

Original Research

The Assessment of Parental Acceptance- Rejection Perception in Adults Who Stutter

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Submission Date: November 8th, 2024

Acceptance Date:: March 18th, 2024

Pub. Date: August 2nd, 2024

Online First Date: July 29th, 2024

Abstract

Objectives: This study aims to evaluate parental acceptance/rejection perception in adult who stutterers. Specifically, it highlights the significance of the attitudes of parents of individuals who stutter in terms of the lifelong effects of stuttering.

Materials and Methods: This study was conducted with a total of 40 individuals, 20 females and 20 males, who stutter, and 20 females and 20 males who not stutter. These participants were recruited from the Speech and Language Therapy Unit at Hacettepe University. Digital video recordings of individuals with stuttering were made to assess their stuttering, and a Visual Analog Scale (VAS) was administered to the participants with stuttering to evaluate how they perceived the severity of their stuttering. All participants were administered the Parental Acceptance-Rejection Questionnaire Adult Form (PARQ) to assess their perception of parental attitudes.

Results: The parental acceptance-rejection perceptions of mothers of individuals who stutter are significantly different from those of individuals who do not stutter ($t=5.584, p < .05$). The parental acceptance-rejection perceptions of fathers of individuals who stutter significantly differ from those of individuals who do not stutter ($t=5.533, p < .05$). The total parental acceptance-rejection scores and sub-dimensions of scores perceived by participants from their parents did not differ by gender.

Conclusion: It was concluded that there are negative effects of parental acceptance-rejection perception in individuals who stutter.

Keywords: *parental acceptance-rejection, parental acceptance rejection theory, stuttering.*

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Introduction

Stuttering is related to the flow, rhythm, accents, and sound units of speech. It is defined as a disorder in extraction and understanding (Chang, 2016). The etiology of stuttering varies depending on many factors. Stuttering often begins between the ages of 2 and 5, and in most people who have it, spontaneous recovery can be seen in 70–80 percent of cases (Saltuklaroglu & Kalinowski, 2005; Reilly et al., 2009; Reilly et al., 2013; Cavenagh, 2015). There is abundant evidence in the literature to support the view that stuttering is a multifactorial disorder. Research on the causes of stuttering emphasizes the interaction of genetic, neurological, language and speech development, psychosocial, and environmental factors (Smith & Weber, 2017; Rocha, 2019; Yairi & Ambrose, 2013).

Parenting methods affect children's mental, emotional, language, sexual, and physical development. Growth depends on warm, caring, respectful family ties; a restless, conflicted family may harm the child (Johari Talib & Mamat, 2011). While parenting styles vary, strong or high expectations might negatively impact child development (Senemoğlu, 2003; Rutchick, 2009; Kim, 2015). Some studies indicate that all children need parental acceptance, regardless of culture, gender, language, or ethnicity (Rohner et al., 2007; Khaleque, 2015; Li & Meier, 2017). Without this need addressed in childhood, addiction, defensive independence, emotional unresponsiveness, hostility and violence, poor self-esteem and self-efficacy, emotional inconsistency, and negative worldview may be developed in maturity. Parental acceptance-rejection affects children's psychological adaptation by 26%, according to studies (Ramírez-Uclés et al., 2018; Dwairy, 2010). Childhood parental acceptance-rejection explains 21% of adult psychological adaptation issues. Perceptions of parental acceptance and rejection strongly influence psychological and behavioral development worldwide (Khaleque et al., 2019). Stuttering can develop as the child attempts to exhibit avoidance behavior to cope with the reactions of their parents (Langevin et al., 2010).

One of the theories that reveal the effect of parental attitudes perceived in childhood which integrates it with a personality theory and supports this theoretical framework with empirical data is the Parental Acceptance-Rejection Theory (PARTheory) (Khaleque & Rohner, 2002). The PARTheory is a socialization theory that tries to explain the causes of perceived parental acceptance and rejection in childhood and its possible consequences on the behavioral, cognitive, and emotional development of children and adults. Based on various research findings, the PARTheory deals with the issue of acceptance or rejection by the parents in a developmental process from fertilization to death (Rohner, 1989). The theory mainly

focuses on the quality of the emotional bond between the parent and the child, which is called the "warm dimension of parenting", and how the parent expresses their feelings towards the child (Rohner & Smith, 2019). The warmth dimension is related to the quality of the emotional bond between parents and children, where parents can express these feelings through verbal, physical, and symbolic behaviors. At one end of the dimension, the warmth, affection, care, peace, attention, nutritional support, or simply love that parents or other caregivers show towards their children is the forefront of parental acceptance, and at the other end, these feelings and behaviors are absent or clearly withheld, as well as parental rejection in which various physical and psychological behaviors or emotions that hurt the child are displayed (Khaleque et al., 2019). In this case, parental acceptance-rejection can be examined from two different perspectives: first, as perceived and experienced by the individual (phenomenological perspective); second, as reported by a second person (behavioral perspective). PARTheory studies indicate that when the results obtained from these two different approaches are significantly different from each other, the information obtained through the phenomenological approach may be more reliable (Ildiz & Ayhan, 2020). This suggests that information obtained through individuals conveying their own experiences may be more reliable than reports from external observers.

PARTheory has three sub-theories, namely personality, coping, and sociocultural systems (Rohner & Smith, 2019). In the personality of sub-theory, the effects of perceived parental acceptance or rejection in childhood on personality structure and general psychological state (especially mental health) are tried to be predicted and explained. The theory assumes that people's need for positive reactions from those who are important to them is a biologically based need that emerged in the evolutionary process (Rohner & Veneziano, 2001). The need for a positive response can be thought of as a person's conscious or unconscious seeking of care, attention, support, and affection. This need becomes more complex in adulthood and includes the desire to be liked by people whose opinions are given importance (Kılıç, 2012).

The coping sub-theory analyzes how some rejected persons can tolerate daily rejection without developing mental health issues (Somerfield & McCrae, 2000). Severely rejected and psychologically damaged individuals strive to acquire positive non-family experiences that will improve the damaging emotional, cognitive, and behavioral effects of parental rejection. So, people who were rejected as children but had normal resistance as adults because of successful psychotherapy, positive work experience, satisfying intimate relationships, and other fulfilling things become more adaptable, but not as happy as adults who always get love. (Masten et al.,

2021). The socio-cultural systems of PARTheory offer a different assessment of parental acceptance-rejection in terms of its antecedents, consequences, and correlations within individuals and societies. The temperament and behavior of model children are shaped by the behavior and qualities of their parents (Rohner, 2022). Additionally, it indicates that young individuals experience many encounters in their society's confinement systems, peers, and adults. The sociocultural systems sub-theory of PARTheory seeks to predict and explain the reasons for parental acceptance and rejection around the globe. It is known that parental acceptance and rejection are also associated with expressive sociocultural ties such as the artistic preferences of individuals in all societies and the artistic traditions of individual communities. In addition, evidence suggests that recreational or occupational choices adults make may be related to childhood experiences of acceptance and rejection (Khaleque & Rohner, 2002).

According to the results of the meta-analysis study by Khaleque and Rohner (2002), which included 43 studies between 1976 and 2000, a strong relationship was found between parental acceptance-rejection and psychological maladjustment. According to the findings, parental rejection was found to be associated with depression and depressive affect, conduct disorder, delinquent behavioral problems, and problems related to alcohol and substance abuse (Khaluque & Rohner, 2002). In a study conducted by Cenkseven (2000), the self-esteem of children aged 9-12 was examined based on gender, stuttering, and mother-child rejection. The findings of the study demonstrated that individuals with stuttering exhibited higher levels of mother-child rejection, but gender had no impact (Cenkseven, 2000).

As a result, the individual and environmental factors in the initial period of stuttering, and especially the attitudes of the parents of are of great importance in terms of the lifetime effects of stuttering on the individual. The aim of this study is to evaluate parental acceptance/rejection perception in adult who stutterers.

Method

Hacettepe University Ethics Committee (No: 13/109-07; Date: 13/02/2013) approved the study and all participants were informed about and approved the consent form. The research was performed in accordance with the Helsinki Declaration.

Participants were selected according to the criterion sampling method among people who stutter (PWS) who responded to the requests in professional e-mail groups and from a university clinic, as well as from self-help groups associated with the National Stuttering

Association (NSA) in Turkey. This study's inclusion criteria were as follows: a) volunteering to participate, b) being literate, c) being at least 18 years old, d) self-identifying as a person who stutters, and e) having a stuttering severity (%SS) score greater than 2% during oral reading or speaking individuals with. Comorbid mental, neurological, sensory, or communication problems and individuals receiving recent psychiatric, or speech therapy were not included the study.

All participants were informed about the purpose of the study, and an explanation regarding the confidentiality of the video recordings to be taken during the assessment was provided. Subsequently, demographic information (age, gender, occupation, education level, address/phone number), medical history, and family history were obtained. Digital audio and video recordings were made in a room designed for evaluating individuals using a digital video camera (Nikon Coolpix L310 Ver.1.0). Conversations directed by the researcher were recorded for a minimum of 300 words and approximately 15-30 minutes. Individuals showing three or more intra-word stuttering occurrences per 100 words were considered stutterers. The researcher checked the obtained recordings at least twice and identified stuttering findings. Later, another researcher randomly selected and watched 10 recordings to determine stuttering findings and severity. The Parental Acceptance-Rejection Questionnaire Scale Adult Form (PARQ) was administered to all participants. Finally, a Visual Analog Scale (VAS) was used to assess participants' perception of stuttering severity.

Data collection instruments

The data collection instruments used in this research are personal information form to determine the sociodemographic characteristics of the participants, PARQ, VAS.

The Parental Acceptance-rejection Questionnaire Scale Adult Form

PARQ was developed by Rohner and colleagues to assess perceived parental acceptance-rejection. The sixty-item PARQ consists of four subscales: 1. Warmth/Affection subscale, 2. Hostility/Aggression subscale, 3. Neglect/Indifference subscale, and 4. Undifferentiated Rejection subscale. The total score of PARQ, obtained by summing the scores of these four subscales, provides a general measure of how much acceptance or rejection the individual perceives in their relationship with their mother or father. The items in the PARQ are composed of four scales: "almost always true" (4 points), "sometimes true" (3 points), "rarely true" (2 points), and "never true" (1 point). It is answered on a likert-type scale. Therefore, the total score to be obtained from PARQ varies between 60 and 240; While 60

points indicate the highest level of acceptance perception, 240 points indicate the highest level of rejection.

Visual Analog Scale (VAS)

VAS was used to digitize some values that cannot be measured numerically. The length of the distance from the place where there is no stuttering to the point marked by the participant indicates the severity of the participant's stuttering.

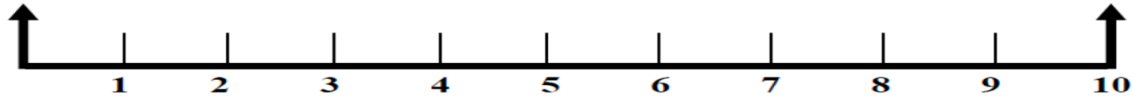


Figure 1. VAS

Statistical Analysis

Descriptive analyzes are given using mean (X), percentile, and standard deviation (SD). The independent Chi-Square and t-tests compared gender distributions and mean ages. Due to normal distribution, an independent t-test was employed to compare parental acceptance-rejection perception scores of the study group and control group. Since the data revealed normal distribution, the study group employed an independent t-test to compare stuttering severity and perceived severity scores. Statistically significant cases have $p < .05$.

Results

Forty adults with PWS (age range = 18-38 years; mean age = 25.85 years; 20 males, 20 females) and forty adults with people who do not stutter (PWNS) (age range = 19-48 years; mean age = 27,4 years; 20 males, 20 females) participated in this study. The t-test analysis was applied to evaluate whether there was a difference between the perceived acceptance rejection level between the study group and the control group. Analyzes were made separately by forming two separate groups for the mother and father.

According to the t-test results, there are significant differences between the total parental acceptance-rejection and sub-dimension scores perceived by the study and control groups toward their mothers (Table 1) and fathers (Table 2). The total parental acceptance-rejection score perceived by mothers ($t=5.584, p < .05$) and fathers ($t=5.533, p < .05$) were statistically significantly different. As stated in the PARQ, it is that the perceived acceptance increases as the scores approach 60, and the perceived rejection increases as the scores approach 240. People who stutter (= 113.97, SD=36.62) perceive less acceptance from their mothers compared to the control group (= 79.23, SD=14.42). Similarly, the study group (= 111.85, SD=30.58) perceives

less acceptance from their fathers compared to the control group (= 82.20, SD=14.60). This situation is also the same for all sub-dimensions of the PARQ scale. According to the results of the mothers' warmth scores ($t=6.30, p < .05$), hostility/aggression scores ($t=4.10, p < .05$), neglect/indifference scores ($t=5.17, p < .05$), undifferentiated rejection scores ($t=3.98, p < .05$) statistically significant difference was found between the two groups. According to the results of the fathers' warmth scores ($t=7.026, p < .05$) hostility/aggression scores ($t=2.475, p < .05$), neglect/indifference scores ($t=4.68, p < .05$), undifferentiated rejection scores ($t=2.70, p < .05$) statistically significant difference was found between the two groups.

Table 1. Differences between the total parental acceptance-rejection and sub-dimension scores perceived by the study and control groups toward their mothers

Variables (From mother detected)	Differences Between Descriptive Statistics and Means					
	Study Group		Control Group		d	t
	X	SD	X	SD		
Warmth	40.725	13.599	26.200	5.263	78	6.30**
Aggression	27.725	10.530	20.350	4.282	78	4.103**
Neglect	27.450	8.915	19.525	3.776	78	5.177**
Undifferentiated Rejection	18.625	8.205	13.125	3.006	78	3.981**
Total score	113.975	36.622	79.225	14.427	78	5.584**

* $p < .01$, ** $p < .001$, SD: Standart deviation, X: Arithmetic mean

Table 2. Differences between the total parental acceptance-rejection and sub-dimension scores perceived by the study and control groups toward their fathers

Variables (From father detected)	Differences between Descriptive Statistics and Means					
	Study Group		Control Group		d	t
	X	SD	X	SD		
Warmth	43.150	12.612	28.050	5.069	78	7.026**
Aggression	23.150	9.475	19.150	3.840	78	2.475**
Neglect	30.375	8.929	22.300	6.240	78	4.688**
Undifferentiated Rejection	15.725	6.280	12.700	3.244	78	2.707**
Total score	111.850	30.585	82.200	14.605	78	5.533**

* $p < .01$, ** $p < .001$, SD: Standart deviation, X: Arithmetic mean

There was no significant difference according to gender between the scores obtained from the total and sub-dimensions of PARQ of the stuttering individuals participating in the study ($p = .938, p > .05$). Similarly, whether there is a difference between the actual stuttering severity and perceived stuttering severity of the individuals in the study group was examined by t-test analysis for independent groups. There was no significant difference between the perceived and actual stuttering severity of the participants ($p = .942, p > .05$).

Discussion and Conclusion

There are many studies in the literature that examine the relationships between stuttering children and their parents (Ratner 1993; Nonis, 2022; Guttormsen, 2021) . The results of these studies have consistently shown that there are attitudinal and behavioral differences between the parents of stuttering individuals and those of non-stuttering individuals. Overprotection, excessive monitoring and control, high expectations, and perfectionism are among the main characteristics of parenting practices. These attitudes are perceived as rejection by stuttering children (Haynes & Pindzola, 1998).

This study aimed to assess the perception of parental acceptance/rejection in adult stutterers. There are significant differences between the total parental acceptance-rejection scores and sub-dimension scores perceived by adult stuttering individuals and adult non-stuttering individuals' parents. The findings obtained in our study are consistent with the literature. In the Parental Acceptance-Rejection Theory, which is a socialization theory, it is known that negative feedback received from parents by individuals who perceive rejection can have an impact on this perception of rejection. Increasing perception of rejection can potentially affect individuals' self-esteem and lead to behavioral problems. According to the results of a meta-analysis conducted by Khaleque and Rohner (2002), a strong relationship was found between parental acceptance-rejection and psychological maladjustment (Khaleque & Rohner, 2002). Some studies testing the Parental Acceptance-Rejection Theory suggest that individuals who perceive rejection tend to have higher levels of anxiety, insecurity, and disordered cognitive representations (cognitions) (Varan et al., 2008). Caruso's study, which reported that individuals who stutter receive less acceptance from their families compared to non-stutterers, supports our findings (Caruso et al., 1994). Similarly, the results obtained in Cenkseven's (2000) study, which examined whether there were differences in the levels of perceived maternal-child rejection based on children's stuttering status and gender, are in parallel with our research findings. The study found that children who stutter perceive the mother-child relationship as more rejecting (Cenkseven, 2000). In a study conducted by Lau et al. (2012), it was found that school-age children who stutter perceived significantly lower levels of parental attachment compared to the fluent-speaking group. The stuttering group perceived their relationships with their parents as more dysfunctional and rejecting (Lau et al., 2012). Although this study used a different age group, the results are similar. High expectations perceived by children from their parents may likely affect their perception of acceptance.

In our study, it was found that stuttering individuals perceived less warmth, more hostility/aggression, more neglect/indifference, and more undifferentiated rejection from their parents compared to the control group. Perceived warmth, which represents parental acceptance, is a crucial component of harmony between parents and children. Therefore, it can be assumed that the levels of perceiving coldness, neglect, and rejection from their mothers or fathers may influence the stuttering symptoms in stuttering individuals. Parental hostility, on the other hand, is the internalized or emotional response of the parent directed towards the child, involving anger, hostility, or resentment. Parental aggression can manifest as an inability to tolerate criticism, restlessness, and displaying hostile behaviors towards the child. Aggressive/hostile parents may constantly find fault in what their children do, scold them, ridicule them, and continuously express how their children's actions anger them (Rohner, 1989). A parent being rejecting, and hostile can lead an individual to question their self-worth. It is believed that a person who experiences aggression and rejection may develop a low self-esteem, feeling unworthy (Salahur, 2010). Moncur (1951) observed that the mothers of stutterers tended to apply stricter discipline, be more dominant and overly protective compared to the mothers of non-stutterers. Similarly, Darley (1955) found that the parents of stutterers, both as a group and individually, had higher levels of education, were overly protective, more demanding, and less satisfying in their parenting style. Sakman (1993) investigated the relationship between behavioral disorders observed in stuttering children and the attitudes of mothers, as well as their anxiety levels. The study concluded that in mothers of stuttering children, "Excessive Pressure and Discipline" and "Incompatibility" attitudes were higher compared to mothers of non-stuttering children (Sakman, 1993). In our study, it is believed that the perception of rejection, as well as high parental expectations, perfectionist attitudes, and strict disciplinary rules, would be related, as observed in all other studies.

In this study, there is no significant difference between the perceived levels of control by parents of stuttering individuals and the perceived levels of control by parents of non-stuttering individuals. Both stuttering adults and non-stuttering adults perceive that their parents applied similar levels of control during their childhood. Previous research on parental control has yielded different findings. In a study conducted by Yairi and Williams (1971), they examined the thoughts of 34 stuttering children between the ages of 11-13 regarding their families' approaches and how they interpreted their behaviors. In contrast to other studies, they concluded that stuttering children found their families to be more permissive and less controlling (Yairi & Williams, 2013). Our study group was selected from a different age range

compared to groups studied previously. It is believed that the observed differences in the results may be due to changes in the parent-child relationship over the years, possibly influenced by the development of stuttering issues over time.

In our study, there was no significant difference between genders in terms of the total parental acceptance-rejection scores and the scores obtained from sub-dimensions of how adult stutterers perceived their parents. The levels of perceived acceptance or rejection of parents are similar among both male and female stutterers. In the literature, studies on the Parental Acceptance-Rejection Theory have yielded different results in terms of gender, and the theory suggests that parental behaviors leading to acceptance or rejection may vary culturally (Kılıç, 2012). The similarity in the perception of rejection between genders in our study can be explained by the prominence of the pathology. When pathology is the dominant factor, it does not differentiate the perception of parental acceptance/rejection between genders. These results are supported by the findings of Eryavuz (2006) and Salahur (2010) studies (Eryavuz, 2006; Salahur, 2010). In Eryavuz's study (2006), there was no significant difference in the perceived parental acceptance and rejection between men and women (Eryavuz, 2006). In Salahur's study (2010), a difference was found only in the undifferentiated rejection sub-dimension of the father form in the comparison of perceived parental acceptance-rejection between genders (Salahur, 2010).

As emphasized in this study and in many of the cited studies, parental attitudes have an impact on stuttering. In addition to the previous research that primarily focused on child age groups, our study is important because it is the first to investigate the perception of parental acceptance and rejection in adult stutterers within the framework of the Parental Acceptance-Rejection Theory. Perceived parental acceptance-rejection measurements largely depend on memory and how one perceives their parent's behavior. Therefore, future research that includes longitudinal design starting from childhood can be valuable in investigating the perception of parental acceptance-rejection over time.

Limitations and Future Directions

According to the results of this study, it can be observed that parental attitudes are influential in stuttering. It is a study that examines the effect of parental attitudes, which are mostly studied with child age groups, on stuttering, as well as the acceptance-rejection perception of adult stutterers within the framework of stuttering. Measures of perceived parental acceptance-rejection are largely dependent on recall and how the behavior of the mother or

father is perceived. In this context, it will be useful to investigate the perception of parental acceptance-rejection with longitudinal studies starting from childhood in future studies.

Acknowledgements

We would like to thank all participants in this study.

Financial Support

The authors received no financial support for this study.

Conflict of Interest

The authors declare that they have no conflict of interest for this study.

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