

**“EFFECT OF FATHERS’ AND MOTHERS’ DIFFERENTIAL PARENTING ON
EMOTIONAL EXPRESSIVITY AND ATTACHMENT STYLE OF YOUNG MALES
AND FEMALES”**

A

Thesis submitted

***In the partial fulfillment of the requirement for the degree of
MASTER OF ARTS
IN PSYCHOLOGY***

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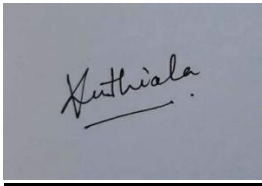
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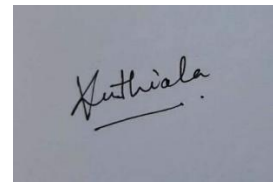
CANDIDATE'S DECLARATION

I hereby declare that the work presented in this thesis entitled, '**Effect Of Fathers' And Mothers' Differential Parenting On Emotional Expressivity And Attachment Style Of Young Males And Females**' submitted in partial fulfilment of requirements for the award the of the degree of **Master of Arts in Psychology**, presented in the **Thapar School of Liberal Arts & Sciences, Thapar Institute of Engineering and Technology, Patiala**, is an authentic record of my work carried out under the supervision and guidance of Dr. Santha Kumari, Professor & Program Chair, Thapar School of Liberal Arts & Sciences, Thapar Institute of Engineering and Technology, Patiala and refers other researchers' work which are duly listed in the reference section.

The matter embodied in this thesis has not formed the basis for awarding any other degree at this or any other university.

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ABSTRACT

Differential parenting is a kind of parenting in which parents treat their children differently. It is a comparative process in which one child receives more or less parental positivity or negativity than another child. The impact of Differential Parenting by fathers and mothers on emotional expressivity and attachment styles of males and females was investigated using three scales, Perceived Differential Treatment (Sibling Inventory of Differential Experiences), Emotional Expressivity Scale, and Adult Attachment Scale. The total sample consisted of 150 young adults (males=75, females=75) in the age range of 18-25. The present study aimed to study the effect of fathers' and mothers' differential parenting on the emotional expressivity and attachment style of young males and females. The study's objectives were to study how perceived differential treatment by fathers and mothers affects the emotional expression and future relationships of males and females in their young adulthood. The findings of this study indicate that females were emotionally less expressive when they perceived the differential treatment by their fathers, whereas, for males, their emotional expression got affected when they perceived the differential treatment by their mothers. The findings also indicated that the differential parenting by the mothers resulted in having a more significant impact on the anxious attachment style of their daughters and on the avoidant attachment style of their sons. The present study's strengths and limitations and the implications of the current findings for clinical practice and future research are discussed.

Keywords: Differential Parenting, Adult Attachment Styles, Emotional Expressivity.

CHAPTER 1

INTRODUCTION:

The family system has long been regarded as crucial to comprehending children's development. Raising children is the most difficult job in the world. An Individual's personality is profoundly impacted by Parenting. A healthy parent-child relationship is critical for a child's development. Given the importance of Parenting as a behavior, there are numerous specific parenting behaviors. This difference significantly impacts offspring outcomes (Klahr & Burt, 2014). A significant number of measured variables, such as warmth, negativity, harsh discipline, and control, have been used to study Parenting (Caspi et al., 2004; Deater-Deckard et al., 2001). According to Lovejoy et al. (2000), these can be broadly classified into three types of behavior: "negative" (e.g., negative affect, hostile or controlling behavior); "disengaged" (e.g., neutral affect or lack of engagement with their child); and "positive" (e.g., warmth, affection, positive affect).

It is evident that processes work throughout the family system and specifically within-family, which have implications on children's well-being. A non-shared environment can be described as an environmental feature that varies from children in the same family and contributes to different results. These features can be real or perceived. The combination of these factors, including parental interactions, sibling interactions, and individual events, brings a variety of environmental experiences to children in the same family (Dunn & Plomin, 1990).

One example of this model is differential Parenting. Differential parenting explains how parents treat their children in different ways. It is a comparative process wherein one child receives more or less parental positivity or negativity than another (Meunier et al., 2013). Differential parental treatment occurs when children in the same family receive preferential treatment or perceive their treatment differently (Plomin et al., 2001).

Differential parenting occurs when a measured variable is uneven between two siblings. According to behavior genetics research, most of the difference in developmental outcomes is due to a nonshared environment and differential parenting behavior has been examined as one potential source of this difference (Deater-Deckard et al., 2001). Many studies have found an association between early Parenting and externalizing and internalizing psychopathology (Klahr & Burt, 2014).

However, while differential parenting is a family-level dynamic (explaining variation in the family average for children's behavior problems), it is also a child-level dynamic, with one sibling being more affected than the other. Thus, numerous studies have found that in a sibling dyad, the child whom a parent dislikes showcases a greater (and more negative) deviation from the sibling in behavior problems over time (Burt et al., 2006; Turkheimer & Waldron, 2000), suggesting that this family dynamic is not equally destructive to all children.

Jenkins (2008) divides measured surroundings into two major categories: family-level and child-specific. Factors that all siblings encounter in the same way operate at the family level (like family conflict, maternal depression, or divorce). On the other hand, each sibling has a distinct experience (e.g., unique peer or school context). Both family-level and child-specific distinctions can be used to conceptualize parenting dimensions. Ambient Parenting is classified as the family-level average of a particular parenting construct, which refers to the number of that dimension in the household environment (Jenkins et al., 2009). Differential Parenting refers to child-specific variations from the family average and can be determined by the amount of negativity or positivity a child experiences compared to the family average. Siblings are more significantly different than similar after controlling for genetic effects attributed to nonshared environmental influences like differential parenting (Turkheimer & Waldron, 2000).

Differential parenting's effects on different psychological, behavioral, and emotional outcomes, such as delinquency, adult attachment, emotional expressiveness, and emotional disturbance, are established in the literature (Boyle et al., 2004). Studies show that PDT is common to many families-65 percent in the United States and 63.3 percent in Belgium (Brody et al., 1998).

Parental Differential Treatment in Adulthood

Because the great majority of prior research has been conducted on samples of children and adolescents, findings like these raise the developmental issue of whether parental differential treatment continues to be an important phenomenon in adulthood and, if so, how it is related to the quality of relationships with adult siblings and older parents.

One could assert that whether older parents currently treat their adult children differently is no longer a significant issue because adult children have typically separated from their parents and gained functional and residential independence (Lawton, Silverstein, & Bengtson, 1994). However, there are grounds to believe that parental differential treatment might very well continue to be an issue in later life, given the range of instances in which parents interact with their adult children and may behave differently toward them.

Positive emotional exchanges (Lawton et al., 1994), financial assistance and gifts to adult offspring, and other forms of instrumental support (Treas & Lawton, 1999) can all be addressed differently with offspring in a family. Similarly, the need to assist aging parents (Blieszner & Hamon, 1992) along with parental criticism or conflict experienced by adult offspring within a family may differ (Clarke et al., 1999). Furthermore, adult children are very likely to compare themselves to their siblings because a variety of factors (e.g., availability, perceived similarity to self, role as competitors) make siblings a suitable target for social comparison (Wood, 1989). Apart from these arguments, the few existing studies provide empirical proof for a significant proportion of middle-aged adults either remembering or perceiving parental differential treatment in childhood and adolescence (Boll et al., 2001).

There is another developmental issue that refers to the appropriate areas of parental differential treatment of adult children versus younger children. Affection, support, control, and the assignment of responsibilities, which have been studied in studies focusing on childhood and adolescence, appear to be important in adulthood too. However, the specific ways in which parental differential treatment manifests itself must differ across age groups due to developmental changes in children (e.g., increasing autonomy), aging parents (e.g., increasing dependency), and their respective developmental contexts. For example, while the differential assignment of familial duties among siblings in childhood and adolescence refers to household chores (Daniels et al., 1985; McHale & Pawletko, 1992), a parallel during middle adulthood seems to be the requirements for assuming filial responsibility for the older parents. Another critical question is whether receiving more of a particular type of parental

treatment than one's sibling is perceived positively or negatively by the child getting such treatment. Thereby, having more demands placed on oneself in comparison to one's sibling can be interpreted as either receiving more parental benefit and honor or, conversely, having to bear a greater burden (Boll, 2003).

Our close relationships are one of the most important aspects of our lives. They have an impact on our life satisfaction and emotions. Furthermore, our attachment patterns, which are primarily influenced by childhood experiences, shape our romantic relationships. Our love styles are one of the factors influenced by our life experiences. Various manifestations of love are thought to be an attachment process. To put it another way, attachment in early childhood refers to an infant's reactions to the absence of a primary caregiver or the relationship between them. Their attachment system interacts with other behavioral systems such as the exploratory system, the fear system, the caregiving system, and the sociable system (Cassidy, 2008). As a result, their early childhood bonds influence the romantic attachment pattern in adulthood. Attachment theory, which is based on the bonds children create with their parents, is also used by Hazan and Shaver (1987) to explain romantic relationships in adulthood. The attachment formed between children and their parents is learned, and this bond is then applied to other relationships in their environments, such as romantic partners and friendships, and so on; this is known as an adult attachment (Garrison, Kahn, Sauer, & Florczak, 2012).

Attachment styles are specific patterns of cognition, emotions, behaviors, needs, and expectations in interpersonal relationships that arise from the history of one's attachment and the working model of the associated self, others, and relationships (Fraley & Shaver, 2000). In a laboratory setting, Mary Ainsworth (1967) proposed an attachment-style model that represents how the newborn responded to separation and reunion from the mother in a variety of situations. Attachment styles arise early in life and often persist over time. Attachment Theory by Bowlby explains this well.

Attachment theory's key concepts are defined as follows by Bowlby (1973):

First, when an individual is confident that an attachment figure is readily accessible whenever he or she desires, that person is much less vulnerable to either strenuous or chronic fear than when such confidence is lacking.

Second, during the years of immaturity (infancy, childhood, and adolescence), confidence in the accessibility of attachment figures, or lack thereof, is slowly built up. Whatever

expectations are established during those early years remain relatively constant throughout life.

Third, the numerous expectations that individuals form during their immature years about the availability and responsiveness of attachment figures are relatively accurate representations of their real-life experiences.

According to his theory, there are four adult attachment styles: anxious-preoccupied, avoidant-dismissive, disorganized/fearful-avoidant, and secure. Adult attachment styles can be divided into two different aspects: fear and avoidance (Mikulincer & Shaver, 2007). Anxiety is characterized by a strong need for intimacy, concerns about the availability of romantic partners, and concerns about their value to romantic partners. People with this attachment style place a high value on their relationships, but they are frequently concerned that their loved one is not as deeply involved in the relationship as they are. There is a strong fear of alienation, and safety is a top priority. The "remedy" for anxiety appears to be the partner's attention, care, and responsiveness. Avoidance is characterized by discomfort in interpersonal relationships, dependence on romantic partners, emotional paralysis, and overconfidence in oneself. The dismissive/avoidant type believes that they do not need to be in a relationship to be complete. They don't like to be dependent on others, have others depend on them, or seek acceptance and guidance from social bonds. Adults with this attachment style avoid emotional closeness in general. They usually hide or suppress their feelings when confronted with an emotionally charged situation. Individuals who are securely attached or secure have low levels of anxiety and avoidance. These people are usually reassured by their attachment, easily trust others, have their partners available to them, value them as partners, and rely on others intimately. Be comfortable and deal with stressful events in a constructive way of life (Mikulincer & Shaver, 2007). Infants with a disorganized attachment style demonstrated strange, awkward behavior during separations and reunions with their mothers, alternating between avoidance and anxiety (Main & Solomon, 1990).

Adult attachment style is related to many psychological and relational variables, including personality, general adult relationship quality (Waters et al., 1995), and quality of adult romantic relationships (Brennan & Shaver, 1995; Collins et al., 1990). Three underlying dimensions of adult attachment style have been identified: close, depend, and anxiety (Collins & Read, 1990).

The term "**emotional expression**" refers to observable verbal or nonverbal behaviors that portray an emotional or an interactive experience (Kennedy, Moore & Watson, 2001). The extreme to which one expresses one's feelings and thoughts to another refers to emotional

expressivity. Emotions can be conveyed through facial movements, words, or gestures. Emotional expression is an essential component of adaptive human functioning (Dobbs et al., 2007), and dysfunction in emotional expression is a defining feature of several types of psychopathology (Kring, 2008). In general, increased emotional expressivities have been associated with feelings of well-being and secure attachments (Kerr et al., 2003).

Considering the importance of emotion in the formation and maintenance of attachment in early childhood and the stability of attachment style over an entire lifespan, it seems reasonable to expect emotion to continue to play a major role in adult life, particularly in adult attachment relationships. There is little literature on adult participants that addresses this issue, and existing work focuses almost entirely on the experience of emotion rather than its expression (Kerr et al., 2003). Pistole (1995) examined the emotional reactions of college students to the end of romantic relationships. Insecure students had a more negative experience than those who were securely attached. Collins (1996) discovered that students' explanations for relationship events differed depending on their attachment style. Ambivalent students were more likely than the other types to react to events with strong negative emotions. Avoidant adults vigorously denied feeling distressed and were more inclined to report emotionally unstable. The above findings demonstrate differences in emotional experiences related to attachment style, and they imply that differences in emotional expressivity may also exist. According to Mikulincer and Shaver (2007), individuals who are securely attached to their attachment figure can comfortably express their emotions in challenging situations because they do not resist their negative emotions and know their relationships are secure when dealing with these negative emotions. Individuals who are avoidantly attached to their attachment figure, on the other hand, cannot risk allowing their emotions to flow freely. Their defensive system is intended to suppress emotional states. Because they avoid intimacy, avoidant people avoid proximity-enhancing behaviors as well. As a result, they may be uncomfortable with happiness and joy, trying to suppress emotional reactions. People who are anxiously attached to their partner, as opposed to avoidants, overestimate their negative emotions. They make an effort to maintain and amplify their emotions.

Furthermore, some studies (Tacon et al., 2001) revealed that avoidant people could suppress their negative emotions. Individuals with high attachment avoidance disclosed fewer emotional cues than less avoidant people involved (Garrison et al., 2012). Furthermore, research indicates that even though securely attached people express many emotions,

insecurely attached people express a constricted range of emotions (Mikulincer & Shaver, 2005).

Block and Block (1980) proposed that children's ego over-control and under-control would be associated with quite low versus increased emotional expression. Children, who are under-control, rather than over-control are more likely to express their emotions, particularly positive emotions, and approach-related anger, without taking a moment to consider the appropriateness of such expression. School-aged children who are over-controlled, on the other hand, would be expected to be relatively low in the overt expression of emotion due to their inhibition, though they are also primed to internalize emotions such as sadness and anxiety (Eisenberg, Cumberland, et al., 2001; Watson et al., 1999). Less clear are the links between parental warmth and expressivity and children's reactive control and level of expressivity. Over-controlled (instead of impulsive or under-controlled) children are more likely to be suppressed and introverted (Block & Block, 1980; Derryberry & Rothbart, 1997; Huey & Weisz, 1997). Shy or hesitant behavior in children has been associated with overly attentive (i.e., warm and controlling) parenting in situations where such parenting is unnecessary (Rubin & Burgess, 2002).

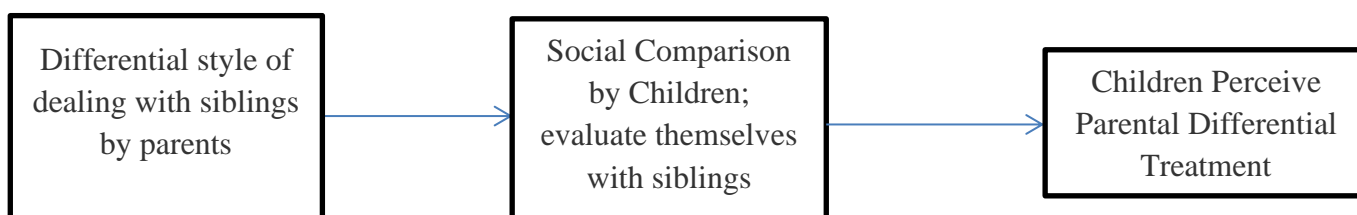
The relationships between parental warmth and expressivity and children's reactive control and level of expressivity are less clear (Eisenberg et al., 2003). In other words, few studies have been conducted on the effect of PDT on the emotional expressivity of young adults. As a result, the current study investigated the impact of differential parenting on the emotional expressivity of young adults. As mentioned earlier, most studies of the perceived effects of discriminatory treatment have been conducted on children and adolescents. However, as the child grows into a young adult, there is some evidence that perceived discriminatory treatment remains an important family dynamic. As a result, the current study adds to the rather limited evidence of young adults' perceptions of Perceived Differential Treatment and investigates its impact on attachment styles and emotional expressivity.

THEORETICAL FRAMEWORK:

SOCIAL COMPARISON THEORY:

Leon Festinger, a psychologist, proposed social comparison theory in 1954, claiming that humans have an inherent desire to evaluate themselves, almost always in comparison with others. People judge themselves in various ways, and one of the most common ways is through social comparison or analyzing the self in comparison to others (Festinger, 1954). He believed that we engage in this comparison process to establish a standard against which we can accurately assess ourselves. The two types of social comparison are upward and downward social comparison.

The social comparison process involves people knowing themselves by comparing their attitudes, skills, and characteristics with others, and these comparisons are often associated with self-esteem (Feinberg et al., 2000).). Upward comparisons reduce self-esteem, as opposed to comparisons with people with less favorable experiences and outcomes (downward comparisons) (Mendes et al., 2001). In most cases, we try to compare ourselves to fellow groups and those who share characteristics (Kesici & Erdogan, 2010). As a result, children with low self-esteem often compare themselves to their siblings (Feinberg et al., 2000). Children can use parental discriminatory treatment to infer how parents will evaluate and internalize these evaluations. Negative self-assessment can result from adverse comparisons with siblings, increased anxiety, depressive symptoms, and problematic behavior (cigarette use, alcohol use, school refusal, etc. .; McHale et al., 1995; Kowal et al., 2002; Shanahan et al., 2008; Loeser et al., 2016). In addition, underprivileged children often have problems of trust and resentment, and these feelings only harm other relationships as they grow older (Heinonen et al., 2005). Parenting practices can affect a child's psychosocial well-being (Boyle et al., 2004). Parents can adjust their growth to suit their children's personalities and needs (Ceresnie, 2015), but some children say that "parental behavior is unfairly directed at them and their siblings. I believe (Stocker et al., 1997). In fact, studies show that PDT is common in many families (65% in the United States, Brody et al., 1998; 63.3% in Belgium, Jeannin and Van Leeuwen, 2015).



The social comparison theory incorporates inspiration, as demonstrated by self-evaluation and self-enhancement. Self-evaluation occurs when an individual looks for positive characteristics based on the best person with someone he compares himself. On the other hand, Self-enhancement occurs when an individual wonders what aspects of him ought to be improved to advance to the level of goodness with which he is comparing himself. According to social comparison theory, studies show that siblings who receive favorable treatment (ie, more affection, more support) are on various individual adaptation indicators, such as (Richmond et al., 2005) shows better performance, less negative emotions, and significantly better adjustments (i.e. less affection, less support) (Dunn, Stocker, & Plomin, 1990; Feinberg & Hetherington, 2001). Treatment is associated with better individual outcomes.

CHAPTER 2

REVIEW OF LITERATURE

Differential Parenting

Even though early childhood experiences are essential in developing competence in intimate relationships, researchers have only lately begun to look at the sibling relationship as a crucial component of the early family environment (Brody et al., 1998). The children reared in the same family are not always alike (Plomin & Daniels, 1987). Differential parental treatment is one key family factor that may lead to this disparity.

Plomin and Daniels (1987) were the first to point out that siblings from the same family can grow up to be completely different, despite sharing the same environment (Poria & Pike, 2008). Children's experiences in their own families are often more varied than those of children from various families; thus, these differences can be rather noticeable (Plomin & Daniels, 1987).

Quantitative genetic research has revealed two categories of environmental variance: shared and nonshared (Rowe & Plomin, 1981). Shared ecological effects enable siblings to have similar results, whereas nonshared environmental impacts make siblings have different outcomes, i.e., environments influence children individually (Plomin & Daniels, 1987). Nonshared environmental processes can include being introduced to different backgrounds or being subjected to the same setting but in another way, such as parental treatment of siblings or favoritism. Shared and nonshared environments are not separate components but rather diverse effects obtained from the same environmental element (Deater Deckard, 2000). A second essential contribution of behavioral genetics research has demonstrated that nonshared settings are the most critical environmental effect for most outcomes.

The best way to characterize diverse parenting approaches within the family is to look at nonshared environmental variables. Nonshared environmental forces cause disparities between siblings rather than shared ones (Boyle et al., 2004). Ecological factors that differ for children in a family and contribute to diverse outcomes are nonshared environments. Environmental influences that are not shared refer to experiences/events distinct to each child and arise both within and outside the family, such as differential peer interactions and differential extracurricular activities (Boisvert, 2011).

This concept sparked a drive to look into particular characteristics of children's environments linked to various sibling outcomes. PDT (parental differential treatment) as an idea emerged (Poria & Pike, 2008). The easiest way to characterize parental differential treatment is how

parents treat their children regarding one another (Feinberg & Hetherington, 2001). Differential parental treatment refers to how parents treat children in the same family differently or how they perceive their treatment (Plomin et al., 2001). Differential parenting describes disparities in sibling raising situations where one child receives more warmth and affection or more harshness and negativity than the other (Browne, 2012). Siblings in the same family are not treated equally by their parents. Differential parenting refers to disparities in parenting amongst siblings within the same family. Differential parenting relates to poor sibling outcomes in the general sibling literature, including minor prosocial conduct and involvement, greater competition, and increased conflict (Brody et al., 1992).

Differentiating parenting impacts children's behavior (Burt et al., 2006) and stems from sibling differences (Richmond, Stocker, & Rienks, 2005).

The cognitive and affective models formed due to the early nonshared environment provide two distinct but connected paths between the early familial environment and young adult love relationships (Rauer, 2007). Work demonstrating that individuals with different attachment types invest their self-esteem in distinct CSWs exemplifies the link between these two processes. Park et al. (2004) discovered that secure people were more inclined to base their self-esteem on familial support than fearful and dismissive people. On the other hand, individuals with preoccupied attachments were more likely to seek self-esteem based on the approval of others, while dismissing individuals was the least likely.

Attachment style

The investigation of attachment-related 'states of mind' involves discourse coherence and defensive processes and those examining adult relationship styles (Stein et al., 1998). Attachment styles, or typical ways in which a person interacts closely with others, have been discussed as possible mechanisms to explain the relationship between PDT and the aforementioned young adult outcomes. Stein et al., 1998 identified terms of an individual's ability to relate to others. The authors postulate that insecure styles are, in fact, best seen as strategies for dealing with interpersonal problems at the more extreme uncertain level. If this conceptualization of attachment style is correct, the lack of differentiation between insecure styles and psychological disorders is observable. The limit to which such styles are dysfunctional becomes a more critical element as yet no measures exist to tackle the degree of insecurity involved in attachment styles. Differential parental treatment is an important source of a nonshared family environment responsible for differences in siblings' social behavior and psychological adjustment. The experiences of young children and adolescents with differential supportive and disciplinary parenting are related to a variety of indicators of

social and emotional adjustment, such as children's sense of competence and self-worth (Dunn, Stocker, & Plomin, 1990), personality (Baker & Daniels, 1990), behavioral problems and psychopathology (Allen, Wagner, & Cohen, 1994). Not surprisingly, the child who receives disfavor in the family—that is, the one who receives less support and more discipline—demonstrates poorer adjustment outcomes than the favored sibling.

Bowlby explained expectations or beliefs incorporated into working models of self (a model based on perceptions of the worthiness of the self to be noticed and cared for) and others (a model based on perceptions of the likelihood of the attachment figure being caring and responsive). When developed, these internalized working models constitute an interpretive system through which past parenting experiences influence future relational behavior is interpreted and understood. Parent-child relations that are warm, responsive, and stable foster the development of secure parental attachment (i.e., positive models of self and others). Parenting that is rejecting or inconsistently responsive and available gives rise to insecure parental attachment manifested by child avoidance of or uncertainty toward the parent (i.e., negative models of self and other) (Ainsworth, Blehar, Waters, & Wall, 1978). We focus on this notion that constitutes insensitive and unresponsive parenting, including the relative deprivation of parental warmth and affection. In other words, it is the direct level of warmth and love you receive from a parent and what you receive relative to your sibling that leads to attachment insecurity. Plomin and Daniels (1987) argued that the anxiety and distress generated by within-family differences in parenting might be more critical than between-family differences in its adverse effects on children's social and emotional adjustment (Anderson, Hetherington, Reiss, & Howe, 1994).

Although Minde et al. (1990) hypothesized the existence of systematic within-family differences in parent-child attachment as an outcome of children's formative experiences with differential parental treatment, the relationship between differential parenting and attachment style remains unverified for older children. According to Boll, Ferring, and Filipp (2003), even after childhood, PDT is an important topic, as adult children are often in constant contact with their parents. In addition, adults may constantly compare themselves to their siblings throughout their lives, especially in relation to their parents (Boll et al., 2003). Various functions of PDT, such as identity verification, parental care, responsibility, and care, may be associated with adult children (Volkom, 2006). But for some reason, the equal treatment of sibling parents seems to be most commonly associated with the highest quality of sibling relationships. Low self-esteem and preoccupied attachment-style emotions were associated with greater distress in loving relationships, including more conflict, jealousy, and

ambiguity. Participants who received more love from their parents than their siblings showed greater self-esteem and greater awareness that their siblings were jealous of them. These impressions of sibling jealousy were particularly associated with insecure attachment patterns specifically dismissive and apprehensive classes. These two anxious attachment styles were linked to lower quality romantic relationships associated with low conflict but high uncertainty (for all those affirming a dismissing attachment style) or high disharmony and bitterness but low levels of ambivalence (for those supporting a fearful attachment style). The differences in parental controls are directly related to the stress of romantic relationships, which was not mitigated by the jealousy and style of attachment of the siblings. Differences in paternal dominance were associated with higher levels of conflict and jealousy in romantic partnerships (Rauer & Volling, 2007).

Attachment style, or the conventional way a person responds to others in close relationships, is thought to be a plausible mechanism mediating the links between PDT and the other outcomes in young adulthood (Young, 2011).

Emotional Expressivity

The extent to which one expresses one's emotions and thoughts to another is emotional expressivity. Underlying characteristics of emotional expressivity (e.g., the ability to make effective displays) promote greater mental and physical well-being (Leising, Muller, & Hahn, 2007). Overall, enhanced emotional expressivities are associated with well-being and secure attachments, which are protective factors against suicide (Kerr, Melley, Travea, & Pole, 2003). Suicidal thoughts are adversely related to overall emotional expressiveness in samples of American adults, which is appropriate for the nature of emotional expressivity (Diggs & Lester, 1996).

Emotional expressiveness is a construct that identifies individual variability in the degree to which individuals express their emotions externally, and it differs significantly from other types of emotional reactions. Emotionality, for example, has historically been defined as the proclivity to move from a pleasant or neutral emotional state to a negative one (Buss & Plomin, 1975; Thurstone, 1951; Watson & Clark, 1984), or, more broadly, as a predisposition to experience positive or negative emotions (Tellegen et al., 1988). Larsen's (1984) definition of affect intensity is represented by emotional experience. Emotional expressiveness is simply the external expression of emotion, irrespective of polarity (positive or negative) or modality (facial, verbal, or gestural) (Kring et al., 1994).

People vary in expressing their emotions externally, and these distinctions have long presented psychologists with novel and interesting difficulties. Nevertheless, emotional

expressiveness has sparked the interest of researchers from a wide range of disciplines, including nonverbal communication, psychological illnesses, personality, social psychology, and psychotherapy. The idea that one must convey one's thoughts and emotions in order to communicate with another is fundamental to the concept of communication. Individuals differ in their overall pattern and style of expressing feelings, referred to as emotional expressivity (Halberstadt et al., 1995). Even though there have been other definitions of emotional expressivity (Gross & John, 1998), Halberstadt and colleagues' (1995) definition is comprehensive. *Emotional expressivity* is "an individual's consistent pattern or style of showing nonverbal and verbal expressions that frequently, but not always, appear to be emotion-related." Emotional expressivity that is consistently high or low could be linked to at least two elements of control: reactive control and effortful control (Eisenberg et al., 2003).

The behavioral changes (e.g., facial, postural) that often precede an emotion are emotional expressivity (Kring et al., 1994). Numerous studies have identified disparities in the degree of emotional expressivity observed in men and women; women are often more expressive of a variety of emotions, including happiness, sadness, and fear (Brody, 1993; Carstensen et al., 1995; Kring & Gordon, 1998; Searle & Meara, 1999). Various studies have revealed that women express more positive and negative emotions than men (Carstensen et al., 1995; Fujita et al., 1991; Gross & John, 1998; Notarius & Johnson, 1982).

Parental emotion socialization, the process through which parents teach their children about an emotional experience, expression, and modulation, is a fundamental way children learn about feelings (Field & Walden, 1982). According to social learning theory (Bandura, 1977), parents' emotional expression may impact their children's ability to express, comprehend emotions, and regulate them (Halberstadt et al., 1993). The appropriateness of dynamic displays depends on the environment, and persons with extremely high or low expressivity are likely to be seen as socially inept, putting them at a social disadvantage (Gottman et al., 1997; Halberstadt et al., 2001). Therefore, it is reasonable to suppose that excessive or low expressivity can arise due to difficulties with emotion-related control in individuals. Cole et al., (1996) discovered that preschoolers who were extremely expressive or non-expressive while watching a film designed to elicit a negative mood were more prone to externalizing behavioral problems. A range of factors influences emotional expressivity, including individual differences in emotional experience, emotion-related regulation or control, and familial and cultural emotion-related training. Block and Block (1980) discovered relatively minor, at best, relationships between a battery of behavioral measures of ego control and adults' reports of children's emotional expressiveness.

MOTIVATION, RESEARCH GAP, OBJECTIVES AND HYPOTHESES

The motivation of the Study

One of the most difficult jobs in the world is parenting. Parents try to give their best while nurturing their children yet display some differential treatment towards the children within the same family, and its impact lasts long and persists till adulthood. It may further impact their emotional expression and their future relationships. According to Rauer and Volling (2007), the equal parental treatment of siblings was associated with secure attachments and the quality of positive romantic relationships among college students. Moreover, higher PDT scores were negatively associated with attachment style, even among siblings who were perceived to be treated more positively (Young, 2011). These studies motivated me to study the effect of fathers' and mothers' differential parenting on young males' and females' emotional expressivity and attachment style.

Research Gap

The significant proportion of research on the effects of Perceived Differential Treatment has been conducted with children and adolescents; however, there is less evidence that Perceived Differential Treatment continues to be a vital family dynamic as children develop into young adulthood and how it affects their Emotional Expressivity and future attachment style. Also, there has rarely been a study that looked at the effect of Differential Parenting by fathers and mothers on young males' and females' Emotional Expressions. As a result, the current study aimed to add to the literature on the impact of fathers' and mothers' differential parenting on the young males' and females' emotional expressivity and attachment style.

Objectives

The objectives of this study were to see:

1. The impact of Fathers' and Mothers' Differential Treatment on Emotional Expressivity of Young Males.
2. The impact of Fathers' and Mothers' Differential Treatment on Attachment Styles of Young Males.
3. The impact of Fathers' and Mothers' Differential Treatment on Emotional Expressivity of Young Females.
4. The impact of Fathers' and Mothers' Differential Treatment on Attachment Styles of Young Females.

Hypotheses:

H1 Parental Differential Treatment is negatively correlated with the emotional expressivity of young females.

H2 Parental Differential Treatment is positively correlated with the anxious attachment style of young females.

H3 Parental Differential Treatment is positively correlated with the avoidant attachment style of young females.

H4 Parental Differential Treatment is negatively correlated with the emotional expressivity of young males.

H5 Parental Differential Treatment is positively correlated with the anxious attachment style of young males.

H6 Parental Differential Treatment is positively correlated with the avoidant attachment style of young males.

CHAPTER 3: METHODOLOGY

Sample:

In this study, the total number of participants taken was 150 (75 females, 75 males) in 18-25 years who had siblings. The method of sampling used in this study was purposive.

Research Design:

The design of this research is correlational. This research is a quantitative study that has been done through a survey method (Google form), where primary data was collected. Statistical data analysis was done to study the impact of the Predictor variable (Perceived Differential Treatment) on the criterion variables (Emotional Expressivity and Attachment Style).

Variables:

1. Independent variable: Perceived Differential Parenting
2. Dependent variables: (a) Emotional Expressivity (b) Attachment Style

Statistical Analyses:

The data was analyzed using Statistical Package for Social Science (SPSS 21.0) where descriptive statistics (mean and standard deviation), correlation, and regression were used.

Tools Used:

Perceived Differential Treatment (Sibling Inventory of Differential Experiences):

The SIDE assesses sibling differential experience in sibling interaction, parental treatment, peer characteristics, and individual-specific events. Daniel and Plomin introduced it in 1985. This study was interested in the differential treatment by parents. This domain has four subscales: differential maternal affection, differential maternal control, differential paternal affection, and differential paternal control. Participants took the SIDE twice, once for maternal PDT and once for paternal PDT. The Differential Affection subscale contains five items that assess parents' differential pride, enjoyment, understanding, interest, and favoring their two children. The Differential Control subscale contains four items that assess parents' differential strictness, punishment, discipline, and blame directed at their two children. Each item has a possible rating ranging from "1" to "5". A rating of "1" indicates that specific

parental behavior is directed much more toward the participant's sibling than toward the respondent. A "3" rating indicates that both siblings experience the same amount of parental behavior. A rating of "5" indicates that the parental behavior is primarily directed at the participant rather than the sibling. In a sample of 57 biological sibling pairs, Daniels and Plomin (1985) found that two-week test-retest reliabilities for the PDT subscales were .77 for both Mother's Differential Control and Father's Differential Affection, .82 for Mother's Differential Affection, and .85 for Father's Differential Control.

Emotional Expressivity Scale:

The EES is designed to assess emotional expressivity in general, not the content of the expressed emotions (i.e., discrete emotions or valence). Kring, Smith, and Neale introduced it in 1994. Initially, 40 items were generated to sample the domain of emotional expressiveness. The EES response format is a 6-point Likert scale (1 = never true and 6 = always true), allowing participants to rate how much each item applies to them. Seventeen of the original EES items met the selection criteria and thus made up the final version of the scale. Across seven administrations, the EES was reported to be strongly reliable, with an average alpha (Cronbach, 1951) of .91 (following r-to-z transformation).

Adult Attachment Scale:

The Adult Attachment Scale (AAS) was established in 1990, but it was based on the prior study of Hazen and Shaver (1987) and Levy and Davis (1988). The scale was created by breaking down the initial three prototypical characterizations (Hazen & Shaver, 1987) into 18 items. The scale consists of 18 items that are scored on a 5-point Likert-type scale (1 indicating "not at all characteristic of me," 5 indicating "very characteristic of me"). It assesses adult attachment styles, including "Secure," "Anxious," and "Avoidant," which are defined as:

Secure = high Close and Depend on subscale scores, low Anxiety subscale scores.

Anxious = high Anxiety subscale score, moderate Close and Depend on subscale scores.

Avoidant = low scores on the subscales Close, Depend, and Anxiety.

The CLOSE scale assesses a person's comfort level with closeness and intimacy. The DEPEND scale assesses how much a person believes he or she can rely on others to be accessible when needed. The ANXIETY subscale assesses how concerned a person is about being rejected or unloved. Cronbach's alpha coefficients of .69 for Close, .75 for Depend, and .72 for Anxiety were reported by Collins and Read (1990).

Procedure

The study was conducted on 75 males and 75 females (n= 150) 18-25 years. This research aimed to study the impact of Perceived Differential Treatment on the Emotional Expressivity and Attachment Style of Young Adults. The study comprised three questionnaires; the Perceived Differential Treatment (SIDE) scale, Emotional Expressivity scale, and Adult Attachment Style scale, which consisted of 54 items. Informed Consent was obtained from the participants. The study's objectives were explained to the subject, and informed confidentiality and anonymity were also assured. The subjects were asked to fill out the questionnaire via Google forms. It took approximately 15 to 20 minutes for the subject to complete the questionnaire. After collecting the data, scoring was done and computed statistical results.

INSTRUCTIONS

Following Instructions were given to the subjects:

For the Perceived Differential Treatment scale, "These questions concern your and your siblings' relationships with your mother and father. Answer the questions while considering how your parents treat you and your siblings and how things are now or have been in your family. If you have more than one sibling, please answer these questions with the sibling closest in age to you in mind. If you were both treated similarly, choose the number "3." If you were treated in a certain way more frequently, choose "4" or "5", depending on how much more. If your sibling was treated differently more frequently, choose "2" or "1," depending on how much more. The first nine items are related to maternal PDT, while the last nine are paternal PDT."

For the Emotional Expressivity Scale, "The 17 statements that follow are about you and your emotions. Please select the option that aptly reflects YOU in each of the statements from the mentioned 6-point scale (1 = never true, 6 = always true)."

For Adult Attachment Style, "Please rate how well each of the following statements defines your feelings about close relationships in general. I need you to consider how you feel in all close relationships, including romantic, friendship, and family relationships. Kindly use the scale below to evaluate the extent to which each statement is typical of you, with 1 indicating "not at all characteristic," 3 indicating "neutral," and 5 indicating "very characteristic."

CHAPTER 4: RESULTS

The data was analyzed for females and males using descriptive statistics, correlation, and regression analysis.

Table 1: Descriptive Statistics of Perceived Differential Treatment, Emotional Expressivity, and Attachment Styles of Females

	Father's Differential Treatment	Mother's Differential Treatment	Emotional Expressivity	Anxious Attachment Style	Avoidant Attachment Style
N	75	75	75	75	75
Mean	3.99	5.56	89.32	20.85	33.99
Std. Error of Mean	.410	.369	.565	.684	.947
Std. Deviation	3.547	3.193	4.894	5.922	8.203

For Females, The mean and S.D. for Father's Differential Treatment came out to be 3.99 and 3.547 respectively; the mean and S.D. for Mother's Differential Treatment came out to be 5.56 and 3.193 respectively; the mean and S.D. for Emotional Expressivity came out to be 89.32 and 4.894 respectively; the mean and S.D. for Anxious Attachment Style came out to be 20.85 and 5.922 respectively; the mean and S.D. for Avoidant Attachment Style came out to be 33.99 and 8.203 respectively.

Table 2: Descriptive Statistics of Perceived Differential Treatment, Emotional Expressivity, and Attachment Styles of Males

	Father's Differential Treatment	Mother's Differential Treatment	Emotional Expressivity	Anxious Attachment Style	Avoidant Attachment Style
N	75	75	75	75	75
Mean	2.17	1.89	78.95	21.75	37.40
Std. Error of Mean	.171	.167	.590	.422	.684
Std. Deviation	1.483	1.448	5.107	3.651	5.925

For Males, The mean and S.D. for Father's Differential Treatment came out to be 2.17 and 1.483 respectively; the mean and S.D. for Mother's Differential Treatment came out to be 1.89 and 1.448 respectively; the mean and S.D. for Emotional Expressivity came out to be 78.95 and 5.107 respectively; the mean and S.D. for Anxious Attachment Style came out to

be 21.75 and 3.651 respectively; the mean and S.D. for Avoidant Attachment Style came out to be 37.40 and 5.925 respectively.

Table 3: Correlation between Perceived Differential Treatment, Emotional Expressivity, and Attachment Styles of Females

		Father's Differential Treatment	Mother's Differential Treatment	Emotional Expressivity	Anxious Attachment Style	Avoidant Attachment Style
Father's Differential Treatment	Pearson Correlation	1	.320**	-.315**	.266*	.137
	Sig. (2-tailed)		.005	.006	.021	.243
	N	75	75	75	75	75
Mother's Differential Treatment	Pearson Correlation	.320**	1	-.239*	.322**	.148
	Sig. (2-tailed)	.005		.039	.005	.206
	N	75	75	75	75	75
Emotional Expressivity	Pearson Correlation	-.315**	-.239*	1	-.053	.022
	Sig. (2-tailed)	.006	.039		.652	.854
	N	75	75	75	75	75
Anxious Attachment Style	Pearson Correlation	.266*	.322**	-.053	1	.059
	Sig. (2-tailed)	.021	.005	.652		.612
	N	75	75	75	75	75
Avoidant Attachment Style	Pearson Correlation	.137	.148	.022	.059	1
	Sig. (2-tailed)	.243	.206	.854	.612	
	N	75	75	75	75	75

** . Correlation is significant at the 0.01 level (2-tailed).

* . Correlation is significant at the 0.05 level (2-tailed).

Table 2 shows the correlation between the Parental Differential Treatment and the Emotional Expressivity and Attachment Styles of females.

Differential Treatment by fathers was found to have a negative significant relationship with the Emotional Expressivity of females ($r=-0.315$, $p < 0.01$) and a positive significant relationship with the Anxious Attachment Style ($r=0.266$, $p < 0.05$).

Whereas, Differential Treatment by mothers was also found to have a negative significant relationship with the Emotional Expressivity of females ($r=-0.239$, $p < 0.05$) and a positive significant relationship with the Anxious Attachment Style ($r=0.322$, $p < 0.01$).

Table 4: Correlation between Perceived Differential Treatment, Emotional Expressivity, and Attachment Styles of Males

		Father's Differential Treatment	Mother's Differential Treatment	Emotional Expressivity	Anxious Attachment Style	Avoidant Attachment Style
Father's Differential Treatment	Pearson Correlation	1	.380**	-.231*	.008	.293*
	Sig. (2-tailed)		.001	.046	.944	.011
	N	75	75	75	75	75
Mother's Differential Treatment	Pearson Correlation	.380**	1	-.246*	.043	.348**
	Sig. (2-tailed)	.001		.034	.712	.002
	N	75	75	75	75	75
Emotional Expressivity	Pearson Correlation	-.231*	-.246*	1	-.146	-.134
	Sig. (2-tailed)	.046	.034		.212	.251
	N	75	75	75	75	75
Anxious Attachment Style	Pearson Correlation	.008	.043	-.146	1	.103
	Sig. (2-tailed)	.944	.712	.212		.380
	N	75	75	75	75	75
Avoidant Attachment Style	Pearson Correlation	.293*	.348**	-.134	.103	1
	Sig. (2-tailed)	.011	.002	.251	.380	
	N	75	75	75	75	75

** . Correlation is significant at the 0.01 level (2-tailed).

* . Correlation is significant at the 0.05 level (2-tailed).

Table 3 shows the correlation between the Parental Differential Treatment and the Emotional Expressivity and Attachment Styles of males.

Differential Treatment by fathers was found to have a negative significant relationship with the Emotional Expressivity of males ($r=-0.231$, $p < 0.05$) and a positive significant relationship with the Avoidant Attachment Style ($r=0.293$, $p < 0.05$).

Whereas, Differential Treatment by mothers was also found to have a negative significant relationship with the Emotional Expressivity of males ($r=-0.246$, $p < 0.05$) and a positive significant relationship with the Avoidant Attachment Style ($r=0.348$, $p < 0.01$).

Table 5: Predicting Emotional Expressivity of Females from the Perceived Differential Treatment

Model	Unstandardized Coefficients		Standardized Coefficients	t	Sig.	Adjusted R Square
	B	Std. Error	Beta			
(Constant)	91.053	.815		111.663	.000	
1 Father's Differential Treatment	-.435	.153	-.315	-2.836	.006	.087

a. Dependent Variable: Emotional Expressivity

With every unit increase in Perceived Differential Treatment by Fathers, emotional expressivity of females decreases by 0.435 units. The adjusted R square value indicates that Perceived Differential Treatment by fathers explains 8.7% variation in emotional expressivity of females. Thus, it suggests that the differential treatment by the mothers don't have much effect on their daughters' emotional expressivity.

Table 6: Predicting Anxious Attachment Style of Females from the Perceived Differential Treatment

Model	Unstandardized Coefficients		Standardized Coefficients	t	Sig.	Adjusted R Square
	B	Std. Error	Beta			
(Constant)	17.536	1.316		13.329	.000	
1 Mother's Differential Treatment	.597	.206	.322	2.903	.005	.091

a. Dependent Variable: Anxious Attachment Style

With every unit increase in Perceived Differential Treatment by mothers, Anxious Attachment Style of females increases by 0.597 units. The adjusted R square value indicates that Perceived Differential Treatment by mothers explains 9.1 % variation in Anxious Attachment Style of females. Thus, it suggests that the differential treatment by the fathers don't have much effect on their daughters' anxious attachment style.

Table 7: Predicting Emotional Expressivity of Males from the Perceived Differential Treatment

Model	Unstandardized Coefficients		Standardized Coefficients	t	Sig.	Adjusted R Square
	B	Std. Error	Beta			
(Constant)	80.587	.951		84.705	.000	
1 Mother's Differential Treatment	-.866	.400	-.246	-2.165	.034	.047

a. Dependent Variable: Emotional Expressivity

With every unit increase in Perceived Differential Treatment by mothers, emotional expressivity of males decreases by 0.866 units. The adjusted R square value indicates that Perceived Differential Treatment by mothers explains 4.7% variation in emotional expressivity of males. Therefore, it suggests that the differential treatment by the fathers don't have much effect on their sons' emotional expressivity.

Table 8: Predicting Avoidant Attachment Style of Males from the Perceived Differential Treatment

Model	Unstandardized Coefficients		Standardized Coefficients	t	Sig.	Adjusted R Square
	B	Std. Error	Beta			
(Constant)	34.701	1.067		32.509	.000	
1 Mother's Differential Treatment	1.426	.449	.348	3.176	.002	.109

a. Dependent Variable: Avoidant Attachment Style

With every unit increase in Perceived Differential Treatment by mothers, Avoidant Attachment Style of males increases by 1.426 units. The adjusted R square value indicates that Perceived Differential Treatment by mothers explains 10.9 % variation in Avoidant Attachment Style of males. Therefore, suggesting that the differential treatment by the fathers don't have an overall effect on their sons' avoidant attachment style.

CHAPTER 5: DISCUSSION

The purpose of this study was to study the impact of perceived differential parenting on the emotional expressivity and attachment styles of young males and females. Previous research has shown that parents treat their daughters and sons differently at home. The findings of this study were consistent with others that have found that children are treated differently by their parents at home (Brody & Stoneman, 1994; Brody et al., 1987; Daniels et al., 1985; McHale & Pawletko, 1992; Stocker, 1995; Stocker et al., 1989). Most of the studies on the effect of differential parenting between the siblings have mainly been conducted with children and adolescents, whereas the current study focused on the effect of fathers' and mothers' differential parenting on young males and females. As at this stage intimate relationships become an important focus for adults, the current research also studied the impact of differential treatment on their attachment styles. Furthermore, this study also considered how the emotional expression of young males and females is affected in relation to the perceptions of Parental Differential Treatment.

With regard to differential parenting in relation to emotional expression, it was hypothesized that Parental Differential Treatment is negatively correlated with the emotional expressivity of young females and males. These hypotheses were accepted for both, males and females. The emotional expression was linked with the perceptions of PDT in Young Adults. Specifically, females were emotionally less expressive when they perceived the differential treatment by their fathers whereas, for males, their emotional expression got affected when they perceived the differential treatment by their mothers. These findings support previous research that emotionality in children is associated with differential parental treatment (Brody et al., 1992). Emotionality was negatively related to parents' displays of differential affection or control, which was consistent with the findings on differential parenting. Over-controlled children are found to be particularly emotionally less expressive due to their inhibition; even they are also predisposed to internalizing emotions like sadness and anxiety (Eisenberg, Cumberland, et al., 2001; Watson et al., 1999).

Further, to study the impact of differential treatment by parents on the attachment styles of young males and females, two types of attachment styles were included i.e. Anxious Attachment Style and Avoidant Attachment Style. The other two hypotheses proposed for females were- "Parental Differential Treatment is positively correlated with the anxious attachment style of young females", and "Parental Differential Treatment is positively correlated with the avoidant attachment style of young females"; Out of these two, the former

hypothesis got accepted and the latter got rejected. In other words, there was a significant positive correlation between the perceived parental differential treatment and the anxious attachment style of the females. And it was also found out that differential parenting by the mothers resulted in having a greater impact on the anxious attachment style of their daughters.

Two similar hypotheses were proposed for males- "Parental Differential Treatment is positively correlated with the anxious attachment style of young males", and "Parental Differential Treatment is positively correlated with the avoidant attachment style of young males". In the case of males, the latter hypothesis got accepted and the former hypothesis got rejected. It means that there was a significant positive correlation between the perceived parental differential treatment and the avoidant attachment style of the males. And the differential parenting by the mothers resulted in having a greater impact on the avoidant attachment style of their sons. Siblings who experience differential treatment are likely to report insecure attachments (Rauer & Volling, 2007). This finding suggests that higher levels of PDT in a family, irrespective of which sibling is handled more favourably, are associated with more insecure attachment styles in children, which are further associated with perceptions of bad quality sibling relationships (Rauer, 2007). Overall in the case of attachment styles, it can be inculcated that differential treatment by fathers does not affect the attachment styles of their sons and daughters. Previous researchers have not examined much about differential parenting in relation to young adults' further attachment styles; in one similar study, however, adolescent twins' findings of differential parental treatment were unrelated to the twins' reported need for approval or preoccupation with relationships, both of which are predictors of an anxious-ambivalent attachment orientation in adolescents. Discomfort with closeness, the attachment index most closely associated with an avoidant attachment style in adolescents, was associated with reports of differential parenting in twins (Feeney et al., 1994). Regardless of the fact that longitudinal studies seem to provide the best evidence of consistency in the quality of early parent-child relationships and later relationships, to date no studies have established the relationship quality from childhood to late adulthood. Waters, Weinfield, and Hamilton (2000) came to the closest by studying attachment from infancy to young adulthood. The researchers noted that attachment is stable but deformable as a consequence of global life events, highlighting the significance of investigating connections between early parent-child relationships and future relationship quality. Collins and Read (1990) found that young adults' attachment styles with others were associated to their memories of their parents' relationships. Parental warmth and rejection

were encountered to be significantly related to young adults' feelings of intimacy, anxiety about being neglected or unloved and trouble depending on others.

CONCLUSION

The major focus of the current study was to examine the impact of perceived differential parenting on the emotional expressivity and attachment styles of young males and females. The findings of this study indicate that females were emotionally less expressive when they perceived the differential treatment by their fathers whereas, for males the emotional expression got affected when they perceived the differential treatment by their mothers. The findings also indicated that the differential parenting by the mothers resulted in having a greater impact on the anxious attachment style of their daughters and on the avoidant attachment style of their sons. Despite the study's limitations, the findings have implications for clinicians who work with children, adults, parents, and families, as well as researchers who study family dynamics and relationships.

LIMITATIONS

The studies on the chosen topic and context were somewhat limited, and because the experiment was conducted online, random sampling was not possible, so purposive sampling was used, which is a crude method with associated flaws. The study's heavy reliance on technology is bound to introduce flaws. Individuals' performance on the tasks, as well as their responses to the Google forms, may have suffered as a result of the technological struggle. Furthermore, the sample size is insufficient to guarantee generalizability to the Indian population. And the responses may contain biases, as the Oedipus and Electra complex may impede daughters' and sons' responses to their parents. The study's methodology also had several limitations. The study is based on self-reported data from a single reporter. Individual differences may result in correlations between variables (e.g., reporter mood when completing questionnaires, recent life events, and recent conflicts). Furthermore, self-report measures are susceptible to responding biases such as positive impression management or exaggeration of negative aspects of functioning. Indeed, the current study's relationships between social desirability and all other outcome variables of interest attest to the strength of such response biases. In order to reduce reliance on a single common methodology, it would

be beneficial to incorporate other types of measures, such as interviews or observations of interactions. Lastly, some factors such as birth order, socioeconomic status, parental marital relationship, and so on were not addressed in this study.

IMPLICATIONS

Parenting plays a major role in one's life and it contributes to the development of the personality of a child since the beginning and till the older ages. This study plays a major role as adults while growing perceive things very differently which are unique to each other and all their perceptions contribute in the development of their further relationships and personality. Therefore, this study may help therapists working with families to facilitate family conversations about discriminatory treatment of parents if not previously openly discussed. Presenting a questionnaire as a normal part of a psychological assessment, the family does not consider PDT as a secret or shameful parenting habit, but PDT is a normal phenomenon that occurs in the family and is sometimes positive or you can feel that it can be negative. These psychological interventions focused on fostering strong, warm and supportive bonds between parents and children can have a particularly strong impact on positive future outcomes such as further improvement of their relationships and improved emotional expression. This research can further be used to study the effects of Differential Parenting on the other factors that play a role in adult's life like academic level, adjustment, relationship quality etc.

FUTURE SCOPE OF THE STUDY

This study was the first of its kind to investigate the impact of PDT on Young Adults' Emotional Expression and Attachment Styles, and as such further investigation is called for. The study saw the effect on only two variables i.e. emotional expression and attachment pattern and for future research; more variables could have been incorporated like sibling jealousy, sibling relationship quality, empathy, emotional regulation etc. to understand Parental Differential Treatment. A longitudinal study following families over time would be ideal, beginning when siblings were young and continuing until siblings reached adulthood. Multiple data collection methods (e.g., self-report questionnaires, parent-report questionnaires, and unstructured qualitative interviews, structured interviews such as the Adult Attachment Interview, sibling interactions, and parent-child interactions) and multiple reporters (children, parents, and teachers) would be used.

REFERNCES

- Boisvert, D., Vaske, J., Taylor, J., & Wright, J. P. (2012). The effects of differential parenting on sibling differences in self-control and delinquency among brother–sister pairs. *Criminal Justice Review*, *37*(1), 5-23.
- Boll, T., Ferring, D., & Filipp, S. H. (2003). Perceived parental differential treatment in middle adulthood: curvilinear relations with individuals' experienced relationship quality to sibling and parents. *Journal of Family Psychology*, *17*(4), 472.
- Boll, T., Michels, T., Ferring, D., & Filipp, S. H. (2010). Trait and state components of perceived parental differential treatment in middle adulthood. *Journal of Individual Differences*.
- Brody, G. H., Stoneman, Z., & McCoy, J. K. (1992). Parental differential treatment of siblings and sibling differences in negative emotionality. *Journal of Marriage and the Family*, 643-651.
- Chen, S. H., & Zhou, Q. (2019). Longitudinal relations of cultural orientation and emotional expressivity in Chinese American immigrant parents: Sociocultural influences on emotional development in adulthood. *Developmental psychology*, *55*(5), 1111.
- Conger, K. J., & Conger, R. D. (1994). Differential parenting and change in sibling differences in delinquency. *Journal of Family Psychology*, *8*(3), 287.
- Conrade, G., & Ho, R. (2001). Differential parenting styles for fathers and mothers. *Australian Journal of Psychology*, *53*(1), 29-35.
- Dalton III, W. T., Frick-Horbury, D., & Kitzmann, K. M. (2006). Young adults' retrospective reports of parenting by mothers and fathers: Associations with current relationship quality. *The Journal of general psychology*, *133*(1), 5-18.
- Daniels, D., Dunn, J., Furstenberg Jr, F. F., & Plomin, R. (1985). Environmental differences within the family and adjustment differences within pairs of adolescent siblings. *Child development*, 764-774.
- Eisenberg, N., Valiente, C., Morris, A. S., Fabes, R. A., Cumberland, A., Reiser, M., ... & Losoya, S. (2003). Longitudinal relations among parental emotional expressivity,

- children's regulation, and quality of socioemotional functioning. *Developmental psychology*, 39(1), 3.
- Feinberg, M., & Hetherington, E. M. (2001). Differential parenting as a within-family variable. *Journal of Family Psychology*, 15(1), 22.
- Finzi-Dottan, R., & Cohen, O. (2010). Young adult sibling relations: The effects of perceived parental favoritism and narcissism. *The Journal of Psychology*, 145(1), 1-22.
- Harris, K. M., & Morgan, S. P. (1991). Fathers, sons, and daughters: Differential paternal involvement in parenting. *Journal of Marriage and the Family*, 531-544.
- Jeannin, R., & Van Leeuwen, K. (2015). Associations between direct and indirect perceptions of parental differential treatment and child socio-emotional adaptation. *Journal of Child and Family Studies*, 24(6), 1838-1855.
- Jenkins, J. M., Rasbash, J., & O'Connor, T. G. (2003). The role of the shared family context in differential parenting. *Developmental psychology*, 39(1), 99.
- Kowal, A. K., Krull, J. L., & Kramer, L. (2006). Shared understanding of parental differential treatment in families. *Social Development*, 15(2), 276-295.
- Kowal, A., & Kramer, L. (1997). Children's understanding of parental differential treatment. *Child Development*, 68(1), 113-126.
- Kring, A. M., Smith, D. A., & Neale, J. M. (1994). Individual differences in dispositional expressiveness: development and validation of the Emotional Expressivity Scale. *Journal of personality and social psychology*, 66(5), 934.
- Lauricella, A. M. (2009). *Why do Mommy and Daddy love you more? An investigation of parental favoritism from an evolutionary perspective* (Doctoral dissertation, Bowling Green State University).
- McHale, S. M., Updegraff, K. A., Jackson-Newsom, J., Tucker, C. J., & Crouter, A. C. (2000). When does parents' differential treatment have negative implications for siblings?. *Social Development*, 9(2), 149-172.
- McKinney, C., & Renk, K. (2008). Differential parenting between mothers and fathers: Implications for late adolescents. *Journal of family Issues*, 29(6), 806-827.

- Mcswiggan, M. (2015). Differential Parenting and Parents' Perceptions of their Children: Can Attachment Help Explain This Relationship?.
- Melley, A. M. (2003). The relationship of emotional expression and experience to adult attachment style. *Individual Differences Research*, 1(2), 109.
- Meunier, J. C., Bisceglia, R., & Jenkins, J. M. (2012). Differential parenting and children's behavioral problems: Curvilinear associations and mother–father combined effects. *Developmental Psychology*, 48(4), 987.
- Ong, A. W. H., & Tan, C. S. (2018). Structure of The Sibling Inventory of Differential Experience-Chinese Version (SIDE-C): A Bifactor Model Approach. *Jurnal Psikologi Malaysia*, 32(1).
- Rauer, A. J., & Volling, B. L. (2007). Differential parenting and sibling jealousy: Developmental correlates of young adults' romantic relationships. *Personal Relationships*, 14(4), 495-511.
- Reiss, D., Hetherington, E. M., Plomin, R., Howe, G. W., Simmens, S. J., Henderson, S. H., ... & Law, T. (1995). Genetic questions for environmental studies: Differential parenting and psychopathology in adolescence. *Archives of General Psychiatry*, 52(11), 925-936.
- Şahin, S. M., & Çoksan, S. (2020). The Relationship between Attachment Styles, Love Types, Emotional Expression and Life Satisfaction. *PsyArXiv. March*, 14.
- Shebloski, B., Conger, K. J., & Widaman, K. F. (2005). Reciprocal links among differential parenting, perceived partiality, and self-worth: a three-wave longitudinal study. *Journal of family psychology*, 19(4), 633.
- Sheehan, G., & Noller, P. (2002). Adolescent's perceptions of differential parenting: Links with attachment style and adolescent adjustment. *Personal Relationships*, 9(2), 173-190.
- Sirota, T. (2009). Adult attachment style dimensions in women who have gay or bisexual fathers. *Archives of Psychiatric Nursing*, 23(4), 289-297.
- Tucker, C. J., McHale, S. M., & Crouter, A. C. (2003). Dimensions of mothers' and fathers' differential treatment of siblings: Links with adolescents' sex-typed personal qualities. *Family Relations*, 52(1), 82-89.

Wise, S., & Da Silva, L. (2007). Differential parenting of children from diverse cultural backgrounds attending child care.

Young, L. C. (2011). *Young adults' perceptions of parental differential treatment: measurement and relations to psychological adjustment, attachment style, and close relationships* (Doctoral dissertation).

APPENDICES

Sibling Inventory of Differential Experiences (SIDE; Daniels & Plomin, 1985) – measure of perceptions of past parental differential treatment.

1. Our mother was strict with us (Differential Control DC)
2. Our mother was proud of the things we did (Differential Affection DA)
3. Our mother enjoyed doing things with us (DA)
4. Our mother was sensitive to what we thought or felt (she/he understood us) (DA)
5. Our mother punished us for our misbehavior (DC)
6. Our mother showed interest in the things we liked to do (DA)
7. Our mother blamed us for what another family member did (DC)
8. Our mother tended to favor one of us (DA)
9. Our mother disciplined us (for example, punished or scolded) (DC)
10. Our father was strict with us (Differential Control DC)
11. Our father was proud of the things we did (Differential Affection DA)
12. Our father enjoyed doing things with us (DA)
13. Our father was sensitive to what we thought or felt (she/he understood us) (DA)
14. Our father punished us for our misbehavior (DC)
15. Our father showed interest in the things we liked to do (DA)
16. Our father blamed us for what another family member did (DC)
17. Our father tended to favor one of us (DA)
18. Our father disciplined us (for example, punished or scolded) (DC)

EMOTIONAL EXPRESSIVITY SCALE

1. I don't express my emotions to other people.
2. Even when I'm experiencing strong feelings, I don't express them outwardly.
3. Other people believe me to be very emotional.
4. People can "read" my emotions.
5. I keep my feelings to myself.
6. Other people aren't easily able to observe what I'm feeling.
7. I display my emotions to other people.
8. People think of me as an unemotional person.
9. I don't like to let other people see how I am feeling.
10. I can't hide the way I am feeling.

11. I am not very emotionally expressive.
12. I am often considered indifferent by others.
13. I am able to cry in front of other people.
14. Even if I am feeling very emotional, I don't let others see my feelings.
15. I think of myself as emotionally expressive.
16. The way I feel is different from how others think I feel.
17. I hold my feelings in.

ADULT ATTACHMENT SCALE

1. I find it relatively easy to get close to people.
2. I find it difficult to allow myself to depend on others.
3. I often worry that romantic partners don't really love me.
4. I find that others are reluctant to get as close as I would like.
5. I am comfortable depending on others.
6. I don't worry about people getting too close to me.
7. I find that people are never there when you need them.
8. I am somewhat uncomfortable being close to others.
9. I often worry that romantic partners won't want to stay with me.
10. When I show my feelings for others, I'm afraid they will not feel the same about me.
11. I often wonder whether romantic partners really care about me.
12. I am comfortable developing close relationships with others.
13. I am uncomfortable when anyone gets too emotionally close to me.
14. I know that people will be there when I need them.
15. I want to get close to people, but I worry about being hurt.
16. I find it difficult to trust others completely.
17. Romantic partners often want me to be emotionally closer than I feel comfortable being.
18. I am not sure that I can always depend on people to be there when I need them.