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### The Role of Upbringing Methods in the Families of Obsessive Patients

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#### ABSTRACT

**Introduction:** Since conceptual-practical obsessive disorders often considerably make distribution in one's life, family and parentally styles may play important roles in various disorders. The aim of this research was the investigation of parenting practices in obsessive and non-clinical individual patient's families. **Methods:** for this purpose, among all admitted and outpatients with practical and perceptual obsessive disorder referred to the medical public private psychiatric service of Shiraz, 29 were selected as non-clinical through available method and 61 people in terms of gender, age and education were matched with the patient group and responded to the parenting Young's questionnaire. **Findings:** People suffering from obsessive compulsive perceptual-practical disorder got a higher score against loss or damage and restraint inadequate self-disciplinary. **Conclusion:** This research indicates the difference between parenting practices methods of the families with perceptual-practical obsessive compulsive disorder and those without the disorder well.

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### INTRODUCTION

The main feature of obsessive-compulsory disorder is intensive and frequent perceptual or practical obsessions, which bring considerable pain and torment for the individual. They contribute to waste of time and a considerable disorder is created in the natural and normal life process, occupational function, normal social activities or individual's relations [10].

Obsession, feeling, thoughts or recurrent sensation and intrusive is a mental process. In contrary, practical obsession is a form of duplications and apparently targeted behavior which is performed against responses to uncontrollable trends or based on a series of procedural rules or format. This disorder is a common psychiatric disease. Two or three percent of the general population is being caught during their life. It is estimated that this disorder is found in 10 percent of outpatients. According to the epidemiologic studies that conducted in Europe, Asia and Africa, it has been proved that the figures in all the cultural fields are the same. [10].

This disorder and also anxiety thoughts are due to various reasons; these reasons may consist of hurt, damage, sexual experiences and family, relation and structure. [6].

Child learns initial beliefs about the word in family, physically and mentally grows, learns the ways of speaking and the basic norms of behavior and finally his attitudes, ethics and mental are formed. These methods which is called parenting styles are influenced by various factors including cultural, social, political, economic, etc. Indeed, parenting style is a decisive and effective factor that plays the role of psychopathology in child development. [6]. Children are not only affected by one aspect of parental behavior or personality, but also the combination of different factors influence growth of baby. Extensive researches executed on the way of parents' deal with children show that educational methods of parents have long-term effects on behavior, performance, expectations and finally on their personality in the future.

In fact, there are some factors that can be effective in the form of obsessive disorder, including damage, injury, sexual experience and family structure and relationships [6], the lack of resistance of child against the wishes of the parents, severe ban or prevention, child deemed useless by parents [8] despotism and autarchy of parents neglecting the needs of child. In a research, the difference between parenting styles was shown among mothers of children with depression, anxiety and perceptual practical obsession with normal and usual ones.

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Also Alilou [1] indicates that people with obsessive compulsive order regarding normal people understood their parents more with obsessive-compulsive personality. Khanjani, Anameq and Gholamzadeh (2012) showed that parents with powerful parenting styles have children with low anxiety thoughts and perceptual-practical obsession signs. Thus they have meaningful positive relation with despotic and ignorable parenting style has meaningful negative relation with powerful parenting style. Indeed, parenting style has the ability to predict the level of perceptual-practical obsession signs and anxiety thoughts of adolescents. In a research conducted by Waterz and Barrot [12], they determined the role of parenting style as a predictor factor for perceptual-practical obsession. Available evidences in the research of Golda (2004) showed that family, father and mother's behaviors are relative to occurrence of anxiety disorders in the children. Alonzo and *et al* (2004) in a research of parenting style perception of parents in obsession disorder showed that people who suffer from compulsive obsessive order in comparison with control group indicated more rejection by father. Also, social and cultural variables such as father and mother and parenting models in interaction with biological and genetic factors may cause obsessive-compulsive disorder (phenotype). After a complete survey, Timpano and *et al* [11] said that learning through key relations, such as parent ones may cause emergence and maintaining of phenotypes of obsessive disorder signs in adult. Andahel, Visit and Martin (2011) in their study found that sexual misused in the childhood is along with some long-term and short-term side effects, such as perfection obsessive-compulsive behaviors in quantitative research of Dildar, Sitwat and Tariq [3]. In the evaluation of performance of healthy and obsession families, it was determined that confusion frustration, the realization of improper responsibilities, control severe treatment, weak relation, failure to mutual share, dispute settlement, express anger, lack of emotional involvement, family unpleasant environment are vulnerability factors and maintain obsessive-compulsive signs. Yarabru *et al* [13] showed attachment anxiety and obsessive beliefs and the relationship of fathers and mothers lead to obsessive-compulsive children

It is emphasized that family performance is associated with mental health members and because family performance, obsessive-compulsive signs and anxiety thoughts have significant impacts on people life satisfaction and compatibility with the environments according to another aspect of parenting styles and training methods and responding to requests and demands have major roles in the outcome of the positive and negative consequences for them.

The main purpose of the present study were examine parenting style in families obsession patient and non-clinical individuals.

## MATERIALS AND METHODS

This study has been conducted in comparison-led design frame. Population was consisted of all patients (inpatient and outpatient) of perceptual-practical obsession disorder referred to public and private hospitals, psychiatric services of Shiraz or hospitalized in these centers. Twenty nine were selected among these patients by their availability and 61 patients which were coupled with age, gender and education were selected as nonclinical example.

### *Techniques used in this research include:*

Young parenting styles: Young parenting questionnaire includes 72 questions which respondents rated separately their different parent behaviors. It is assumed that these behaviors contributed to the formation and evaluation of schema. For rating in this questionnaire, it is used sex-point Likert scale between 1 to 6, and questions are categorized by the schema. This questionnaire will assess the following schema: emotional deprivation, abandonment mistrust, abuse, vulnerability to harm or injure dependence, insufficiency and failure to obey a shameful, violation sacrifice, unrelenting standards, entitlement, hauteur, self-restraint and self-discipline, insufficient development of undetected, being involved, pessimism, emotional inhibition, punishment and acceptance.

### *Findings:*

The mean and standard deviation sample survey examined groups separately given in tables 1 and 2. People suffered from obsessive-compulsive mentioned that in all-scheme have higher scores that those without the disorder. Only two schemas of vulnerability against loss or damage and self-control and insufficient self-discipline people without obsessive-compulsive disorder have higher score than people with obsessive compulsive disorder.

**Table 1:** Average and standard deviation of testable scores with obsession-compulsive disorder.

Variable	Average	Std. Deviation	Variable	Average	Std. Deviation
Emotional Deprivation	17.27	5.56	Stubbornly Criteria	22.72	5.50
Leave	6.89	3.10	Entitlement/ hauteur	9.00	3.20
Distrust/Misbehavior	4.62	7.72	Insufficient self-restraint and self-discipline	7.89	2.45

Vulnerability against damage or loss	14.51	3.85	Self-undeveloped/Involved	12.20	2.52
Dependency/Inadequacy	8.49	3.62	Negativism/Pessimism	15.65	3.19
Defectiveness/shame	10.96	4.80	Emotional inhibition	17.51	3.60
Failure	7.86	4.50	Punishment	10.16	5.19
Obedience	10.46	3.79	Acceptance/Attention	17.72	3.49
Sacrifice	9.44	3.18	Total Score	206.54	36.38

**Table 2:** Average and standard deviation of testable scores without obsession-compulsive disorder.

Variable	Average	Std. Deviation	Variable	Average	Std. Deviation
Emotional Deprivation	12.85	5.99	Stubbornly Criteria	19.80	5.41
Leave	5.95	2.32	Entitlement/ hauteur	8.75	3.35
Distrust/Misbehavior	4.16	0.96	Insufficient self-restraint and self-discipline	8.16	3.00
Vulnerability against damage or loss	15.11	3.59	Self-undeveloped/Involved	9.96	3.00
Dependency/Inadequacy	6.26	3.29	Negativism/Pessimism	8.60	3.80
Defectiveness/shame	5.70	3.28	Emotional inhibition	15.16	4.11
Failure	4.96	1.64	Punishment	8.10	4.24
Obedience	7.63	4.52	Acceptance/Attention	13.81	4.64
Sacrifice	9.21	3.26	Total Score	164.25	27.98

**Table 3:** Multi-variable variance analysis of emotional designs on two groups with and without obsession-compulsive disorder.

Variable	The sum of squares	Freedom degree	F	p
Emotional Deprivation	17841.65	1	519.29	0.0001
Leave	3246.12	1	480.68	0.0001
Distrust/Misbehavior	2780.14	1	373.58	0.0001
Vulnerability against damage or loss	17258.66	1	1274.73	0.0001
Dependency/Inadequacy	4282.40	1	369.60	0.0001
Defectiveness/shame	5462.34	1	371.57	0.0001
Failure	3235.11	1	389.24	0.0001
Obedience	6439.85	1	347.70	0.0001
Sacrifice	6844.99	1	653.74	0.0001
Stubbornly Criteria	35554.27	1	1199.00	0.0001
Entitlement/ hauteur	6195.58	1	564.80	0.0001
Insufficient self-restraint and self-discipline	50.69.70	1	627.34	0.0001
Self-undeveloped/Involved	9660.29	1	1178.13	0.0001
Negativism/Pessimism	11569.88	1	879.90	0.0001
Emotional inhibition	21000.09	1	1338.26	0.0001
Punishment	6556.09	1	31430	0.0001
Acceptance/Attention	19557.51	1	1052.75	0.0001

To assess significant differences between two groups, each schema was used through multivariable analysis of variance. People with obsessive-compulsive disorder schemas of emotional deprivation, abandonment, mistreatment disbelief dependence, incompetence, violation, shame failure, obedience, sacrifice, unrelenting standards, entitlement, hauteur, self-transformation undetected caught negativism, cynicism open emotional restraint, discipline and attention seeking admission significantly received high scores. In the two vulnerable schemes against loss or damage and insufficient self-control and discipline those without disorder significantly achieved higher scores. (Table 3)

#### Conclusion:

The main purpose of this study was to compare the two groups regarding obsessive compulsive disorder and normal emotional schemas were assessed by questionnaire parenting Young. It was supposed that people with obsessive compulsive disorder listed in the scheme obtain higher score than healthy people. The results indicated that individuals obsessive compulsive significantly received higher scores than those without the disorder of normal emotional deprivation ( $F=519/29$ ,  $p=0/0001$ ), abandonment ( $F=480/68$ ,  $p=0.0001$ ), mistrust/abuse ( $F=373/58$ ,  $p=0/0001$ ), dependence/incompetence ( $F=369/60$ ,  $p=0/0001$ ), violation/shame ( $F=371/57$ ,  $p=0/0001$ ), failure ( $F=389/24$ ,  $p=0/0001$ ), obedience ( $F=347/70$ ,  $p=0/0001$ ), sacrifice ( $F=653/74$ ,  $p=0/0001$ ), unrelenting standards ( $F=1199/00$ ,  $p=0/0001$ ), gentlemanly/entitlement ( $F=564/80$ ,  $p=0/00101$ ), undetected our transformation/ caught ( $F=1178/13$ ,  $p=0/0001$ ), negativity/ pessimism ( $F=879/90$ ,  $p=0/0001$ ), emotional inhibition ( $F=1338/30$ ,  $p=0/0001$ ), acceptance of punishment ( $F=314/30$ ,  $p=0/0001$ ), seeking admission/attention ( $F=1052/75$ ,  $p=0/0001$ ) achieved significantly higher scores. In two vulnerability schemes against harm or injure ( $F=1274/73$ ,  $p=0/0001$ ), inadequate restraint and self-discipline also significantly received higher scores ( $F=627/34$ ,  $p=0/0001$ ).

Previous researches have also indicated that the family environment, parenting style is different in people with obsessive compulsive and those without this disorder. Essentially parenting style has predictable role to

indicate this disorder. Golfazani, Mohamad Ismael and Raufian Moghadam (2003), Khanjani, Anameq and Gholamzadeh [6] that waterz, Barrot [12] and Tipmano and *et al* [11] reported the differences in parenting styles between parents of individuals with obsessive compulsive disorder and parents of healthy individuals and stated that parenting style can predict signs of perceptual and practical obsession. According to these researches, despotic slight parenting styles positively predict the symptoms of perceptual practical obsession and anxiety thoughts. Indeed, limited research of Alilou [1] makes it clear that people with perceptual-practical obsession disorder described their parents more with the personality traits in obsessive compulsive aspects. In addition, Yarabrou and *et al*, in this study showed that attachment anxiety and obsessive beliefs of parent-child relationships may help possessive compulsive disorder signs.

Regarding two schemas of vulnerability against loss or damage and insufficient self-control and self-discipline that people with obsessive compulsive disorder received a higher score, it can be said that previous research also pointed out the role of childhood damages in creating this disturbance that can be noted some mentions. Indeed there are factors shape perceptual-practical obsession disorder which can lead to the formation of scheme vulnerability to loss or trauma-injure, including damage, injury, sexual-experience, structure and relationships [6], the lack of child-resistance against parental wishes, drastic ban, child considered useless from parents despotism parents and neglect to child needs childhood sexual abuse. Also regarding the scheme insufficient self-control and discipline, it can be said that people with obsessive compulsive disorder have dissatisfaction, experience, confusion, improper fulfillment of responsibility strict control behavior, poor communication, lack of mutual sharing, conflict resolution, anger expression, lack of emotional involvement, unpleasant environment. [3] and despotic parenting style [6,12,11] develop excessive discipline and restraint. Therefore, it is expected that in inadequate restraint and self-discipline, they get high scores than healthy ones.

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