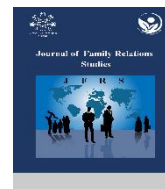




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Research Paper

The Relationship between Parenting Styles and Social Anxiety Symptoms with the Mediating Role of Fear of Negative Evaluation



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ABSTRACT

Objective: This study aimed to evaluate the relationship between parenting styles and social anxiety symptoms with the mediation of negative self-evaluation.

Methods: The study population included the students of the University of Tehran and the Islamic Azad University of South Tehran in 2019-20. A total of 306 were selected by convenience sampling method, who responded to the questionnaires. The research tools were the Social Phobia Inventory (Connor et al., 2000), the Parental Authority Questionnaire (PAQ) (Buri, 1991), and the questionnaire of negative consequences of social events (Wilson and Rapi, 2005). Pearson's correlation test indicated a significant negative relationship between authoritative parenting and social anxiety and a significant positive relationship between permissive and authoritarian parenting styles, as well as negative self-evaluation and social anxiety.

Results: The results of the path analysis test revealed that negative self-evaluation has a significant indirect effect (mediating role) on the relationship between parenting styles and social anxiety.

Conclusion: These results can be used to explain the psychopathology of social anxiety symptoms. In addition, self-evaluation and empowering parents to apply appropriate parenting styles can reduce disorders such as social anxiety.

1. Introduction

Anxiety disorders are among the most common psychiatric disorders in childhood, adolescence, and adulthood (Essau, Lewinsohn, Lim, Moon-ho & Rohde, 2018). Studies have shown that more than 12% of children and 32% of adolescents and adults are diagnosed with one of the anxiety disorders. Anxiety disorders are the most common class of psychiatric diseases, with a 10% 12-month prevalence and a 22% lifetime prevalence. Anxiety disorders are one of the most common forms of children's pathology, usually

not diagnosed and treated in childhood. These disorders increase the possibility of suffering from disorders in adulthood with their early onset and affect people's developmental trajectory (Blanco, Muro, Holliman, Stickley & Carter, 2015). Social anxiety disorder is one of the anxiety disorders, which is characterized by severe and continuous fear of social situations or performance, causing the person to feel ashamed in the presence of these situations and finally avoid facing these situations.

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Although people realize the irrationality of their fear, they are unable to control this fear (Sharma, Mehta & Sagar, 2017).

Family, as the main resource of care and support, is the first and most important communication system for a person (Widmer, 2016). Family is first social group that human is grown in 'among the variable factors are effective more role to growth of children in difference of another factors, specially their knowledge about psychology nurturing methods of parents in family. Parents' nurturing method is effect on personality development of their children's upbringing as well as their adaptation to different social situations (Mikaeili & Salmani, 2021). Children evolve and shape their behavior based on their experiences and feedback from their environment. Parenting styles indicates the emotional relationships and the general communication styles of parents with their children, which is an essential factor for their children's growth and learning (Hofmann & Otto, 2008). Parenting includes methods by which parents raise their children, such as acceptance or rejection and release or restriction. Parents' view in dealing with their children significantly affects their formation, growth, and development in the early years of life and the subsequent characteristics of their personality and behavior. For example, rejection of the child or lack of emotional relationship between the mother and the child plays an important role in the emergence of the child's behavioral disorders. Parents play a critical role in shaping children's emotional health, especially during childhood, and this relationship is one of the essential influencing factors in interpersonal relationships in adulthood. Parenting is one factor that influences children and adolescents' socialization process (Weymouth & Buehler, 2018). Parents practice children by expressing love, creating freedom and limitation for the child and suppressing their unacceptable behavior during socialization (Fulgini, 2019).

Human beings need to be loved, valued and validated, and they try to successfully engage in various social interactions from parents to peers. Therefore, humans are inherently afraid of negative evaluation by others. When this developmentally adaptive concern is expressed in a maladaptive way, the person suffers from social anxiety disorder (Hofmann & Otto, 2008). These disorders are characterized by fear of social interactions such as social interactions (talking to strangers or going to a party with peers), behavioral performance in social situations (such as speech), behavioral avoidance of these situations, and physiological arousal (such as heart palpitations,

sweating, and tremors) (Aderka, McLean, Huppert, Davidson, & Foa, 2013).

According to Clark and Wells (1995), negative evaluation is changing the direction of evaluation inconsistently and negatively. Based on this model, patients with social anxiety disorder use negative information and negative predictions about themselves before and after facing social situations with distorted and biased processing of the negative information. It is assumed that negative self-evaluation has a special relationship with social anxiety because many social situations are ambiguous in everyday life, and people with social anxiety tend to interpret ambiguous social events in a negative way (Wilson and Rape, 2005). The critical type of anxiety in people's relationships with others is social anxiety, caused by their negative evaluation (Stopa & Clark, 2000). Studies have revealed that negative self-evaluation does not remain a permanent feature in people but gradually changes their brain and psychological structure, which causes effects and consequences in behavior. Some researchers have stated depression, anxiety, and social phobia as the first signs of negative self-evaluation. Abdul Maleki (2017) showed that fear of negative evaluation, behavioral activation-inhibition systems, and difficulty in emotional regulation significantly predicted the social anxiety of Urmia University students. Davoudi, Salahian and Veysi (2012) indicated a correlation between fear of positive evaluation with social anxiety and its social self-concept component, but its correlation with fear of negative evaluation and the component of anxiety symptoms was not significant. The results showed that fear of positive evaluation explained a significant part of the variance of social anxiety and social self-concept after controlling for fear of negative evaluation, but its role in predicting anxiety symptoms was not significant.

Studying the variables related to the formation and persistence of social anxiety symptoms leads to awareness and prevention of the tendency and readiness of people to suffer from this problem, which expresses new and effective solutions regarding social anxiety treatment. Therefore, parenting styles and negative self-evaluation were investigated regarding the symptoms of social anxiety because of the problems this disorder causes in students' lives and the components considered in this research. There is no research that examines these two factors together concerning social anxiety. According to the continuum model of social anxiety disorder, this study seeks to evaluate the mediating role of negative self-evaluation in the relationship between parenting styles and social anxiety in a non-clinical sample of students.

2. Materials and Methods

This study was conducted on students of the University of Tehran and the Islamic Azad University of South Tehran in 2019-20. The convenience-volunteer sampling method was used according to the prevailing conditions of the society and the COVID-19 pandemic. The sample size was determined according to Krejcie, and Morgan (1970). In this research, a questionnaire was used to collect the required data. The questionnaires were designed as an internet link and distributed online in virtual student groups. After completing the questionnaire, 14 answer sheets were discarded due to the distorted results, and finally, the sample size was 306 after the participants' withdrawal. The questionnaires of this research included:

Parental Authority Questionnaire (PAQ):

This questionnaire was designed by Buri (1991) to measure the primary view of parents' authority, based on Baumrind (1991), to investigate influence patterns and parenting styles. This questionnaire is based on three models of authoritative parenting (10 items), permissive (10 items), and authoritarian (10 items). The scoring of the questions in this questionnaire is based on a five-point Likert scale from completely agree (5) to completely disagree (1). A style score is obtained by summing the scores of the questions related to each parenting model. The range of scores for each subscale is between 10 and 50. The validity of this questionnaire by Buri, using the retest method for permissive, autocratic, and authoritarian parenting patterns was 0.81, 0.86, and 0.78, respectively, for mothers and 0.77, 0.85, and 0.88, respectively, for fathers. The reliability coefficient of the PAQ questionnaire for the entire questionnaire using Cronbach's alpha method is 0.81 and 0.85, respectively, and Cronbach's alpha for permissive, autocratic, and authoritative parenting patterns is reported as 0.75, 0.81, and 0.83, respectively (Esfandiari, 1995). Buri (1991) used the differential validity method to determine the validity of the questionnaire. According to the results, there is an inverse relationship between mother's authoritative and permissive parenting ($r=-0.38$), father's authoritative and permissive parenting ($r=-0.50$), mother's authoritative and authoritarian parenting, and mother's autocratic and father's autocratic parenting ($r=0.52$). This questionnaire was translated and used with changes for the first time in Iran by Esfandiari (1995). The content validity of the questionnaire was reported as good based on the judgment of 10 experts in psychology and psychiatry. In this study, the

reliability coefficient for authoritarian, permissive, and autocratic parenting patterns was obtained by calculating the internal consistency coefficient of 0.84, 0.68, and 0.89, respectively.

Questionnaire of negative consequences of social events:

This questionnaire was designed by Wilson and Rapi (2005) to interpret the negative consequences of social events in 16 items, in which four subscales are negative self-evaluation, perception of negative self-evaluation by others, short-term negative consequences and long-term negative consequences of social events. This questionnaire is graded on a nine-point Likert scale from I do not believe at all (0) to I strongly believe (8). The range of scores is between 0 and 128.

Wilson and Rapi (2005) reported the internal consistency of this questionnaire for the subscales of negative self-evaluation, perception of negative self-evaluation by others, and short-term and long-term negative consequences as much as 0.75, 0.70, and 0.63, respectively. Ostovar (2006) in Iran extracted only two factors of perception of negative self-evaluation by others and negative self-evaluation using exploratory factor analysis (principal component analysis), which explained 50.87% of the total variance and their Cronbach's alpha was 0.89 and 0.90, respectively. In this research, only the negative self-evaluation subscale was used, and the reliability coefficient of this questionnaire was obtained with Cronbach's alpha coefficient equal to 0.95.

Social Phobia Inventory (SPIN):

This 17-item questionnaire was first prepared by Conor et al. (2000) to evaluate social anxiety or social phobia. This scale is graded by the subject, which provides information on the three important clinical symptoms of fear, avoidance, and physiological symptoms, and has the advantages of being short, simple, and easy to score. This questionnaire is sensitive to the reduction of symptoms over time and can be used as a screening tool and for response to treatment of social anxiety disorder, and finally can distinguish between treatments with different efficacy. This tool has three subscales of fear (1, 3, 5, 10, 14 and 15), avoidance (4, 6, 8, 9, 11, 12 and 16), and physiology (2, 7, 13, and 17) scored in a five-point Likert scale from not at all (1) to infinitely (5). It is necessary to add the total scores for that dimension together to get the score for each dimension. The total scores of all questions are added together to obtain the total score of the scale. A person's higher score indicates the severity of the disorder in people. The range of scores on this scale is between 17 and 68.

The retest validity of this scale in people with social phobia is 0.78 to 0.89, and its internal consistency is also reported in normal groups as 0.94 for the whole scale. Hassanvand Amouzadeh (2007) reported its internal similarity in Iran with a non-clinical sample of 0.82 in the first half and 0.86 in the second half of the test. In addition, the correlation between the two halves of the test was 0.76, and the Spearman-Brown correlation coefficient was 0.91. Internal consistency in the subscales of fear, avoidance, and physiological discomfort was obtained as 0.74, 0.75, and 0.75, respectively. In this study, the reliability coefficient of this scale was obtained with an internal consistency coefficient equal to 0.94.

Data analyzing method:

Descriptive indicators such as the mean and standard deviation of the research variables were used to analyze the data at a descriptive level. At the analytical level, Pearson's correlation test was first used to examine the relationship between the research variables and then the path analysis test was used to determine the mediating role of the research variables.

3. Results

The average age of the sample group was 31.16 with a standard deviation of 9.16, which were in the age range of 20 to 55 years. Table 1 presents the characteristics of the sample group in the variables of university, educational level, and marital status by gender.

Table 1. Demographic characteristics of the sample group by gender

		Female (n=275)		Female (n=49)		Total (n=306)	
		Frequency	Percentage	Frequency	Percentage	Frequency	Percentage
University of study	Azad South Tehran	118	9.45	20	8.40	138	1.45
	University of Tehran	139	1.54	29	2.59	168	9.54
Marital status	Single	143	6.55	39	6.79	182	5.59
	Married	114	4.44	10	4.20	124	5.40
educational level	Associate and Bachelor	98	1.38	17	7.34	115	5.37
	Masters	150	4.58	31	3.63	181	2.59
	Ph.D	9	5.3	1	0.2	10	3.3

Table 2 represents the results of research tools among 306 students in the form of mean and standard deviation as well as minimum, maximum, skewness, and kurtosis of the scores of the sample group.

The results of research tools among 306 students in the form of mean and standard deviation as well as minimum, maximum, skewness, and kurtosis of the scores of the sample group are reported in Table 2.

Table 2. Summary of descriptive findings of social anxiety, parenting styles, and negative self-evaluation (n=306)

Variables	M	SD	min	max	Skewness	Kurtosis
Social anxiety	76.33	127.12	17	69	782.0	107.0-
Authoritative parenting	90.29	886.6	11	45	305.0-	469.0
Permissive parenting	08.29	555.5	13	44	207.0-	255.0
Authoritarian parenting	95.27	127.8	10	47	005.0	777.0-
Negative self-evaluation	24.28	674.27	0	110	178.1	686.0

Table 2 shows that the average social anxiety of students is 33.76, which is lower than the average score of the tool (range from 17 to 85 and an average of 51). In addition, the average of authoritarian parenting in parenting styles is 29.90, which has the highest average and authoritarian parenting (27.95). The average negative self-evaluation of the sample group is 28.24, which is far lower than the average score of the tool (range 0 to 128 and an average of 64). Table 1 reveals that none of the research variables have serious deviations from the normal distribution. The distribution skewness of the scores (2 and -2) and the kurtosis (3 and -3) can be assumed normal. The data distribution of any research variables did not exceed these ranges, so the data distribution can be assumed to be normal.

Pearson's moment correlation test was performed to

investigate the relationship between parenting styles and negative self-evaluation with social anxiety in the sample group, and its assumptions have been examined.

Assumptions of the Pearson moment correlation test:

The assumptions of the Pearson moment correlation test are the normality of the data distribution and the linearity of the relationship of the variables. Therefore, the assumptions were checked before running the test. Initially, the normality assumption, the main assumption of all parametric tests, was examined (Table 1). The linear relationship between the variables of this research (social anxiety, parenting styles, and negative self-evaluation) was investigated using a dot plot. Figure 1 demonstrates the linear relationship between social anxiety and authoritative parenting.

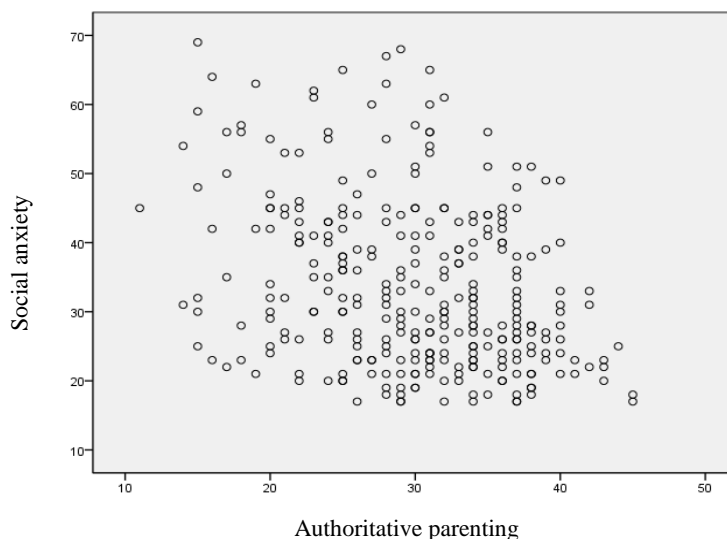


Figure 1. Dot plot of the relationship between social anxiety and authoritative parenting

The dot plot in Figure 1 illustrates that the density of points is around a cylinder. Therefore, the relationship between social anxiety and authoritative parenting is linear. The linear relationship between social anxiety and other parenting styles (permissive and authoritarian parenting) and self-evaluation with parenting styles were also investigated separately and one by one. The results indicated the collinearity between these variables, but reports were omitted due

to the large volume of the graphs. In a general summary, the assumptions of Pearson's correlation test are established, and the results of its implementation are valid.

Pearson's correlation test:

The Pearson's correlation test was performed, and the results are shown in Table 3. To investigate the relationship between social anxiety and parenting styles and negative self-evaluation.

Table 3. Correlation coefficients of social anxiety, parenting styles, and negative self-evaluation

Variables	1	2	3	4	5
1. Social anxiety	-				
2. Authoritative parenting	0-.31**	-			
3. Permissive parenting	0.22**	0.14*	-		
4. Authoritarian parenting	0.26**	0-.43**	0-.32**	-	
5. Negative self-evaluation	0.61**	0-.27**	0.13*	0.22**	0.50**

Table 3 shows a significant positive relationship between social anxiety with permissive ($r=0.22$ and $P<0.001$) and authoritarian ($r=0.26$ and $P<0.001$) parenting styles and a significant negative relationship with authoritative parenting style ($r=-0.31$ and $P<0.01$). In addition, social anxiety has a significant positive relationship with negative self-evaluation ($r=0.61$ and $P<0.001$). There is a significant negative relationship between negative self-evaluation and authoritative parenting style ($r=0.27$ and $P<0.01$), and there is a significant positive relationship between permissive ($r=0.13$ and $P<0.05$) and authoritarian

($r=0.22$ and $P<0.001$) practices. Therefore, it is possible to examine the role of mediators of negative self-evaluation in the relationship between parenting styles (authoritative, permissive and authoritarian parenting) and social anxiety given the mentioned materials and confirm the significant relationship between research variables (social anxiety with parenting styles and negative self-evaluation) with each other.

Hypothesis test: A multiple collinearity test was used before running the path analysis test. The results of multiple collinearities are reported in Table 4.

Table 4. Multiple collinearity results

Multiple Collinearity Indicators		
predictor variables	Tolerance	VIF
Authoritative parenting	0.777	1.287
Permissive parenting	0.853	1.172
Authoritarian parenting	0.707	1.415
Negative self-evaluation	0.702	1.425

Figure 2 presents the path analysis with the maximum likelihood method to determine the mediating role of

negative self-evaluation in the relationship between parenting styles and social anxiety.

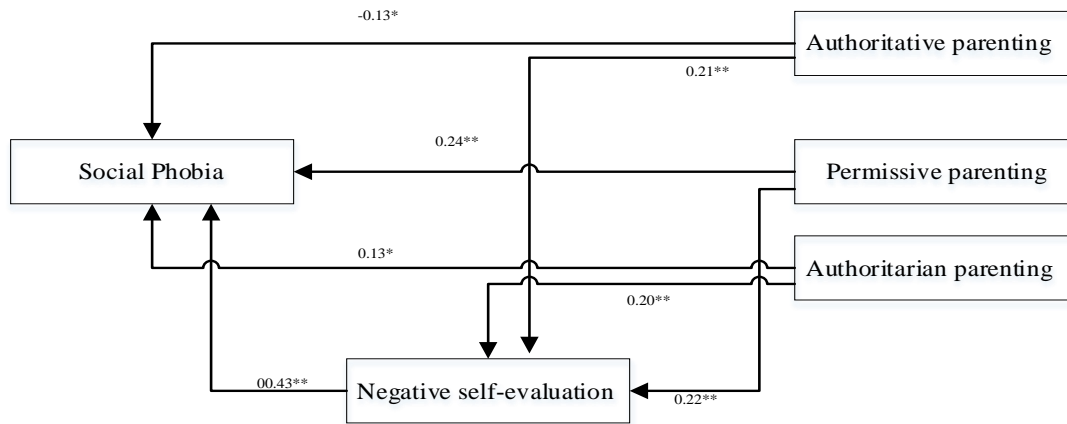


Figure 1. Pathways fitted with the standard model (P**>0.001, P*>0.01)

According to the indices obtained in the presented model (df=χ²/2.779, CFI=0.971, GFI=0.943, AGFI=0.926, RMSEA=0.073, RMSEA=0.972 NFI), the model has a proper goodness of fit (Figure 2).

Then, the unstandardized and standardized estimation coefficients of the model paths presented in Table 5 were obtained to estimate the hypotheses of the research based on the bootstrap method.

Table 5. Unstandardized and standardized estimation coefficients of presented model paths

Hypotheses (pathways)	Unstandardized estimate	standard error	Critical value	Standardized estimate
Authoritative parenting ← Negative self-evaluation	865.0-	237.0	**648.3-	21.0-
Permissive parenting← Negative self-evaluation	107.1	281.0	**942.3	22.0
Authoritarian parenting← Negative self-evaluation	691.0	210.0	**292.3	20.0
Authoritative parenting ← Social anxiety	217.0-	083.0	*633.2-	13.0-
Permissive parenting← Social anxiety	514.0	098.0	**264.5	24.0
Authoritarian parenting Social anxiety←	197.0	073.0	*683.2	13.0
Negative self-evaluation ← Social anxiety	186.0	022.0	**606.8	43.0

According to Table 5, the direct effect of authoritative parenting (β=0.13, C.R=2.633 and P<0.01) negatively affects social anxiety. In addition, the direct effect of permissive parenting (β=0.24, C.R=5.264 and P<0.001) and authoritarian parenting (β=0.13, C.R=0.683 and P<0.01) is positively significant on social anxiety.

direct effect of authoritarian parenting on negative self-evaluation (β=0.20, C.R=3.292 and P<0.001) is positively significant. The findings of the path analysis test indicate that the direct effect of negative self-evaluation (β=0.43, C.R=8.606 and P<0.001) is significant in a negative way on social anxiety.

The direct effect of authoritative parenting on negative self-evaluation (β=0.21, C.R=3.648 and P<0.001) is negatively significant. The direct effect of permissive parenting on negative self-evaluation (β=0.22, C.R=3.942 and P<0.001) is positively significant. The

According to Table 6, the standard coefficients of the total path indicate the effect of direct and indirect paths in the model related to the relationship between parenting styles and social anxiety through the negative self-evaluation of students

Table 6. Total, direct, and indirect standard coefficients in the model

Paths	Total effect	Direct effect	Indirect effect	Explained variance
On the negative self-evaluation of				0.136
Authoritative parenting	-0.21	-0.21	-	
Permissive parenting	0.22	0.22	-	
Authoritarian parenting	0.20	0.20	-	
On social anxiety from				0.459
Authoritative parenting	-0.26	-0.13	-0.*13	
Permissive parenting	0.35	0.24	0.*11	
Authoritarian parenting	0.27	0.13	0.*14	
Negative self-evaluation	0.43	0.43	-	

*P<0.001

As shown in Table 6, the direct effect of authoritarian parenting on negative self-evaluation ($\beta=-0.21$) is negatively significant. The direct effect of permissive parenting on negative self-evaluation ($\beta=0.22$) is positively significant. In addition, the direct effect of authoritarian parenting on negative self-evaluation ($\beta=0.20$) is positively significant. Moreover, the path analysis test of the direct effect of negative self-evaluation ($\beta=-0.43$) on social anxiety is significant.

The indirect effect of authoritative parenting styles ($\beta=-0.13$), permissive parenting ($\beta=0.11$) and authoritarian parenting ($\beta=0.14$) on social anxiety through negative self-evaluation is significant. Negative self-evaluation indirectly affects the relationship between parenting styles and social anxiety, which confirms the research hypothesis.

The results of the path analysis test showed that parenting styles explain 14% of negative self-evaluation.

In general, there is a positive and significant relationship between negative self-evaluation and social anxiety. In addition, the results show the significant indirect effect of negative self-evaluation as a mediating role in the relationship between parenting styles and social anxiety, which confirms the research hypothesis.

4. Discussion and Conclusion

The results of Pearson's correlation test showed that authoritarian parenting style has a significant and negative relationship with social anxiety, and there is a significant and positive relationship between permissive and authoritarian parenting styles with social anxiety. These results were consistent with those of Gouveia (2016) and Levinson & Rodebaugh (2015). Although this study was in line with most of the studies, but some studies like Hatemnejad et al. (2013) and Ghasemipourkord Mahaleh and Bezazian (2013) were inconsistent and showed no significant relationship between the types of authoritative, permissive, and authoritarian parenting styles of parents and social anxiety of teenagers. In these studies, Baumrind's parenting styles questionnaire was used, and parents answered it, so this disparity is more a result of research tools and implementation methods. Several studies have confirmed the dominant atmosphere of the family and its role in causing children's behavioral problems, and negative interactions between parents and children have been emphasized as one of the causes of emotional and behavioral disorders. Parenting characteristics are directly related to preparing children to face emotional and social challenges (Frick et al., 1999; Borlaka,

2016). Many teenagers have experienced behavioral problems, which have destructive effects on their social and academic life at older ages.

The family and parenting methods are essential factors in the psycho-social development of children. In addition, the unfavorable relationship between parents and children, incorrect disciplinary practices, unstable supervision of parents, inattention and neglect of parents towards adolescents are family factors effective in the occurrence of problematic behaviors (Klein and Fay, 2020). Since parents are the first to communicate with the child, they have the most influential encounters and interactions in forming the child's future life structure (Johnson, 2016). Establishing proper and effective communication between parents and teenagers is one of the most important parenting skills (Small, 2019). This unique and stable physical, emotional, and social relationship between the child and caregiver or the original parents (Babour et al., 2016) has the most significant effect on shaping the children's personality and behavior, their adaptation and sense of security (Zhang et al., 2019). The mutual influence of the child and the parents and how the parents deal with and communicate with children and adolescents are among the most critical factors for the exchange of reactions and emotional responses of the child (Johnson & Anderson, 2014). The parenting style shows the parents' efforts to control and socialize their children. People who feel rejected by their social network due to the lack of family support and approval and feel that they have no control over their lives, their self-confidence is reduced, and they feel guilty and disappointed, leading to severe anxiety and tension and lack of compromise with problems. Accordingly, parents' behavior types in the form of diverse, normal, and natural behaviors to restrain and socialize their children transfer normal behavior patterns to their children, and the children acquire the skills of appropriate reactions in stressful and tense situations. When parents benefit more from positive parenting styles, they transfer the appropriate emotional reactions and responses to their children. As a result, parents whose parenting style is positive and away from corporal punishment and lack discipline have children with higher well-being (Martinez et al., 2019). Meanwhile, parents aggravate the social anxiety of their children with a strict parenting model with high criticism (Potter, Yar, Francis, & Schuster, 2014).

The results of the Pearson correlation test showed that negative self-evaluation has a significant positive relationship with social anxiety. This result was consistent with that of Davoudi et al. (2013), Carmo,

Oliveira, Brás, & Faisca, (2021), Abdul Maleki (2017), Levinson & Rodebaugh (2015), and Mokhber Dezfuli et al. (2015). Mokhber Dezfuli et al. (2015) showed that the components of perception of negative self-evaluation by others, negative self-evaluation and behavioral inhibition as mediating variables have a direct effect on social anxiety. Nonterah et al (2015) stated that fear of negative evaluation mediates the relationship between academic stress, anxiety and depression symptoms. Worries about others' negative evaluations are predictors of social anxiety. A person is officially diagnosed with an anxiety disorder when mental anxiety is constantly present and occurs regularly. People with social anxiety disorder have a poor quality of life due to defects in emotional disordered strategies and negative beliefs about efficiency. People have standards in social situations because of their beliefs about being assessed by others and evaluating their perception of their performance, as opposed to their codified standards (Rapee & Heimberg, 1997). Not reaching the desired level increases the possibility of negative evaluation and increases anxiety. Accordingly, people with social anxiety disorder usually try to avoid situations in which they may be evaluated, show anxiety symptoms, or behave in embarrassing ways (Beidel & Turner, 2007).

The results confirmed the research hypothesis and showed that negative self-evaluation mediates the relationship between parenting styles and social anxiety. These findings were consistent with those of Fuligni (2019), based on which parenting is one of the factors that play a role in the socialization process of children. Parenting styles are predictors of negative evaluation (Dokanaeifard & Farahani, 2014; Levinson & Rodebaugh, 2015). Parents become aware of their own and others' evaluations with parenting methods that direct their children's goals and shape their behavior and feelings (Baumrind, 1991). Family and parent-child interaction influence people's behavior and experiences (Sluis & Boschen, 2014). When parents use effective communication patterns, they have a clear understanding of the content and purpose of each message and can fulfill the responsibility of socializing with their children and meeting the emotional and psychological needs of family members and participating in society. Children in autocratic families are aloof, timid, suspicious, lack courage and a sense of independence and have low social skills. Constant blaming and guilt make children believe that they are bad enough to deserve disrespect and neglect and self-evaluate themselves negatively. Negative self-evaluation arises a weak self-image in children's

minds, which gradually reduces their self-confidence, worsens their behavior, and makes them believe that what their parents think about them is the truth. These conditions are enough to make adolescents and young people prone to all kinds of uncontrollable behaviors, including social anxiety.

The authoritative parenting style makes children think about their life and future and have compassion for themselves (Mesgar and Taqvai, 2019). Accordingly, children of powerful families focus less on the negative aspects of the environment that cause anxiety (Neff, 2019) and react better to stressful situations. Therefore, intimacy in families with authoritarian methods is weak between family members, and autocratic and negative relationships of parents towards their children are among the factors that cause negative self-evaluation. Parents have high expectations from their children, which sometimes decrease self-esteem in children and causes social anxiety.

Therefore, in a family where parents have an authoritative relationship with their children, people are more friendly to their comments and listen to other family members, creating self-esteem in each member of the family, self-confidence in children, and preventing negative self-evaluation and social anxiety. One of the limitations of this study was conducting of this research among the students of Tehran. Based on the limited resources, the statistical population and the conditions governing the society due to COVID-19, the possibility of randomly selecting a sample was difficult, which makes it possible to generalize the results of this research to other different cultural and social groups with caution. Causal inference from this research results is impossible because the research design was descriptive and correlational.

According to the results, training related to raising parents' awareness based on social anxiety and improving family functioning is suggested. Therapists are recommended to use relevant education for students, adolescents, and young people to reduce social anxiety based on parenting styles, positive self-evaluations and prevent negative self-evaluations. In addition to the practical suggestions, conducting similar research in other groups with larger dimensions is suggested to provide more accurate experimental evidence. Sample selection can be based on complete randomness, increasing the generalizability of research results and planning longitudinal research in a longer period to achieve accurate results to identify factors affecting social anxiety.

5. Ethical Considerations

Compliance with ethical guidelines

In designing and compiling this research, ethical principles have been considered. The purpose of the research was explained to the participants and the information was received confidentially and used only for research purposes.

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Authors' contributions

All authors of this article participated in all stages of writing and conducting research.

Conflicts of interest

The authors of the article had no conflict of interest.

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