resistance towards rehabilitation and wallow in depression and doubt, thereby leading to loss of power as well as the tendency to experience increased negative emotions across time and situations (negative affectivity) and they do not share these emotions with others.
because of disapproval or fear of rejection (social inhibition) (Denollet, 2005; Geuensa et al., 2015; Wu et al., 2015).

Cases of TDP have been reported in many countries, especially among cardiovascular patients (Denollet et al., 1996; Pedersen & Denollet, 2003; Grande et al., 2004). Nevertheless, further studies discovered that individuals with significant level of resilience might develop opposite personality factors when compared to individuals with OCPD and TDP. For example, people with OCPD and TDP tend to be less confident, socially inhibited and inflexible, while people with higher level of resilience believe more in themselves, possess more significant communication skills, and more flexible (APA, 2000; 2010).

1.1 Background of the Study

In Malaysian context, it was perceived that high numbers of individuals are pressurized by certain aspects of life, be it financial, political, or other aspects (Husameddin, 2009). This situation might lead them to channel the pressure to their children through being authoritarian, controlling, hostile, and restrictive with their children (Lin & Fu, 1990; Steinberg et al., 1992). However, the level of authoritarianism may have different meanings to effects on Asian parenting due to the differences among the Asian cultures involved (Lau & Cheung, 1987; Chao, 1994; Kamaruddin & Kamaruddin, 2009).

Additionally, a theory of Sigmund Freud (1908) advocated that OCPD arises due to the conflicts between parents and children during the toilet training; children preferred to keep the toilet behaviour as free as they wanted, and the parents’ authoritarian methods
to organize the process in line with social norm of cleanliness. Such conflict alters the outcome of the personality of an individual to tend toward preoccupation with orderliness, parsimony (frugality) and the obstinacy (rigidity & stubbornness); which are qualities related to OCPD.

The aforementioned three qualities were emphasized by Freud in a 1908 paper entitled “Character and Anal Eroticism (Gay, 1989; Pitiman et al., 2004). Later, added other features such as [excessive or chronic concern] for adherence to standards of conscience, rigidity, over conscientious, over inhibited, an excessive capacity for work, being unable to relax easily, perfectionism and inflexibility were added as OCPD’s main features (APA, 1987).

Accordingly, it was also confirmed that the parents’ utilization of authoritarian pattern at this stage leads to fixation that drive the child further to early (or delayed) weaning from breast to bottle to cup. Therefore, the fixation for this stage has become the reason for pessimism (Negative affectivity), envy, suspicion, cynicism, dependency, aggression, obsessive habits such as nail biting, less sociable and refuses to engage in social interactions (social inhibition) (Sroufe et al., 1993; Stevenson, 1996; Chen et al., 1997; Dodson & Steven, 2011), which are in line with the indication of TDP (APA, 2000). In addition, TDP also associated with poor medication adherence in patients with myocardial infarction, heart failure, and coronary artery disease (Li et al., 2016).

It can be summarized that the presence of APS might lead to OCPD and TDP, which are likely to have negative effect on the society in general. In Malaysian context, it was reported that APS is significantly present among the parents (Lewis, 2006; Halim, 2007;
Involved in authoritarian parenting style are corporal punishment, psychological punishment, exaggerated verbal control of children, asserting power, as well as warmth and nurturance reduction as a function of specific situational cues, high prospect of obedience and submission to parental regulations and instructions, inflexibility toward new experiences, attitudinal intolerance, and elevated aggressive penchant toward those who violate social (Coplan et al., 2002; Rubinstein, 2003; Norms et al., 2005; Fischer et al., 2010).

However, there is possible a way to reduce the negative impact for APS by improving the individual's resilience which make them able to develop positive self-image, self-confidence, communication skills and the ability to manage emotions and impulses flexibly (APA, 2010). Possession of resilience leads to the answer the following questions: How do children and adolescents “make it” when their development is threatened by poverty, neglect, maltreatment, war, violence, or exposure to racism, oppression, and discrimination? What protects them when their parents are disabled by substance abuse, mental illness, or serious physical illness? How to explain the phenomenon of resilience children succeeding despite serious challenges to their development and put this knowledge to work for the benefit of children and society? (Masten, 2012; 2014). Having stated the argument on interrelationship among TDP, OCPD, and APS, this study is going to be conducted in order to investigate it.
1.2 Statement of Problem

It was reported that OCPD spreads at high rate among individuals with at least university level education (Blanco et al., 2008; Grant et al., 2004; Samuel & Widiger, 2011). One of the main characteristic in OCPD is called negative perfectionism, a tendency of individual to be stressed over insignificant perfections that occurs during late adolescence or early adulthood (Cicchetti & Crick, 2000). This is a problematic phenomenon, because OCPD and negative perfectionism contributed to low academic achievements, inadequate personal and social living competence, lack of peer acceptance, and difficulties in school adjustments (Hertler, 2015).

Other qualities of individuals with OCPD are preoccupation with details, organization of activities, order, difficulty in expressing emotions, and devotion to duties to the point of excluding important activities (Samuel et al., 2012; Caina et al., 2014), strictness at work, stubbornness, parsimony, conscientiousness, frequent social ineptness and feelings of inadequacy (APA, 1994; 2011), low self-esteem and inferiority complex (Lynam et al., 2008), experience of anxiety, guilt, insecurity, shame and crucial competition with others, concern on permanent precision and need for a system, constant need for control, preoccupied with accuracy and completeness (Jorden et al., 2012).

Moreover, people with OCPD are also identified with difficulty in expressing their emotions, perceived or real deficiencies or failures, and compromising emotions, thoughts or behaviour of others (Andrew et al., 2011); as well as lack of openness or interaction, lack of efficiency resulting from a bout with perfectionism, as well as personal and mental control, and regularity in his/her personal life and work.
Additionally, individuals with OCPD are often described as “workaholics” because they devote all their time to work; refrain from social interactions with family, friends and colleagues; and refuse to express emotions (Gibbs et al., 2002; Watson, 2015). The aforementioned characteristics might lead individuals to social failure due to their inability to adapt to social expectation. In line with the previous paragraph, experimental studies and clinical observations have determined that perfectionism and rigidity are considered among the essential qualities of individuals with OCPD. “Perfectionism” is the key cognition or observation inside a particular person, whereas “rigidity” is the resistance to change anything in the vicinity of the individual and the tendency to engage in routine and central interpersonal control (McGlashan et al., 2005; Andrew et al., 2011).

Obviously, OCPD can be considered as a negative trait for children because it is characterized by meticulous and compulsive about everything in their lives, have preoccupation with orderliness and perfectionism, and must maintain mental and interpersonal control, great difficulties with efficiency, flexibility, and openness (Torreno & Chinappi, 2011). This current study investigated and confirmed how OCPD was formed within individuals, and what other psychological traits that might mediate the process.

One of the condition that might affect the formation of OCPD is that when the individuals who develops OCPD were also possess Type-D Personality (TPD). TDP is another negative trait for individuals because a person with a TDP tends to experience Negative affectivity (NA) (i.e., negative emotions across situations & time), which
consist of feelings of worry and tension and Social Inhibition (SI) (i.e., reticence & a lack of self-assurance), that made them reluctant to share emotions with others because of disapproval or fear of rejection. Thus, a person with TDP can have both NA and SI, which can have a strong effect on clinical outcomes for heart patients (Denollet et al., 1996).

Broek and colleagues (2010) had collected evidence which implied that certain parenting style contributed to the risk of developing TDP, which eventually may increase the risk of poor health. Thereby, they hypothesized that TDP might mediate the relationship between the recollections of a dysfunctional relationship with poor adult physical, parents, and mental health outcomes. Because OCPD and TDP have potential to make the life harder for individuals who have them, and because it is reported that both might be rooted from APS, it is important to know how significant APS might psychologically affect the development of OCPD and TDP.

In regional context, problems related to the presence of OCPD and TDP might be amplified due some cultural reasons; it was discovered that in many collectivist culture nations, such as Malaysia, APS are more likely to be applied when it comes to dealing with children (Keshavarz & Rozumah, 2009). In other countries in the region, such as Thailand, it was reported that parents admitted that applied APS on their children (Tpanya, 2012).

Contextually, APS can be stated as part of the culture in Asian nations (Keshavarz & Rozumah, 2009). Therefore, it is not only applied by parents at home; some of the teachers applied APS on their students when they perceived that the students have low
academic competence (Prihadi et al., 2012). When the most important educators, namely parents and teachers, applied APS on the students, it can even negatively affect the students’ attitude towards certain school subjects (Prihadi et al., 2011).

Furthermore, in the context of this study, previous studies reported that APS negatively affects children’s psychological well-being and personality (e.g., Buri et al., 1988; Forward, 1989; Baumrind, 1991; Lamborn et al., 1991; Bigner, 1994; Chen et al., 1997; Pawlak & Klein, 1997; Lin & Callian, 2010; Besharat et al., 2011). The aforementioned literatures, which will be discussed more comprehensively in Chapter 2, suggested that the application of APS might produce children with certain delinquencies, such as OCPD and TDP (e.g. Denollet et al., 1996; Cicchetti & Crick, 2000; Gibbs et al., 2002; Grande et al., 2004; Pedersen & Denollet, 2004; Speirs, 2004; McGlashan et al., 2005; Lynam et al., 2008; Torgersen, 2009; Andrew et al., 2011; APA, 2011; Samuel & Widiger, 2011; Jorden et al., 2012; Samuel et al., 2012; Flett et al., 2014). Moreover, a preliminary study with 61 samples who are identical to the sample of this current study confirmed that TDP and resilience have a significant mediating effect on the causal relationship between PAPS and OCPD (Table 3.8 & Table 3.9).

It is confirmed that authoritarian parenting style with harsh techniques tend to develop the level of resilience of children with high score of PAPS (Zakeria, 2010). Nevertheless, exposure to such parenting style can also be taken as a life-threatening factor for the children. On this basis, the children tend to seek to resilience to cope against the risks, despite the presence of social support, (protective factor) by family, school or community (Marian & Turliu, 2011).
In other words, resilience generates individuals’ ability to adapt and mitigate the negative effect of PAPS on the personality, and hence might affect the possibility of the development of OCPD, which is technically a personality disorder (Kilbert et al., 2014). Thereby, resilience can be a mediating factor between PAPS and OCPD. Thus, parents who practice APS might indirectly develop OCPD symptoms in their children.

In the light of that, the current study will use USM undergraduate students to check all the hypothesis and the rationale for the selection of USM students. First, the challenges are even greater for University Sains Malaysia (USM), an institution that the Ministry of Higher Education chose to transform within the next five years to become the Accelerated programme for Excellence (APEX) university in Malaysia and a world-class institution. In addition, all the students prefer to study at USM is attributed to USM’s strong business links, good reputation, adequate, facilities, and availability of programmes and courses that suit the students’ needs. Furthermore, USM students come from different countries; thus, they represent most of the social and economic classes in the world, particularly in Malaysia. The diversity of cultures and religions in the current study is important because it aims to determine the differences in parenting styles based on religions and how they can cause psychological problems among students. As the students come from different cultural backgrounds, they may have experienced different parenting styles. For example, several parents are democratic, while others are authoritarian. USM is also one of the first universities in Malaysia with approximately 30,000 students in its 17 schools on the main campus in the island of Penang, as well as multiple sections in each school.
The justification for selecting undergraduate students includes most of the studies on adolescents, such as Rebecca and Dion (2006); online survey via e-mail, such as Winskel et al. (2013); on primary students, such as Abu Bakara et al. (2012); and on secondary school students, such as Lin and Lian (2011). On these bases, and in the absence of a study concerning Authoritarian Parenting Style on undergraduate students, the current researcher decided to focus on this sample in the current study.

Thus, it can be concluded that the percentage of individuals with OCPD in a population might lead to further problems in the society. Furthermore, in nations where APS is commonly applied by parents and educators, the likelihood of OCPD occurrence is much higher; hence the social problems related to it will also be more likely. In such situations, deeper knowledge is required to suppress the number of OCPD cases in the population.

On this basis, addressed all the variables (PAPS, OCPD, TDP & resilience) in the current study as a result of the existence of the interrelationships among the variables, for example, the effect of (PAPS) on (OCPD) and (TDP) on (OCPD) etc. Therefore, the current study will use a model that contains the variables (PAPS, OCPD, TDP & resilience) to discover the reality of this effect and how it is to increase or decrease the psychological disorders of students. In addition, addressing the problem mentioned above, it is admitted that a societal change is urgently required; however, it will not be easy to decrease, or moreover eliminate the practice of APS among parents, due to cultural reasons. Moreover, in the context of this study, where the sample will be taken from university students, the APS had been done and cannot be undone from the
students’ life. Thereby, in the context of this study, the mediating role of TDP and Resilience upon the effect of APS on OCPD will be investigated. While it might not be possible to undo the APS in the past lives of this certain population (university students), steps of improving resilience and reducing TPD can still be done to the individuals whose parents applied APS in the past.

1.3 Objectives of the Study

The main objective of this study is to investigate the mediating effect of TDP and resilience on the causal relationship between perceived APS (PAPS) and OCPD among university students. To achieve the main objective, several research objectives are listed as follows:

1. To identify the influence of PAPS on OCPD among undergraduate students;

2. To describe the influence of PAPS on TDP among undergraduate students;

3. To determine the influence of PAPS on resilience among undergraduate students;

4. To estimate the influence of TDP on OCPD among undergraduate students

5. To identify the influence of Resilience on OCPD among undergraduate students;

6. To estimate the mediating effect of TDP on the influence of PAPS on OCPD among undergraduate students;

7. To determine the mediating effect of resilience on the influence of PAPS on OCPD among undergraduate students.
1.4 Research Questions

To achieve the objectives of the study, these following research questions are to be answered:

1. Is there any significant influence of PAPS on OCPD among undergraduate students?

2. Is there any significant influence of PAPS on TDP among undergraduate students?

3. Is there any significant influence of PAPS on resilience among undergraduate students?

4. Is there any significant influence of TDP on OCPD among undergraduate students?

5. Is there any significant influence of Resilience on OCPD among undergraduate students?

6. Is there any significant mediating effect of resilience on the influence of PAPS on OCPD among undergraduate students?

7. Is there any significant mediating effect of TDP on the influence of PAPS on OCPD among undergraduate students?

1.5 Significance of the Study

Findings of this study are expected to provide educational stakeholders with scientific information on how students who were exposed to the APS developed their OCPD. Furthermore, it is also expected to provide more information about the involvement of TDP and resilience in mediating the influence of APS on the development of the OCPD
among university students. Such information can be utilized by the educational stakeholders as a platform on how modules to alter the students’ resilience and TDP.

Apart from the practical implementations, this current study will also fill the academic gap related to the occurrence of APS and its relationship to OCPD, TDP, and resilience. While some earlier works had been done on APS (for example Keshavarz & Rozumah, 2009; Lin & Callian, 2010) and the relationship between APS and OCPD (For instance Cicchetti & Crick, 2000; Anderluh et al., 2003), another work involving other variables involving different variables will fill the gap of literature in the field.

1.6 Limitation of the Study

This study investigates how Authoritarian parenting style (PAPS) contributes to Obsessive-Compulsive Personality Disorder (OCPD), Type-D Personality (TDP), and resilience among the undergraduate students who were exposed to the authoritarian style in their lives, as well as the mediating effect of TDP and resilience on the causal relationship between PAPS and OCPD. Thus, it does not control any extraneous variables that may be involved, such as other psychological traits, ethnicity, gender, social economic status, physical conditions, or any other situational differences of students that might influence their levels in terms of the variables mentioned in this study. Findings of this study are therefore not supposed to be generalised to any larger scale of different population, locations, and different types of Parenting Styles.
undergraduate students who are studying at science and humanities colleges at undergraduate in the academic year 2016 were selected as the population of the present study. Accordingly, (14480) of students have been recruited to participate in the survey. However, the data will enter into the PLS-SEM system for 776 students. Quantitative method is used to conduct this current study. Therefore, findings and interpretation of the results of this current study are based on the quantitative data analyses. Deep and meaningful qualitative analyses could not be provided or yielded based on this current study.

1.7 Definitions of Terms

Several key terms are conceptually and operationally defined in this section. Conceptual definitions are presented based on the explanations of the particular researchers involved. By contrast, the operational definitions are developed specifically for the present study.

1.7.1 Conceptual Definitions

The followings are the conceptual definitions of the variables and terms used in this proposal.

*Authoritarian Parenting Style*

Parenting can be defined as activities of parents with an aim of helping their child to bring forth; there are two dimensions underlying parental behaviour; they are parental
responsiveness and parental demandingness. Parental responsiveness (also referred to as parental warmth or supportiveness or acceptance) refers to “the extends to which parents intentionally foster self-regulation, individuality, and self-assertion by being attuned, supportive and acquiescent to children special needs and demands” (Gafoor & Kurukkan, 2014).

Parental demandingness (also referred to as behavioural control) refers to “the claims parents make on their children to become integrated to the family whole, by their maturity demands, disciplinary efforts, supervision, and willingness to confront the child who disobeys” (Baumrind, 1971).

Baumrind (1971) defined authoritarian parenting style (APS) as the use of strict and harsh measures that are focused on gaining a child’s obedience to parental demands rather than responding to the formers’ demands. Fletcher and colleagues (2008) defined APS as very strict and rigid. They place high demands on the child, but are not responsive to the child. Parents who practice authoritarian style parenting have a rigid set of rules and expectations that are strictly enforced and require rigid obedience. When the rules are not followed, punishment is most often used to promote future obedience.

However, this study is not looking at the way the parenting has been done by the parents; instead, it is the perception of the children of their parents’ parenting styles. Abdollahi et al (2013) defined Perceived parenting styles as an opinion of adolescents or children about styles of parental behaviours during their childhood.
Type D- Personality

Denollet (1990) defined TDP as the experience of feelings of negativity, depression, anxiety, stress, chronic anger, loneliness, being prone to pessimism, having low self-esteem, and difficulty in making personal connections with others (Denollet et al., 1996). Nagari and colleagues (2015) defined TDP as the joint tendency towards negative affectivity and social inhibition. On the other hand, Sharma and Panda (2015) defined Type D personality as a combination of negative affectivity (NA) or a tendency to experience negative emotions and social inhibition (SI) or a tendency to inhibit the expression of emotions to others because of insecurity and tension.

Resilience

Anthony and Windle (1999) defined the resilience as successful coping resulting from the efforts, strength, initiative, and endurance of an individual in the face of social disadvantage or highly adverse conditions. Based on human functionality, resilience was defined as the capacity to maintain competent functioning in the face of major life stressors (Kaplan et al., 1996).

Resilience was later defined as the ability of adults in normal circumstances who are exposed to an isolated and potentially highly disruptive event to maintain relatively stable, healthy levels of psychological and physical functioning (Bonanno, 2004, 2005). Further definition of resilience was advocated by Ramsey and Blieszner (1999) as the ability to respond with flexibility to the pressures of everyday life and to cope with traumatic occurrences.
The definition of resilience is controversial in terms of describing it as a process or a result. Fraser and Richman (2001) viewed resilience as the result of the interplay between risk and a variety of protective factors, whereas Luther and colleagues (2000) defined resilience as a dynamic process that utilizes both intra- and extra-organismic forces and not as a static or trait-like characteristic.

**Obsessive Compulsive Personality Disorder**

Obsessive–compulsive personality disorder (OCPD), also called anankastic PD (Samuel & Costa, 2012). Anthony et al (2008) defined as a PD characterized by a general pattern of concern with perfectionism, excessive attention to details, orderliness, mental and interpersonal control, and a need for control over one's environment, at the expense of flexibility, openness, and efficiency.

Freud defined OCPD as a preoccupation with orderliness, parsimony (frugality), and obstinacy (rigidity & stubbornness). APA defined OCPD as a preoccupation with orderliness, perfectionism, mental and interpersonal control, efficiency and openness. This pattern begins in early adulthood and is present in a variety of contexts (APP, 2000, p. 725). These different qualities include definitions from the development of studies on OCPD, all of which indicate the serious nature of this disorder since it first gained public attention in 1908.

Samuel et al (2012) defined as a condition characterized by such features as perfectionism; devotion to work to the exclusion of other important activities;
preoccupation with the details, order, and organization of activities and tasks; rigidity; and difficulty expressing warmth or affection.

Thus, according to this definition, individuals with OCPD are likely to be workaholic but not goal-oriented because they tend to be process-oriented. They are likely to be less-flexible, less-efficient, and close-minded, yet very unnecessarily organized with perfect organization to the orders and details of their plan, as well as love to control others to follow their ideas.

1.7.2 Operational Definitions

Authoritarian Parenting Style

APS is defined in the present study as the use of strict and harsh measures that is focused on gaining a child’s obedience to parental demands rather than responding to the former’s demands. This variable is measured using the parental authority questionnaire (PAQ), which Buri (1991) developed to measure Baumrind’s three dimensions (i.e., authoritative, authoritarian, & permissive).

Perceived Authoritarian Parenting Style

PAPS is defined in the present study as the perception of the samples that their parents applied the APS in their past. that is mean the students will give their perceptions about behaviours of their parents when they are dealing with them. This perception may be true or it may be just imagined the imagination of the student.
**Type D- Personality**

TDP is defined in the present study as the experience of feelings of negativity, depression, anxiety, stress, chronic anger, loneliness, being prone to pessimism, having low self-esteem, and difficulty in making personal connections with others. This variable is measured using the Disorder Personality 14 Items (DS14) developed by Denollet et al. (1996). On this basis, any student has Majority of the qualities above will be those who have Type D- Personality.

**Resilience**

In this current study, resilience refers to the ability to recover from adversity and stress and continue to live effectively and efficiently. This variable is measured using the Connor–Davidson Resilience Scale (CD-RISC-25) that was developed by Connor and Davidson (2003).

**Obsessive Compulsive Personality Disorder**

OCPD is defined in the present study as the preoccupation with orderliness, perfectionism, and mental and interpersonal control, at the expense of flexibility, openness, and efficiency. Furthermore, lack of the student's ability the creation of relationships with his colleagues and the loss of the ability to fulfil his duties tuition. This variable is measured using the Five Factor Obsessive-Compulsive Inventory (FFOCI) developed by Samuel et al. (2012).
1.8 Conclusion

The first chapter introduces the research problems and their importance to Malaysian society. The presentation of the research questions, hypotheses, as well as conceptual and operational definitions of concepts primarily intended to clarify the research problems and emphasize the importance of the current study. Limitations have also been set to define the scope of this study, thereby avoiding the over-generalization of its findings. This chapter lays the groundwork for the discussion in the next chapter, which focuses on the theories and previous studies related to the current study’s variables, as well as the dimensions of each of these variables. This study will attempt to highlight the effects of parenting styles on the student’s personality and the possibility of developing a specific personality style and a personality disorder that is virtually among the most dangerous personality disorders classified in Group C by APA.
CHAPTER II

LITERATURE REVIEW

2.1 Introduction

This chapter includes a review of literature relevant to this study. It introduces the theories and studies on the variables in this study, namely PAPS, OCPD, TDP and resilience, as well as interrelationship among them, followed by the presentation of theoretical and conceptual frameworks for this current study.

2.2 Authoritarian Parenting Style and Perceived Authoritarian Parenting Style

Adorno and Colleagues (1950) suggested that people with authoritarian personalities are more likely to categorize other people into “us” and “them” groups, with the former considering their own group to be superior. It was also indicated that individuals raised in a highly strict environment by critical and harsh parents are most likely to develop an authoritarian personality. When individuals with authoritarian personality become parents, the fact that they are ‘superior’ to their children might instigate authoritarian behavior towards the children (Olivari et al., 2015), which then repeated over days, months, and years, and eventually the behavior can be considered as their parenting style (Adorno, et al., 1950).

Children who grew up with authoritarian parents tend to develop authoritarian personality themselves (Olivari et al., 2015; Hamurcu et al., 2016). Most of the time, authoritarian children will show obedience to people with higher status, fairly rigid in
their opinions or beliefs, which often Conventional and tend to uphold traditional values. Moreover, several studies emphasized the importance of perceived parenting styles as risk factors for individual development during adolescence (Perris et al., 1994). Furthermore, it is imperative to highlight that individuals with an authoritarian personality tend to have hostility towards others of inferior status, but obedient to people with higher status.

It was indicated that the individuals who perceived authoritarian parenting style was more frequent to become authoritarian themselves, and it was emphasized that the parents of the subjects with disabilities could be overprotective since they are concerned more for the safety of their children (Olivari et al., 2015; Hamurcu et al., 2016).

On the other hand, it is imperative to acknowledge that there is a significant negative correlation between adolescents’ self-esteem and perceived paternal and maternal authoritarianism. It can be stated that perceiving parents (fathers and mothers) as authoritarian figures will induce negative impacts on adolescents’ self-esteem (Liang, 2004; Yamawaki et al., 2010; Bacus, 2014; Aihie, 2016). Moreover, the incapability of such children to show aggression or hostility towards their parents led them to find ‘safer prey’ as substitutes to the parents; this safer preys are usually those who are perceived to be weaker.

Additionally, it was also suggested that authoritarian traits predispose a few individuals toward “fascist” characteristics such as ethnocentric (tendency to favor one’s own ethnic group), obsessed with rank and status, respect for and submissiveness to authority figures; and preoccupied with power and toughness (Adorno et al., 1950).
The aforementioned paragraphs indicated that the future attitude, behavior, and even personality for children can be significantly affected by the children’s perception on the parenting style applied by their parents. Authoritarian parents, who demand really high and allow really low towards children might develop negative psychological well-being among the children. Because the current study is trying to study the perceptions of students about their parents, contrary to the original study that was on the parents, therefore, will use the perception of the samples that their parents applied the APS in their past that is mean the students will give their perceptions about behaviors of their parents when they are dealing with them. This perception may be true or it may be just imagining the imagination of the student.

2.2.1 Factors associated with PAPS

Many studies have been done related to the relationship between PAPS and other variables. Each of them is discussed in the following subsections.

*PAPS and Perfectionism*

For decades, studies have documented that parenting has a powerful influence in child development. Baumrind (1971) highlighted three types of parenting styles: permissive, authoritarian, and authoritative. Permissive parenting attempts to behave in a non-punitive, acceptant and affirmative manner towards the child impulses, desires, and actions. The authoritarian parent attempts to shape, control, and evaluate the behavior and attitudes of the child in accordance with a set standard of conduct, usually an absolute standard, theologically motivated and formulated by a higher authority.