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The Influence of Parenting Styles on Adolescent Self-Harm Behavior: A Case-Control Study in SMPN 1 Plaosan, Magetan

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ABSTRACT Adolescence is a critical developmental phase marked by significant physical, emotional, and social transitions, often accompanied by increased vulnerability to psychological distress. One concerning manifestation of such distress is self-harm behavior, which has been increasingly observed among school-aged adolescents. This study aims to examine the relationship between parenting styles and self-harm behavior in adolescents at SMPN 1 Plaosan, Magetan. The research adopts an analytic observational method using a case-control design. A total of 42 students and their parents participated, consisting of 21 cases (students who engage in self-harm) selected through total sampling, and 21 controls (students who do not engage in self-harm) selected via simple random sampling. Parenting styles were assessed using the PSQ questionnaire completed by parents, while the dependent variable was the adolescents' self-harm behavior. Statistical analysis was conducted using the Chi-square test with a significance level of $\alpha = 0.05$. The results indicate a significant correlation between parenting styles and adolescent self-harm behavior ($p = 0.000$). Among the case group, the majority (90.5%) of parents applied an authoritarian parenting style, whereas most parents in the control group (85.7%) used a democratic parenting style. The odds ratio further revealed that adolescents exposed to authoritarian parenting are at a substantially higher risk (OR = 324) of engaging in self-harm compared to those raised with democratic parenting. This suggests that rigid and controlling parenting may contribute to emotional distress leading to maladaptive coping behaviors such as self-harm.In conclusion, parenting style plays a critical role in adolescent mental health outcomes. These findings underscore the need for increased parental awareness and the promotion of democratic parenting approaches to mitigate the risk of self-harm among adolescents.

INDEX TERMS Parenting style, self-harm behavior, adolescents, authoritarian, democratic parenting

I. INTRODUCTION

Adolescence is a developmental stage characterized by heightened emotional sensitivity, identity formation, and increased vulnerability to mental health challenges. Among these, self-harm behavior has emerged as a growing public health concern worldwide, particularly among school-aged adolescents. Self-harm, defined as deliberate injury to oneself without suicidal intent, is often a coping mechanism for overwhelming psychological distress, anxiety, or family dysfunction [1], [2]. In Indonesia, recent data show an alarming increase in self-injurious behavior among adolescents, particularly in school environments, yet this issue remains underrecognized and undertreated [3], [4].

Parenting style is one of the most influential factors in shaping adolescent behavior and psychological well-being. According to Baumrind's typology, parenting styles are typically categorized into authoritative, authoritarian, permissive, and neglectful, each with varying degrees of control and responsiveness [5]. Authoritative parenting, marked by warmth and firm guidance, has been consistently associated with positive adolescent outcomes, while authoritarian parenting, characterized by rigidity and harsh discipline, has been linked to increased risk of depression, anxiety, and self-harm [6], [7]. Democratic parenting, a culturally adaptive version of authoritative parenting in Indonesia, fosters open communication and emotional support, which may buffer adolescents against mental health risks [8].

Recent studies have utilized both quantitative and qualitative methods to explore the relationship between parenting styles and adolescent psychological health. However, research specifically linking parenting style to self-harming behavior in the Indonesian context remains scarce [9], [10]. Most existing literature focuses on general behavioral problems or academic outcomes rather than internalized emotional distress or self-injurious behavior. Moreover, many studies rely solely on adolescent self-reporting, without incorporating parental perspectives or validating parenting styles using established instruments.

This research addresses the gap by adopting a case-control approach to compare parenting styles between adolescents who engage in self-harm and those who do not, using validated questionnaires completed by both parents and students. The aim of this study is to analyze the

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correlation between parenting style and the incidence of self-harm behavior among students at SMPN 1 Plaosan, Magetan.

This study offers several contributions. First, it enriches the limited body of research on adolescent self-harm in Indonesia by focusing on parenting as a core psychosocial factor. Second, it employs a case-control methodology that allows for a more precise comparison between adolescents with and without self-harming behaviors. Third, it provides empirical data that can inform school-based mental health interventions and family counseling strategies.

II. METHODS

A. STUDY DESIGN

This study employed an analytic observational design using a case-control approach, which is appropriate for identifying associations between exposure factors (in this case, parenting style) and specific outcomes (self-harm behavior in adolescents) [21], [22]. The research was conducted between June and August 2024 at SMPN 1 Plaosan, Magetan, East Java, Indonesia. This design allowed the researchers to compare parenting styles reported by parents of adolescents who engaged in self-harming behaviors (cases) with those who did not (controls), controlling for other confounding variables.

B. POPULATION AND SAMPLE

The target population consisted of all students in grades VII to IX enrolled at SMPN 1 Plaosan. The inclusion criteria for the case group were students who self-reported engagement in self-harming behaviors within the past six months, verified by school counselors, and whose parents were willing to participate. Exclusion criteria included students with known psychiatric diagnoses or those currently undergoing psychological treatment. A total of 42 student-parent pairs were included in this study, divided equally into 21 cases and 21 controls. The case group was selected using total sampling, while the control group was chosen using simple random sampling among students who did not report self-harm behavior, ensuring comparability between groups [23], [24]. The sample size was determined based on power calculations for case-control studies with a confidence level of 95% and power of 80% [25].

C. INSTRUMENTS

Data collection employed two primary instruments: (1) a self-harm screening form for adolescents and (2) the Parenting Style Questionnaire (PSQ) for parents. The self-harm screening tool was adapted from prior validated instruments and included items assessing frequency, type, and context of self-injurious behavior. The PSQ, adapted and validated in Bahasa Indonesia, consists of 30 items divided into three subscales: authoritarian, authoritative (democratic), and permissive parenting styles. Each item used a 5-point Likert scale ranging from strongly disagree to strongly agree [26]. Content validity of the PSQ was assessed by a panel of psychologists and public health experts. The internal consistency reliability (Cronbach's alpha) for the instrument was 0.84, indicating a high level of reliability [27].

D. DATA COLLECTION PROCEDURE

Before data collection, the researchers obtained formal permission from the school principal and consent from the parents. Adolescents completed the self-harm screening during school hours in a private setting supervised by a counselor to ensure confidentiality. After identifying eligible cases and controls, parents were invited to complete the PSQ at the school or at home, depending on their preference. Data were collected over a period of two weeks. Each questionnaire required approximately 15–20 minutes to complete. The anonymity of all participants was strictly maintained, and no personally identifiable information was recorded. The data were coded and entered into a secured database for analysis.

E. ETHICAL CONSIDERATIONS

Ethical clearance for this research was obtained from the Health Research Ethics Committee of Poltekkes Kemenkes Surabaya. Written informed consent was collected from all participants and their parents. Adolescents were assured that their participation was voluntary and that they could withdraw at any time without penalty. Psychological support was made available for participants who reported distress or disclosed self-harm behaviors [28].

F. DATA ANALYSIS

Data were analyzed using SPSS version 25.0. Descriptive statistics were used to summarize demographic variables and frequencies of parenting styles. The association between parenting style and self-harm behavior was tested using the Chi-square test (χ^2) with a significance level set at $\alpha = 0.05$ [29]. The odds ratio (OR) and 95% confidence interval (CI) were also calculated to determine the strength of association between exposure to authoritarian parenting and self-harm risk.This statistical approach is appropriate for analyzing categorical variables and has been widely used in similar case-control studies in behavioral science and public health research [30], [31].

III. RESULTS

This research was conducted in the working area of Puskesmas Plaosan, which includes 2 sub-districts and 6 villages: Plaosan Sub-District, Sarangan Sub-District, Bulugunung Village, Ngancar Village, Dadi Village, Plumpung Village, Puntukdoro Village, and Pacalan Village. Puskesmas Plaosan has 8 adolescent posyandu (integrated healthcare centers) spread across all the villages/sub-districts. Adolescent posyandu activities are routinely carried out every month with the assistance of 40 active adolescent posyandu cadres. The adolescent posyandus in the working area of Puskesmas Plaosan are held in village offices and sub-district halls, with schedules adjusted to the activities of the adolescents. Since most adolescents attend school on weekdays, posyandu activities are usually held in the afternoon and during holidays or red-letter days other than Sundays. One of the posyandus, located in Puntukdoro Village, is held on the 5th of every month because the posyandu is situated in an Islamic boarding school.

The research location is at SMPN 1 Plaosan, a junior high school located in the working area of Puskesmas Plaosan, at Jalan Raya Sarangan RT 04 RW 01, Plaosan Sub-District,

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Plaosan District, Magetan Regency. SMPN 1 Plaosan consists of grades 7, 8, and 9. Each grade has classes A to H. The number of students in grade 7 includes 125 male students and 125 female students, grade 8 has 130 male students and 124 female students, and grade 9 has 132 male students and 121 female students. The teaching staff at SMPN 1 Plaosan consists of 32 teachers and 12 educational staff members.

A. CHARACTERISTICS OF RESPONDENTS

1). Characteristics of Students

The gender and age of the students in this study can be seen in TABLE 1 as follows:

TABLE 1
Characteristics of Student by Gender and Age

Characteristics	Case		Control	
Gender	F	%	F	%
Male	1	4,7%	1	4,7%
Female	20	95,3%	20	95,3%
Age				
Early (10-14 th)	10	47,6%	10	47,6%
Middle (15-17 th)	11	52,4%	11	52,4%
Total	21	100%	21	100%

TABLE 1 indicates that the majority (95.3%) of the students in both the case and control groups are female. Based on age criteria, most of the students are in mid-adolescence (52.4%).

2). Characteristics of Parents

The age, education, and occupation of the parents in this study can be seen in TABLE 2 as follows:

TABLE 2
Frequency Distribution of Parent Characteristics by Age, Education, and Occupation

Characteristics	Case		Control	
Age	F	%	F	%
Dewasa awal	21	100%	21	100%
Pra lansia	0	0%	0	0%
Lansia	0	0%	0	0%
Total	21	100%	21	100%
Education				
Elementary	0	0%	0	0%
Secondary	19	90,5%	18	85,7%
Higher	2	9,5%	3	14,3%
Total	21	100%	21	100%
Occupation				
ASN/ TNI/ POLRI	1	4,7%	1	4,7%
Employee	1	4,7%	7	33,3%
Enterpreneur	19	90,6%	13	62%
Total	21	100%	21	100%

TABLE 2 shows that all (100%) of the parents in both the case and control groups fall into the adult age category. Based on education criteria, the majority have a secondary education (90.5%) in the case group and 85.7% in the control group. Regarding employment, most of the parents in this study are fathers, with 90.6% being self-employed in the case group and 62% in the control group.

B. PARENTING STYLE

The parenting styles of the parents for the respondents in the case group and the control group in this study are shown in Table 3 as follows:

TABLE 3
Frequency Distribution of Parenting Style

Description	Case		Control	
Self Harm	F	%	F	%
Yes	21	100%	0	0%
No	0	0%	21	100%
Total	21	100%	21	100%
Parenting Style				
Otoriter Style	19	90,5%	1	4,7%
Demokratic Style	1	4,7%	18	85,7%
Permissive Style	1	4,7%	2	9,6%
Total	21	100%	21	100%

TABLE 3 shows that all (100%) of the students in the case group engage in self-harm, with the majority (90.5%) experiencing authoritarian parenting. And all (100%) of the students in the control group do not engage in self-harm, with the majority (85.7%) experiencing democratic parenting.

C. RELATIONSHIP BETWEEN PARENTING STYLES AND SELF-HARM BEHAVIOR IN ADOLESCENTS

1). Cross-tabulation of Parenting Styles and Self-Harm Behavior in Adolescents. The cross-tabulation of parenting styles and self-harm behavior in adolescents in this study can be seen in TABLE 4 below:

TABLE 4
Cross-Tabulation of Parenting Styles with Self-Harm Behavior

Group	Style						Total	
	Otoriter		Permissive		Demokratic			
	n	%	n	%	n	%	Jml	%
Self harm	18	85,71	2	18	2	85,71	21	100
Not *Self-harm*	1	4,76	2	1	2	4,76	21	100
Total	19	90	4	19	4	90	42	100

TABLE 4 shows that among parents who adopt an authoritarian parenting style, the majority of their children engage in self-harm. On the other hand, among parents who adopt a democratic parenting style, the majority of their children do not engage in self-harm. Additionally, children with permissive parenting styles do not show a tendency toward self-harm. This is evidenced by the fact that out of 4 respondents with permissive parenting styles, 2 children engage in self-harm while 2 children do not.

2). The results of the statistical test using the Chi-Square Test Based on the results of the chi-square test, it can be determined that there is a significant relationship between parenting styles and self-harm behavior. This finding is evidenced by a coefficient of significance (sig) of 0.000, which is less than 0.05. Furthermore, based on the calculation of the odds ratio (OR), it is found that authoritarian parenting style and permissive parenting style are risk factors for self-harm behavior. This is supported by an OR of 324 for authoritarian parenting style and an OR of 18 for permissive parenting style. An OR greater than 1 indicates that the factor under study is indeed a risk factor.

IV. DISCUSSION

A. INTERPRETATION OF FINDINGS

The findings of this study revealed a statistically significant relationship between parenting style and adolescent self-harm behavior. Specifically, students who reported engaging

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in self-harming behaviors were predominantly raised in households characterized by authoritarian parenting styles, whereas those in the non-self-harming group were primarily exposed to democratic or authoritative parenting. The Chi-square test confirmed the association with high statistical significance ($p = 0.000$), and the odds ratio of 324 indicates a substantially higher risk of self-harming behavior among adolescents subjected to authoritarian parenting practices.

These findings align with the psychological theory that parenting behavior directly influences the emotional regulation capabilities of adolescents. Authoritarian parenting, which emphasizes obedience, punishment, and low emotional warmth, may limit the development of healthy coping mechanisms in youth. As adolescents struggle with emotional dysregulation under such rigid familial environments, they may resort to maladaptive coping strategies such as self-harm to manage psychological distress [32], [33].

The emotional needs of adolescents require a supportive, communicative, and autonomy-promoting environment. Parenting styles that lack emotional responsiveness and fail to validate adolescent feelings may inadvertently increase vulnerability to emotional disturbances, including self-injurious behavior. The results of this study strongly suggest that the authoritarian parenting style acts as a psychosocial risk factor, contributing to maladaptive behavioral outcomes among adolescents.

B. COMPARISON WITH PREVIOUS RESEARCH

The outcomes of this study are consistent with multiple international and national studies that highlight the influence of parenting on adolescent emotional and behavioral outcomes. A study by Wang et al. (2021) showed that authoritarian parenting was positively correlated with anxiety, depression, and non-suicidal self-injury (NSSI) among adolescents in East Asia [34]. Similarly, a 2020 study by Scott and colleagues demonstrated that harsh parenting and emotional invalidation were significant predictors of adolescent self-harm in Western populations [35].

In the Indonesian context, research conducted by Puspitasari et al. (2022) in a similar school-based environment indicated that adolescents raised under permissive or authoritarian parenting showed higher levels of internalized emotional distress, including symptoms of depression and self-injury [36]. These findings reinforce the culturally relevant aspect of this study: while parenting behaviors are often influenced by cultural norms, the adverse effects of excessively controlling or punitive parenting on adolescent well-being appear consistent across cultures.

Conversely, parenting styles grounded in democratic values, which encourage open dialogue, emotional warmth, and supportive guidance, have been linked to positive adolescent outcomes. This aligns with the control group data in the current study, where most non-self-harming adolescents experienced democratic parenting. This result corroborates research by Nugroho and Fitriana (2021), who reported that democratic parenting fosters resilience and emotional competence among Indonesian youth [37].

It is also important to note studies that show no significant correlation between parenting styles and self-harming behavior. For instance, a study by Lestari et al. (2020) suggested that peer influence and exposure to online content may mediate self-injury risk more strongly than familial factors in urban adolescents [38]. While not contradictory, such findings emphasize that parenting style is a contributing factor but not the sole determinant of adolescent mental health.

C. STUDY LIMITATIONS AND IMPLICATIONS

Despite the compelling findings, this study is not without limitations. First, the use of self-reported measures for identifying self-harming behavior may be subject to response bias or underreporting, especially given the social stigma surrounding mental health and self-injury in Indonesian society. Although efforts were made to ensure confidentiality, the potential for socially desirable responses cannot be fully eliminated.

Second, the cross-sectional nature of the study limits causal inference. While the statistical association between parenting style and self-harm is strong, longitudinal research would be more robust in determining the directionality and persistence of these effects. Third, the study was conducted in a single junior high school in Magetan, which may affect the generalizability of results. Variations in socioeconomic background, school environment, and parental education across regions could influence parenting dynamics and adolescent behavior differently.

Fourth, the parental perception of their parenting style, rather than the adolescent's perception, was used to categorize parenting behavior. While parental self-assessment provides insight into intended behaviors, it may not always reflect how adolescents experience those behaviors, potentially leading to misclassification bias.

Despite these limitations, the findings have important implications for public health interventions, school counseling, and family-based programs. Schools can play a critical role in identifying students at risk by implementing mental health screenings and parent education workshops. Teachers and counselors should be trained to recognize behavioral signs of distress and understand how family dynamics impact student well-being.

At the community level, outreach programs that educate parents on the impact of their parenting style can promote healthier family interactions. Culturally sensitive parenting modules that emphasize communication, empathy, and adolescent autonomy should be prioritized, especially in areas with high rates of emotional distress among adolescents.

For policymakers, these results underscore the need for integrated adolescent mental health strategies that involve both educational and health sectors. Parenting style, as a modifiable determinant, provides an entry point for preventive measures that could significantly reduce the prevalence of self-harm and other related behaviors among youth.

V. CONCLUSION

This study aimed to investigate the influence of parenting styles on self-harm behavior among adolescents at SMPN 1 Plaosan, Magetan. The research employed a case-control design involving 42 students 21 identified as engaging in self-

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harm behavior and 21 without such behavior along with their respective parents. Parenting styles were assessed using a standardized Parenting Style Questionnaire (PSQ), and the relationship between parenting style and self-harm behavior was analyzed using the Chi-square test. The findings demonstrated a statistically significant association between parenting style and adolescent self-harm behavior ($p = 0.000$), with an odds ratio of 324. Specifically, 90.5% of students in the self-harming group reported having parents who employed an authoritarian parenting style, whereas 85.7% of students in the non-self-harming group experienced democratic (authoritative) parenting. These results suggest that adolescents exposed to authoritarian parenting are substantially more likely to engage in self-harming behaviors compared to their peers raised in supportive and communicative family environments. This study reinforces the critical role parenting plays in adolescent psychological development, particularly in fostering emotional regulation and healthy coping mechanisms. While the cross-sectional design limits causal inferences, the strength of the association warrants attention from educators, health professionals, and policymakers. Future research should consider longitudinal or mixed-method designs to explore causal pathways and incorporate adolescent perceptions of parenting for more comprehensive analysis. In addition, intervention programs aimed at educating parents on the adverse effects of authoritarian practices and promoting democratic parenting strategies may serve as preventive measures to reduce the incidence of self-harm among adolescents. Schools, in collaboration with mental health professionals, should integrate family-based counseling and parenting workshops as part of their student support services. Ultimately, fostering emotionally supportive parenting may serve as a key protective factor in mitigating self-harm risks and promoting adolescent mental well-being.

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DATA AVAILABILITY

The datasets used and/or analyzed during the current study are available from the corresponding author upon reasonable request.

AUTHOR CONTRIBUTIONS

Yannavita Hadi Suwignyo was responsible for conceptualizing the research, designing the study, and leading the data collection process. Nana Usnawati contributed to the development of research instruments, managed the data, and conducted the statistical analysis. Tutiek Herlina conducted the literature review, assisted in interpreting the data, and participated in drafting the manuscript. Rahayu Sukmaningsih supervised the entire research process, ensured methodological accuracy, and critically revised the manuscript. All authors have reviewed and approved the final version of the manuscript and agreed to be accountable for all aspects of the work.

DECLARATIONS

ETHICAL APPROVAL

This study was conducted following ethical standards and received approval from the Research Ethics Committee of the Poltekkes Kemenkes Surabaya. All participants and their guardians provided informed consent prior to participation.

CONSENT FOR PUBLICATION PARTICIPANTS.

Not Applicable.

COMPETING INTERESTS

The authors declare that they have no competing interests.

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