

Research Article

The Effect of Family Communication on Depressive Symptoms in Adolescents Who Have Step-parents

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Abstract.

The relationship between adolescents and their stepparents is a unique one because the relationship is established without blood ties. Family functioning is the ability of each member to interact and take roles in the family so that closeness is established with each family member. This research looks into how family functioning affects the depression symptoms of adolescents who have stepparents. The research used a quantitative approach with an incidental sampling technique. Research subjects were 100 15–19 years old adolescents with stepparents (Mean = 16.89, SD = 1,188). The research instruments used were McMaster Family Functioning Scale (short version) and Beck Depression Inventory. The statistical programs used were Statistical Package for Social Science (SPSS) version 25 and Past3. The result of a simple linear regression analysis tested showed a significantly negative effect of family functioning on the depression symptoms of adolescents who have stepparents ($R = -0.92$, $R^2 = 0.85$, $P\text{-value} = 0.00$). That is, the presence of one of the new parents can predict if the teenager will develop depression in their life. The implications of this research are expected to provide understanding to parents of the importance of family communication and it is hoped that parents can provide understanding and reasons for remarriage to children so that children can be more accepting of their stepparents. On the other hand, adolescents who have stepparents are expected to always learn to open up, obey stepparents, and accept their existence as caregivers and educators in the family. The existence of a reciprocal relationship between parents and stepchildren is expected to establish good family relations between the two.

Keywords: depression, family functioning, stepparent, teenagersCorresponding Author: Nandy
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1. BACKGROUND

In their lifetime, humans will go through successive phases of growth and development. In the growth phase is characterized by physical changes such as gaining weight, increasing height, and so on. While the development phase is characterized by physical, emotional, and social maturity towards maturity. In development, the phase between childhood and adulthood is the adolescent phase. In the adolescent phase, special attention is needed for the family because in that phase the individual will acquire an identity that will determine the individual's personality in the next phase of

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development. As explained by Erik Erikson that in adolescence will experience identity confusion where individuals try to find out who they are and who they are not [1].

Emotional change often appears in adolescence. This is because adolescents will try to discover who they are and are not [1]. Difficulty in the problem-solving process is a risk faced by adolescents if they cannot adapt to the emotional changes that often arise. Doing so makes them tend to have feelings of uselessness, hopelessness, and helplessness.

Adolescence is a transitional period in which an individual has left the age of children who are full of dependence, but has not been able to move to an age full of responsibility both for himself and his environment. According to [2] adolescence is divided into three age groups, namely early adolescence starting from 12-15 years, middle adolescence starting from the age of 15-18 years, and late adolescence starting from the age of 18-21 years.

Adolescents experience three processes in their development, namely biological, cognitive, and socio-emotional processes. The three processes are correlated with each other. Where cognitive processes are formed from socio-emotional processes, socio-emotional processes are enhanced and limited by cognitive processes, and cognitive processes are influenced by biological processes [3].

Family problems are often the source of problems in mental health [4]. Conflicts that often arise between adolescents and their parents are one of the factors that cause adolescents to experience depression. Parents who are too demanding of children to behave according to their expectations will indirectly affect their development. As children, they will have feelings of repression, low self-confidence, and a sense of uselessness in life because they feel that what they do is not like the will of their parents [5]. In addition, some family factors that cause adolescents to experience symptoms of depression are genetic factors, economic factors, factors of lack of emotional attachment, and factors related to parental marital problems [6].

Interaction between adolescents and parents is very important as a form of parental love for children, fulfilment of needs, and providing adolescent protection and guidance. The lack of interaction in the family makes adolescents feel that they do not get full support from both parents, so they tend to channel adolescent feelings into negative behaviours [7]. Problems related to the parents' economy will affect psychological pressure that can cause marital problems [8]. Economic difficulties will affect parents' mood, so it affects family interactions that tend to decrease due to various conflicts. This has an impact on household rifts that lead to parental divorce. This parental divorce

can have a negative impact on adolescent development and mental health, where adolescents feel they have lost their complete parental role due to separation [9].

Teenagers with depressive symptoms do not just experience stress and feelings of sadness that can just come and go. However, symptoms of depression are crucial conditions that can affect emotions, behaviours, and thought processes in adolescents, so serious handling from various parties is needed to help overcome the problem. Depressive symptoms begin with stress that is not treated immediately [10]. Stress and depression are continuous with each other. Stressful, traumatic events contribute to the onset of adolescent depressive symptoms. While depressive symptoms also trigger various other sources of stress, such as the loss of a loved one [11].

The existence of divorce and death cases is the reason why parents remarry. This leads to teens having stepparents instead of the lost parental role. Over time, the burden on adolescents increases, and self-rejection appears when stepparents live with them in the same home to replace their biological parents. Visser explains that communication with stepparents will be different. Stress and rejection will arise with new people replacing the role of their biological parents. This situation creates distance and discord in interactions, affecting a family's disharmony [12].

Often adolescents experience symptoms of depression due to rejection and difficulty in accepting the existence of their stepparents [12]. This can happen because the emotional attachment between their biological parents is much longer, making it very difficult for them to be replaced with someone else. Status as a stepchild makes adolescents experience various pressures such as role conflicts, stigmatization, feelings of being ignored by parents because they do not get full support, poor relationships between stepparents, and expectations that do not match the reality that occurs in adolescents [13].

This research found relevant research related to stepfamily relationships and stepchildren's depressive symptoms in adolescence. Research conducted by [14] explains that the low quality of the relationship established between stepfathers and stepchildren can affect depressive symptoms in stepchildren. The harmony of the relationship between mother and child can reduce symptoms of adolescent depression. However, this research also explains that the quality of family relationships will be reduced by the presence of other people as stepfamilies in the adolescent's life. The similarities in this research are research themes that discuss how the presence of stepparents can affect depressive symptoms in adolescents.

Subsequent research conducted by [13] showed findings on how bad experiences in the past can affect an individual's mental health. Stress due to the divorce of biological

parents and the formation of stepfamilies can be one factor that influences the symptoms of individual depression. They will realize the family's condition is no longer intact, so inner conflicts occur, and psychological problems arise within themselves.

Based on this background, this research was conducted to determine the effect of family functioning on depressive symptoms of adolescents with stepparents. Theoretically, the benefit of this research is that it can provide insight into how low family functioning may affect the depressive symptoms of adolescents who have stepparents. While practically, this research hopes that it can contribute to families, especially parents related to family functions, provide an understanding of adolescent mental health, and it is hoped that this research can be developed as a follow-up research by other researchers related to psychological problems suffered by adolescents who have stepparents.

2. RESEARCH METHODS

2.1. Research Design

The method used in research is the quantitative method. According to [15] quantitative methods are research methods that focus on presenting data with numbers and processing with statistical methods from data collection, data interpretation, and display of data results. This research is a type of correlation research. According to [16] correlation research is research used to determine the influence of one variable on another.

2.2. Research Subjects

The subjects in this research were selected based on predetermined criteria, including male and female adolescents aged 13 to 19 years and having stepparents. The method of sampling is nonprobability sampling with incidental sampling techniques. In this technique, information is obtained by chance. In other words, the subject comes from anyone who can be met and has criteria and data sources for the research topic. The total number of participants used amounted to 100 subjects. In determining the minimum number of research subjects, which is 100 subjects. This number has been considered representative to obtain research results that describe the state of the research population [17]. Regarding gender, it is dominated by women 58 (58%) and 42 (42%) subjects are male. In terms of age, 15-16 years for as many as 34 (34%) subjects, 17-18 years for as many as 60 (60%) subjects, and 19 years for as many as 6 (6%) subjects.

The mean age of the subject was 17, with a standard deviation of 1.188. Next, in terms of education, most subjects are in high school / vocational school, with 74 (74%) and 26 (26%) in junior high school. A total of 66 (66%) subjects were adolescents who had stepmothers. In contrast, 34 (34%) subjects had stepfathers.

2.3. Research Instruments

On the family functioning variable, the researchers used the translation of the McMaster Family Functioning Scale on the 12-item general functioning indicator (GF12) created by Epstein, Baldwin, and Bishop in 1983 was used to measure general and simple family functioning based on components of problem-solving, communication, family roles, affective responsiveness, affective engagement, and behavioral control. The instruments using the Likert scale totalled 12 items with four answer choices SD (Strongly Disagree), D (Disagree), A (Agree), and SA (Strongly Agree). This scale has an item difference power index between 0,23-0,40 with reliability test results of 0,67. On the depressive symptom variable, the researchers used The Beck Depression Inventory (BDI) instrument consisting of 21 items with a Likert scale. Each statement is given a score of 0-3 based on the intensity of certain symptoms. The difference power index on this scale ranges from 0,22 – 0,57, with reliability test results of 0,79.

2.3.1. Data Collection Procedures

In this research, the researchers went through several stages in its implementation. The first stage is preparation, where researchers see various phenomena and look for the problem to be used as a research topic. After that, the researchers search and study reference sources that are relevant to the topic to be researched. Then the researchers determine the number of target research subjects and prepare research instruments translated by a linguist. The second stage is implementation. Researchers distributed questionnaires for data collection to subjects who met the research criteria. In disseminating questionnaire data, researchers utilize the Google Form application to simplify and expanded the data collection process. The third stage is data processing. Researchers analyze the data after all the data is collected and filled in by the research subjects.

2.3.2. Data analysis technique

In the data analysis technique, the researchers used the Statistical Package for Social Science (SPSS) version 25 to conduct a simple linear regression analysis test and Past3 to test the hypothesis of the effect between the independent variable (family functioning) and the dependent variable (depressive symptoms). The purpose of conducting separate data analysis between adolescents who have stepfathers and adolescents who have stepmothers is to determine whether or not there is an influence between the two and conclude the results of a stronger analysis between adolescents who have stepfathers and adolescents who have stepmothers. The next process is for researchers to discuss the analysis results, make conclusions and implications based on the research results.

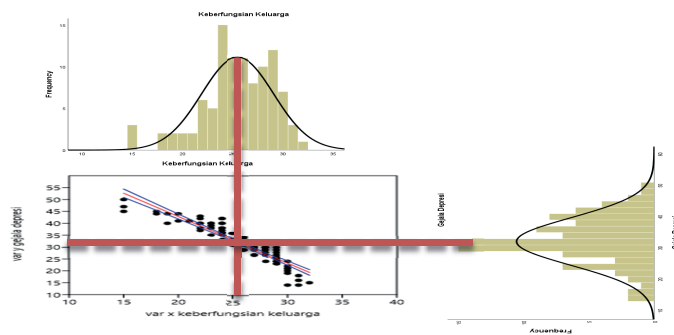
3. RESULT

Before explaining the hypothesis test, researchers will describe the level of family functioning and symptoms of depression. It is known that the empirical mean of family functioning ($\bar{X} = 25,54$) is lower than the hypothetical mean ($\mu = 30$) with Empirical Standard Deviation (Empirical Sd. = 3,59) and hypothetical standard deviation ($\sigma = 2,83$). Based on these data, it is shown that adolescents who have stepparents have a low level of functioning. The depressive symptom variable shows that the empirical mean ($\bar{X} = 32,08$) is higher than the hypothetical mean ($\mu = 31,5$) with empirical standard deviation (Empirical Sd. = 7,71) and hypothetical standard deviation ($\sigma = 6,1$). The data showed that adolescents who had stepparents had relatively high rates of depressive symptoms.

After the data was obtained, researchers conducted normality tests on both variables. The purpose of the normality test is to determine whether the value is normally distributed or not. From the overall normality test results showed a significance value of 0,32 ($p > 0,05$) which concluded that the residual value of the subject as a whole was normally distributed.

The next stage, researchers conducted a simple linear regression test to determine the influence between the two variables, namely family functioning variables and depressive symptoms. Based on the results of a simple linear regression test on the subjects as a whole, a significance value of 0.00 ($p < 0,05$) was obtained, explaining that there was a significant influence between family functioning and depressive symptoms where the hypothesis of the research could be accepted. The value of the coefficient

of determination ($R^2 = 0,85$), which means that family functioning has an influence on depressive symptoms by 85% with a value ($F \text{ count} = 533.00$, $F \text{ table} = 3.94$). A negative result on the correlation value ($R = -0,92$) indicates that there is a negative or opposite influence which means that the higher the family functioning, the lower the depressive symptoms. Conversely, the lower the functioning of the family, the higher the symptoms of depression.



- Figure 1 (●) = The distribution of the subject on the two variables to be researched.
- Figure 2 (—) = The horizontal and vertical dotted lines shows the mean of the two variables.
- Figure 3 (—) = The regression line.
- Figure 4 (—) = Confidence interval 95% line.

Figure 1: Data Visualization.

Based on the data visualization, it is explained that the black dot is the distribution of the subject on the two variables to be researched. The horizontal dotted line hits the regression line, which means that there is a relationship between the two variables. The regression line forms a diagonal, which means a relationship exists between the independent variable (family functioning) and the dependent variable (depressive symptoms). The direction of the regression line is close to the variable that shows that the relationship is negative, which means that the lower the functioning of the family, the higher the symptoms of depression, and conversely. Furthermore, two blue lines, 95% confidence interval lines, illustrate the suitability of research conditions with the population. The line assumes that the narrower the blue line approaches the red line, the more accurate the relationship between the two variables. When viewed from the picture above, the blue line and red line indicate a relatively close distance so that the research data can be said to be accurate. The horizontal line (depressive symptoms) shows an average value of 32,08, and the vertical line (family functioning) shows an average value of 25,54. The two lines meet the cusp of each histogram on the right and top sides, indicating that the data is normally distributed.

After obtaining the results of data visualization, researchers will present the results of effective contributions and relative contributions from each variable indicator of family

functioning. The calculation of the effective and relative contribution of each indicator is to determine how large the percentage of each indicator of family functioning variables to the variables of depressive symptoms in adolescents who have stepparents. In addition, to find out which indicators are the most influential and the least influential on reducing the level of depressive symptoms in adolescents who have stepparents.

Based on the calculation of effective contribution to each variable indicator of family functioning, results were obtained from indicators of problem solving by 12%, communication by 18%, family role by 15%, affective responsiveness by 16%, affective involvement by 10%, and behavioral control by 12%. Meanwhile, based on the relative contribution of each variable indicator of family functioning, results were obtained from problem solving indicators of 14%, communication by 21%, family roles by 18%, affective responsiveness by 19%, affective involvement by 12%, and behavioral control by 14%.

From the data obtained, it can be concluded that the most influential indicator in reducing the level of depressive symptoms in adolescents who have stepparents is communication, while the least influential in reducing the level of depressive symptoms in adolescents who have stepparents is affective involvement.

4. DISCUSSION

From the results of the research conducted, family functioning has a significant influence on depressive symptoms in adolescents who have stepparents. The results also prove a negative influence between family functioning and depressive symptoms in adolescents who have stepparents, which means that the hypothesis in this research is acceptable. This research results align with the results of research conducted by [18], which proved that there is a significant influence between family support and adolescent depression levels. With high family support, adolescents have a high chance of not experiencing depression. Meanwhile, adolescents with low family support tend to have a high chance of experiencing symptoms of depression.

This research has six indicators of family functioning namely problem-solving, communication, family roles, affective responsiveness, affective involvement, and behavioural control. Of the six indicators, it was found that the indicators that contributed the highest to reducing the level of depressive symptoms were communication, followed by indicators of affective responsiveness, family roles, problem solving, behavioural control, and affective involvement.

Each family member is required to interact with each other in order to establish closeness between family members so that the chance for depressive symptoms in

the family is relatively small. Communication is one form of interaction in the family. Communication as a form of delivering and receiving information can be said to run well if it can be done in two or multi-directions with feedback from the recipient of the message. Strengthened from research conducted by [19] adolescents tend not to get the opportunity to express their opinions and are required to obey what their families want. This makes teenagers less able to communicate with their families because they are accustomed to listening and obeying family wishes that are not in line with their wishes.

Each family member must interact with each other and take their respective roles to establish closeness between family members so that the chances of depressive symptoms in the family are relatively small. This research reinforces research from [13] which suggests that depressive symptoms are closely related to how well the family functions in the family. Adolescents with depressive symptoms resulting from family dysfunction will experience obstacles in family interactions because they lack parental support, poor relationships, and expectations that do not match the reality experienced.

The family is the child's first place of learning, so the family environment greatly influences adolescent development. The family plays an important role in shaping adolescents' character and personality patterns because the family plays an important role in shaping adolescents' identity [20]. Some of the roles of the family include teaching religious values, cultivating affection, and protecting each other in family members. The role of the family is a form of family support. If family functions are not well established, it will affect the quality of relationships in the family, causing problems that result in symptoms of adolescent depression [21].

Teenagers with stepparents often show self-rejection because they feel no one can replace their biological parents. Distance in the family affects the intensity of interaction and family functioning. Self-rejection is caused because the stepparents have not lived with the stepchild since the stepchild was born. The adjustment between stepparents and stepchildren takes a long time, about five to seven years, to become a real family [22]. Family disputes are caused by the role of biological parents who are replaced by new people, making adolescents experience stress and depressive symptoms [12]. Previous research states that depressive symptoms are caused by the non-creation of family harmony and the absence of family functioning. The quality of relationships between parents and adolescents will decrease when the presence of others as their stepparents [14].

Based on the results of this research, it was shown that family functioning contributed as much as 85% in influencing the depressive symptoms of adolescents who had

stepparents. The inherent relationship between biological parents and children that lasts a long time will make adolescents experience self-rejection and difficulty in accepting the presence of others as their stepparents. The research showed that family functioning and depression negatively correlated with a strong relationship. It can be explained that the higher the level of family functioning, the lower the depressive symptoms in adolescents with stepparents. Conversely, the lower the level of family functioning, the higher the depressive symptoms in adolescents with stepparents. The trauma of death and separation of parents creates inner conflict for adolescents so that they experience psychological problems such as stress and depression. Depressive states in adolescents who have stepparents occur because they feel they have lost family integrity due to the loss of their loved ones, sad experiences in the past, and no family support, which can lead to negative schemes in adolescents. With these negative schemes, adolescents tend to experience self-worthlessness and blame themselves for what has happened [23].

The indicators of affective involvement did not affect the decrease in the level of depressive symptoms in adolescents who had stepparents. This is because adolescents tend to use emotion focused coping strategies to divert the problems they feel into things that only reduce or minimize the pressure felt by looking for comfort in a hobby or activity [24]. Parents will meet needs and give gifts as a form of support and appreciation for adolescents' interest in what they like [25].

In this research, researchers only explained related to the effect of family functioning on depressive symptoms of adolescents who have stepparents, reviewed with relevant literature and representative research. This research has limitations because the results of the research only show the effect of family functioning on depressive symptoms in adolescents who have stepparents in general and do not include how family functioning on depressive symptoms specifically such as adolescents with stepfathers or adolescents with stepmothers. There are several things that must be considered by other researchers, it is hoped that other researchers can examine in more detail the influence of each indicator of family functioning on depressive symptoms and conduct similar studies related to subject demographic data such as age, gender, recent education, length of marital status, and the reason why parents remarry is like a living divorce or a dead divorce. The development of intervention methods can also be carried out by future research to improve family functioning and reduce symptoms of depression.

5. CONCLUSION

From the results of this research, it was concluded that family functioning significantly affected depressive symptoms in adolescents who had stepparents. The higher the level of family functioning, the lower the depressive symptoms in adolescents with stepparents. Conversely, the lower the level of family functioning, the higher the depressive symptoms in adolescents with stepparents.

This research implies that it can provide parents with an understanding of the importance of family communication, and it is hoped that parents can provide understanding and reasons for remarrying children so that children can be more accepting of their stepparents. On the other hand, adolescents with stepparents are always expected to learn to open up, obey stepparents, and accept their existence as caregivers and educators in the family. The existence of a reciprocal relationship between parents and stepchildren is expected to establish good family relations between the two.

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Author Contributions

Siwi Wanudya: Writing introduction, data collection, data processing, writing discussion. Nandy Agustin Syakarofath and Latipun as Research supervisors and the concept of the research design.

Conflict of interest:

The authors declare there is no conflict of interest.

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