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Parental Psychological Control, Alexithymia, Social Avoidance and Distress, and Coping Style among Chinese College Students

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Abstract: The study explored the relationships between parental psychological control, alexithymia, social avoidance and distress, and coping style among Chinese college students. The Parental Psychological Control Questionnaire (PPCQ), Toronto Alexithymia Scale (TAS-20), Social Avoidance and Distress Scale (SAD), Coping Style Questionnaire (CSQ) were conducted on-site with 655 college students from three universities in Shenzhen, Guangdong, China. The results showed that (1) parental psychological control and alexithymia were both significantly different on primary caregiver; alexithymia was significantly different on gender; social avoidance and distress were significantly different on family area and "only child or not"; mature coping was significantly different on father's education; (2) parental psychological control, alexithymia, social avoidance and distress, and coping style were all significantly correlated; (3) parental psychological control, alexithymia, mature coping, and immature coping were significant predictors of social avoidance and distress; (4) alexithymia, immature coping, and alexithymia - immature coping (chain mediator) could act as a mediator in the interactions between parental psychological control and social avoidance and distress, respectively.

1. Introduction

According to a study, anxiety, shyness, and avoidance behaviors in social situations have significantly increased among Chinese college students in recent years[1]. These behaviors are referred to as social avoidance and distress. Social distress is the subjective state of being distressed during social contact, whereas social avoidance is the behavioral inclination to avoid social interactions[2]. People's mental health and social adaptation have a beneficial relationship with positive social contacts. Conversely, social distancing and social anxiety lower people's chances of success in their careers and overall well-being. Investigating the underlying mechanisms and factors that contribute to social avoidance and distress is therefore essential. It has been discovered that both exogenous and endogenous factors influence university students' social distancing and anxiety. Exogenous factors mainly refer to the family environment, parenting styles, school environment,

and socio-cultural background[3], while endogenous factors mainly refer to the individual's subjective factors, such as personality traits, emotional traits, self-esteem, and coping styles[4]. Parental psychological control is a specific and invasive type of parenting style[5], denoting the application of control strategies by parents to impede their children's growth in autonomy and interfere with their mastery[6]. Psychological control of parents pertains to one of the extrinsic factors affecting social avoidance and distress. Parental psychological control's negative influence on college kids' social skills, interpersonal interactions, emotions, and behaviors have been demonstrated by numerous studies conducted in China[7-8]. Nonetheless, there aren't many investigations into this influence's interior workings. According to Jones' (2002) mediator model of adolescent social adaptation, extrinsic factors such as an adolescent's parenting style, which are distal influences, may not directly affect a person's interpersonal adaptive behaviors, but rather function through endogenous, or proximal, factors such as personality traits and emotions[9]. What personality and emotional characteristics do parental psychological control, as an extrinsic environmental factor, use to affect college students' social avoidance-distress? Drawing from the findings of prior empirical research, the current study suggests two mediating factors —coping styles and alexithymia— to explore how parental psychological control influences college students' social emotions and behaviors. Alexithymia is defined as an individual's difficulty in identifying and describing his or her own emotions[10]. Psychologists frequently consider it to be a personality attribute as opposed to a mental illness. Studies show that parental over-control is a significant and positive predictor of Alexithymia[11]. There is also a high correlation between alexithymia and social avoidance and distress. According to one study, students in the alexithymia group experienced higher levels of social avoidance and distress than those in the non-alexithymia group[12]. Coping styles are cognitive and behavioral changes that individuals make to alleviate negative emotional experiences when faced with stress[13]. Numerous studies show that coping styles are impacted by both parental psychological control and alexithymia. One study found that psychological control of parental is significantly and positively related to negative coping styles[14]. It has also been discovered that those with high alexithymia scores are less likely to employ mature coping styles and more likely to employ immature ones[15]. Furthermore, a multitude of recent studies have discovered that teenagers' social behaviors and emotions are influenced by their coping styles and that adolescents' Social avoidance-distress are significantly and positively connected with immature coping styles[16]. In conclusion, prior research has demonstrated a connection between parental psychological control, alexithymia, coping styles, Social avoidance-distress; however, the exact mechanism and method by which these relationships are influenced by one another remain unclear. To investigate the effects of parental psychological control on university students' social avoidance-distress, as well as the mediating roles of alexithymia and coping styles between parental psychological control and social avoidance-distress, this study further explored the intrinsic mechanism between these four and created a chain mediation model.

2. Objects and Methods

2.1. Object of Study

In this study, 680 students, from freshmen to seniors, at three colleges in Shenzhen, Guangdong Province, China, were chosen by the convenience sample method, and an on-site questionnaire survey was arranged for them. 655 valid questionnaires were obtained after removing invalid ones.

2.2. Research Method

The Chinese version of the Parental Psychological Control Questionnaire (PPCQ), which was

used in this study, was translated and revised by Wang et al.[7] PPCQ contains three dimensions Guilt Induction, Love Withdrawal, and Authoritarian Aggression. There are 18 items in total. Higher ratings on the 5-point rating system indicate a greater level of psychological control that the youngster perceives from their parents.

The Chinese version of Yi et al.'s translation and revision of the Toronto Alexithymia Scale (TAS-20) was utilized in this investigation[17]. The TAS-20 consists of three dimensions: Difficulty Identifying Feelings, Difficulty Describing Feelings, and Externally-Oriented Thinking. In total, there are twenty items. Higher scores on the 5-point rating system denote a higher degree of alexithymia.

Chinese researcher Ma revised the Social Avoidance and Distress Scale (SAD) after it was created by Watson and Friend et al.[18] The scale consists of twenty-eight items and includes two subscales, Social Avoidance and Social Distress. The scale is scored on a "yes/no" with a range of 0-28 points. The more severe the social anxiety and social avoidance, the higher the score.

The Chinese version of the Coping Style Questionnaire (CSQ) was revised by Xiao et al.[19] The 62 items in the CSQ are divided into six dimensions: Problem-Solving, Help-Seeking, Self-Blame, Avoidance, Rationalization, and Fantasy. Mature coping, which includes two sub-dimensions: Problem-Solving and Help-Seeking; Immature coping, which includes three sub-dimensions: Self-Blame, Avoidance, and Fantasy; and mixed coping, which includes a sub-dimension of Rationalization. The scale included a yes/no rating system with a range of 0-62. Ultimately, factor scores on various dimensions were acquired for the subjects.

2.3. Statistical Treatment

The following methods were used for statistical processing in this study, which was carried out with SPSS27.0 software: tests of variance, correlation analysis, regression analysis and mediation effect tests. A p-value of less than 0.05 was considered statistically significant for the data.

3. Results

3.1. Comparative analysis of profiles of parental psychological control, alexithymia, social avoidance and distress, and coping styles

The Parental Psychological Control score, as indicated by Table 1, was 49.64 ± 9.15, with a mean value that was extremely near to the scale's normative mean (50.4); The Alexithymia score was 60.93 ± 11.85, which is regarded as moderate and near high (according to the scale, a score of 61 or higher indicates severe symptoms, a score of 52 or less shows no symptoms, and anything in between is deemed borderline). The Social avoidance-distress score was 13.99 ± 5.65, which is average (mean score range of 9–16 on this scale); Mature coping, immature coping, and mixed coping received scores of 10.42 ± 4.32, 16.68 ± 5.52, and 5.56 ± 2.59. According to the scale's norms, scores for immature coping (8.0–12.5) were above average, scores for mixed coping (2.5–3.5) were also above average, and scores for mature coping were at the average level (Norm reference: 8.7–12.0).

The four variables were compared in terms of their respective profiles, which include gender, grade, subject, only child, family area, family economy, educational attainment of the mother and father, and the primary caregivers. The data presented in Table 1 are the parts with significant differences in the profile. Table 1 demonstrates that there is a significant difference in parental psychological control on "primary caregivers" ($F=21.01$, $p<0.001$). This implies that college students' perceived levels of parental psychological control may vary depending on their primary caregivers. College students who saw their mother as their primary caregiver reported much higher

levels of parental psychological control than the other groups, according to Post-Hoc comparisons. Moreover, compared to college students whose major caregivers were grandparents or other relatives, college students whose primary caregivers were parents or fathers perceived higher degrees of parental psychological control. Alexithymia was significantly different on gender (t=2.05, P< 0.05). College students who were male had a much higher level than those who were female. Furthermore, alexithymia showed significant differences in "primary caregivers" (F=9.53, P< 0.001). Post-Hoc analysis results revealed that college students with mothers serving as their only caregivers had significantly higher alexithymia scores than students with parents, fathers, or grandparents serving as their primary caregivers. Social avoidance-distress differed significantly in terms of whether a college student was an only child. Students who were the only child had a significantly higher alexithymia score (t=2.04, p<0.05) than students who were not the only child. Moreover, alexithymia showed significant difference in "family area", whereby college students who were raised in urban areas scored lower than those from rural areas (t=4.46, p<0.001). In addition, Social avoidance-distress showed significant differences in "primary caregivers" (F=2.62, p<0.05). College students who were cared for solely by their mothers had significantly higher levels of Social avoidance-distress compared to college students whose parents shared primary caregiver responsibilities. Additionally, mature coping styles showed significant difference in “father's education” (F=3.20, P<0.05). According to Post-Hoc tests, adolescents whose fathers had more than a college education scored significantly higher on mature coping than students whose fathers had less than a college education. Furthermore, mature and immature coping showed significant differences in “primary caregiver,” respectively (F=3.38, p<0.05; F=5.03, p<0.01). College students who had both parents provide for them scored much higher on mature coping than the other groups, according to Post-Hoc comparisons. When compared to the other groups, the immature coping scores of those who were raised by their grandparents or mothers alone were much higher.

Table 1: Comparison grouped according to Profile. n=655

	Mean	Std.	value	Gender	Only Child	Father's Education	Family Area	Primary Caregiver
Parental psychological control	49.64	9.15	t/F	-0.83	0.11	0.81	-1.97	21.01***
			P	0.41	0.92	0.54	0.05	0.00
Alexithymia	60.93	11.85	t/F	2.05*	0.21	1.06	0.11	9.53***
			P	0.04	0.84	0.38	0.91	0.00
Social avoidance and distress	13.99	5.65	t/F	0.25	2.04*	0.99	-4.46***	2.62*
			P	0.8	0.04	0.43	0.00	0.03
Mature Coping	10.42	4.32	t/F	-0.29	-0.89	3.20**	1.2	3.38*
			P	0.78	0.38	0.01	0.23	0.01
Immature Coping	16.68	5.52	t/F	0.81	-0.49	0.55	-0.99	5.03**
			P	0.42	0.62	0.74	0.32	0.00

Legend: ①***p<0.001; **p<0.01; *p<0.05.

3.2. Correlation Analysis of Parental psychological control, alexithymia, social avoidance and distress, coping style

Table 2 displays significant correlations between parental psychological control and a number of other variables, including a significant positive correlation (r=0.353, P<0.01) with alexithymia, a significant negative correlation (r=-0.426, P<0.01) with mature coping, a significant positive correlation (r=0.258, P<0.01) with immature coping, and a significant positive correlation (r=0.256, P<0.01) with social avoidance-distress. Alexithymia was significantly correlated with several other variables including: negatively correlated with mature coping (r=-0.340, P<0.01), positively

correlated with immature coping (r=0.368, P<0.01), and positively correlated with social avoidance-distress (r=0.307, P<0.001). In addition, social avoidance-distress was negatively correlated with mature coping (r=-0.214, P<0.01) and positively correlated with immature coping (r=0.226, P<0.01).

Table 2: Correlation Analysis between PPC, ALEX, MC, and SAD. n=655

Variable	1. PPC	2. ALEX	3. MCS	4. IMCS	5. SAD
1. Parental psychological control	1				
2. Alexithymia	.353**	1			
3. Mature Coping Style	-.426**	-.340**	1		
4. Immature Coping Style	.258**	.368**	0.03	1	
5. Social avoidance and distress	.256**	.307**	-.214**	.226**	1

Legend: ①***p<0.001; **p<0.01; *p<0.05.

3.3. Regression Analysis between Parental psychological control, alexithymia, social avoidance and distress, coping style

Regression analysis was done to look into the anticipated correlations between these variables. Table 3 demonstrates that alexithymia (β=0.34, t=8.86, p<0.001), mature coping (β=-0.44, t=-11.92, p<0.001), immature coping (β=0.24, t=5.94, p<0.001), and social avoidance-distress (β=0.24, t=6.06, p<0.001) could all be predicted by parental psychological control. Furthermore, alexithymia is predictive of immature coping (β=0.35, t=9.52, p<0.001), and mature coping (β=-0.34, t=-9.13, p<0.001), Social avoidance - distress (β=0.30, t=8.06, p<0.001). According to this, alexithymia positively predicts immature coping, Social avoidance - distress, and negatively predicts mature coping. Additionally, Table 3 demonstrated that Social avoidance-distress was positively predicted by immature coping (β=0.21, t=5.55, p<0.001). Social avoidance-distress were negatively predicted by mature coping (β=0.20, t=5.30, p<0.001).

Table 3: Regression Analysis between PPC, ALEX, SAD, MCS and IMCS. n=655

Independent variable	Dependent variable	R^2	Aduste R^2	F	B	SE	t	Beta	P
PPC	ALEX	0.14	0.13	10.49	0.66	0.08	8.86	0.34	0.00
PPC	IMCS	0.08	0.07	5.59	0.14	0.02	5.94	0.24	0.00
PPC	MCS	0.2	0.19	16.1	-0.21	0.02	-11.92	-0.44	0.00
PPC	SAD	0.1	0.09	7.38	0.15	0.02	6.06	0.24	0.00
ALEX	IMCS	0.15	0.14	11.3	0.11	0.01	9.52	0.35	0.00
ALEX	MCS	0.14	0.12	10.1	-0.08	0.01	-9.13	-0.34	0.00
ALEX	SAD	0.14	0.13	10.36	0.1	0.01	8.06	0.30	0.00
IMCS	SAD	0.1	0.08	6.76	0.22	0.04	5.55	0.21	0.00
MCS	SAD	0.09	0.08	6.48	-0.26	0.05	-5.3	-0.2	0.00

Legend: ①PPC=Parental Psychological Control; ②ALEX=Alexithymia; ③ IMCS=Immature Coping Styles; ④MCS=Mature Coping Styles ⑤SAD=Social Avoidance and Distress.

3.4. Chain Mediation Effect Analysis of Alexithymia-Immature Coping Style on Parental Psychological Control and Social Avoidance Distress

After determining the independent variable's predictive effect on the dependent variable, it follows to determine whether it influences the dependent variable via a different mediating variable. The SPSS 23.0 macro plug-in PROCESS v4.1, developed by Andrew F. Hayes (2012), is utilized for the mediation test in this study, and Wen, Z.L.'s (2014) mediation analysis procedure is cited. After five thousand sample runs, confidence intervals of 95% were calculated. The bootstrap method of mediation effect test was used to assess the interpretation of Tables 4–5.

Table 4 demonstrates the significant positive impact of parental psychological control on alexithymia (Coeff=0.353, P<0.001). Alexithymia significantly positively affected immature coping (Coeff=0.32, P<0.001). Parental psychological control significantly positively affected immature coping styles (Coeff=0.15, P<0.001). The variables parental psychological control (Coeff=0.15, P<0.001), alexithymia (Coeff=0.21, P<0.001), and immature coping (Coeff=0.11, P<0.001) all significantly impacted social avoidance-distress. None of the 95% confidence intervals for the above paths included 0, indicating that several paths of the mediation test were valid.

Table 4: Path Analysis of Alexithymia-Immature coping between PPC and SAD. n=655

Path	Coeff	*SE*	95% Confidence Interval		*t*
			Lower	Upper	
PPC → ALEX	0.35	0.07	0.55	0.83	9.65***
ALEX→ IMCS	0.32	0.01	0.08	0.12	8.23***
PPC→ IMCS	0.15	0.02	0.04	0.13	3.79***
IMCS →SAD	0.11	0.04	0.03	0.19	2.70***
PPC →SAD	0.15	0.02	0.05	0.14	3.87***
ALEX→SAD	0.21	0.01	0.04	0.09	5.20***

Legend: ***p<0.001; **p<0.01; *p<0.05.

The path diagram in Figure 1 depicts the chain mediation effect of alexithymia-immature coping on parental psychological control and social avoidance-distress in university students.

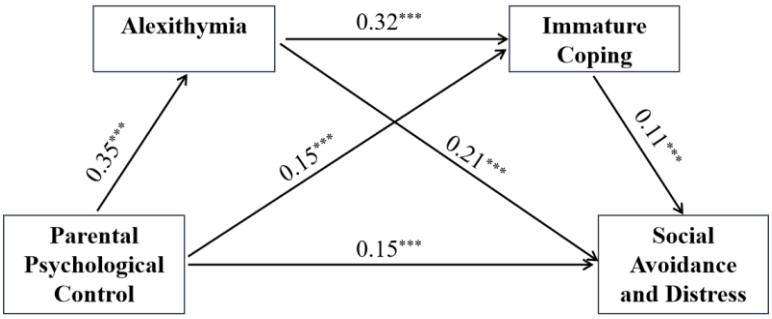

Figure 1: Model of the Chain-Mediation effects of ALEX - IMCS in PPC and SAD.

Table 5 indicates that parental psychological control had a total effect value of 0.16 on Social avoidance-distress. The confidence interval at 95% is 0.11-0.20, excluding 0, suggesting that the total effect is significant. Parental psychological control had a direct effect value of 0.09 on Social avoidance-distress. The confidence interval at 95% is 0.05–0.14, excluding 0, demonstrating the significance of the direct effect and accounted for 59.5% of the total effect. The findings show that there was a significant indirect relationship between parental psychological control and social avoidance-distress, which accounted for 40.5% of the overall effect. The total mediating effect of alexithymia and immature coping was 0.06. The confidence interval at 95% is 0.04-0.09, excluding

0. The indirect effect was realized by three paths, namely: ind1: The role of alexithymia in mediating the relationship between parental psychological control and social avoidance-distress. The indirect effect accounted for 29.7% of the total benefit. ind2: The mediating role of immature coping on parental psychological control and Social avoidance-distress. 6.3% of the overall effect was attributable to the indirect impact. ind3: The chain mediating role of alexithymia-immature coping on parental psychological control and Social avoidance-distress. 4.5% of the overall effect was attributable to the indirect impact. The effect of ind1 was shown to be significantly greater than the effects of ind2 and ind3, after a comparison of the three indirect effect paths. Conversely, the differences in the effects of ind2 and ind3 were not statistically significant. Put differently, the impact of parental psychological control on Social avoidance-distress was found to be mediated more by alexithymia than by immature coping or by the chain-linking effect of alexithymia-immature coping.

Table 5: Chain Mediation Effect of Alexithymia-Immature Coping on PPC and SAD. n=655

	Effect	95% Confidence Interval	% Mediation
Total effect : PPC → SAD	0.16	0.11 ~ 0.20	100
Direct effect: PPC→ SAD	0.09	0.05 ~ 0.14	59.5
Indirect effect:	0.06	0.04 ~ 0.09	40.5
PPC → ALEX → SAD (ind1)	0.05	0.03 ~ 0.07	29.7
PPC → IMCS → SAD (ind2)	0.01	0.00 ~ 0.02	6.3
PPC → ALEX → IMCS → SAD (ind3)	0.01	0.00 ~ 0.02	4.5
(C1) (ind1-ind2)	0.04	0.01 ~ 0.07	
(C2) (ind1-ind3)	0.04	0.02 ~ 0.07	
(C3) (ind2-ind3)	0.00	-0.01 ~ 0.01	

Legend:①PPC=Parental Psychological Control; ②ALEX=Alexithymia; ③ IMCS=Immature Coping Styles; ④MCS=Mature Coping Styles ⑤SAD=Social Avoidance and Distress.

4. Discussion

Several variables in this study exhibited PROFILE differences: college students whose mothers provided care alone reported greater levels of parental psychological control, greater occurrences of alexithymia, less mature coping styles, and more pronounced Social avoidance-distress compared to those whose parents provided care jointly. According to attachment theory and psychoanalytic object relations theory, the mother is the children's most important object and has the greatest psychological influence on them. Many studies have indicated that emotional attachments between children and their moms are more common than with their parents or grandparents. When the father's balancing role is absent in the mother-child relationship, the mother is unable to place a portion of her emotions on her partner and must instead place all of her emotions on her children, which significantly increases the intensity of the mother-child relationship and the degree of emotional entanglement. This is most likely why children raised by their mothers alone reported higher levels of psychological control than children reared by their parents or other relatives. Children raised exclusively by their mothers exhibited higher levels of alexithymia, coping style, social avoidance-distress than the other groups. This is because the psychological control of a university student's mother has a substantial impact on these traits. Furthermore, this study discovered that Social avoidance-distress among college students varied significantly depending on whether they were only children or not, as well as their family area. Wang discovered that college

students' Social avoidance-distress were influenced by characteristics such as their urban or rural origins and whether they were single children. In this study, college students who were only children experienced significantly more Social avoidance-distress than college students who were not only children. In addition, urban-raised college students were significantly less socially avoidant and distressed than rural-raised college students, most likely because college students from rural areas had to adapt and integrate into the cultural environment of the big city. When they feel uncomfortable with the culture shock of the big city, they may lose self-confidence and become more sensitive to interpersonal relationships, thus being more inclined to engage in avoidant behaviors. Furthermore, there is significant variation in mature coping based on the father's educational. College students with more educated fathers scored higher on mature coping styles. This could be because highly educated fathers are more rational in the face of difficulties and disappointments, as well as better at selecting reasonable and mature problem-solving strategies. Children subconsciously adopt their father's coping skills through his words and lessons.

This study also discovered pairs of significant correlations between different variables. First, the severity of alexithymia among college students increases with the stated extent of parental psychological control. This discovery is consistent with Zhou's (2022) findings[20]. This could be because parental control encourages children to put their parents' demands and expectations on them, preventing them from expressing their wants and emotions. Second, when parental psychological control increases, children's coping styles become less mature and more immature. This could be because parental psychological control over children can undermine children's autonomy and self-confidence, making them less likely to employ mature coping styles. Simultaneously, parental psychological control often elicits a sense of shame in the child, leading to immature ways of coping like avoidance and self-blame. Third, the psychological control of parents was both positively and significantly correlated with social avoidance-distress. This could be because parents' psychological control over their children leads to low self-esteem, a lack of self-confidence, and mistrust, all of which contribute to Social avoidance-distress in interpersonal relationships. Fourth, there was a significant negative correlation found between alexithymia and mature coping, and a positive correlation found between it and immature coping. One probable explanation is that college students suffering from severe alexithymia struggle to identify and express their feelings, have a deficiency in empathy, and encounter obstacles in developing positive social connections. Because of this, when faced with challenges, they rarely ask for assistance from others and instead turn to immature coping like avoidance and self-blame. Fifth, alexithymia had a positive and significant relationship with Social avoidance-distress. As was previously noted, college students who suffer from alexithymia are frequently seen as having poor empathy and finding it difficult to build strong interpersonal bonds. This perception can lead to increased feelings of sadness and avoidance in social situations. Sixth, mature coping had a significant negative correlation with Social avoidance-distress, whereas immature coping had a significant positive relationship with Social avoidance-distress. College students who use immature coping in interpersonal relationships get more negative feedback. This heightens Social avoidance-distress.

This study performed regression analyses on variables in addition to correlation analyses, and the results indicated a predictive relationship between the independent and dependent variables. Among these are the following: parental psychological control is significantly correlated with alexithymia; it is adversely correlated with mature coping; and it is positively correlated with social avoidance-distress[20-21]. Some research has revealed that alexithymia predicts coping style[22]. Other research has revealed that mature coping styles significantly adversely predict social avoidance, while immature coping styles significantly positively predict social avoidance. Many psychological theories explain how parenting styles and family interaction patterns affect children's psychology and behavior. Parental psychological control is a specific contextualized parenting style that

undoubtedly influences children's personality traits, feelings, and behaviors, such as alexithymia, coping style, and social avoidance and stress.

This study tested the mediation influence on variables and discovered that: (1) parental psychological control not only directly affected Social avoidance-distress but also indirectly affected social avoidance-distress via alexithymia. A high level of psychological control from parents increases the risk of alexithymia in college students. Adolescents regularly suppress their wants and feelings, which makes them more prone to experience distress, avoidance behavior, and social issues. (2) Parental psychological control can lead to Social avoidance-distress through the mediating role of an immature coping style. This conclusion is supported by many researchers' findings[23]. (3) Parental psychological control can affect social avoidance-distress through the chain-mediating impact of alexithymia-immature coping. The effect follows this path: psychological control → alexithymia → immature coping → Social avoidance-distress. Few empirical investigations have been conducted on this topic in the past. Nonetheless, the foundation can be discovered in the earlier study findings pertaining to these variables, in addition to the research findings mentioned above in (1) and (2). The stress process model that the disciplines of physiology and psychology jointly proposed provides the theoretical foundation for the identification of chain mediation effects. According to the model, there are five sequential steps that determine how an individual responds to stress: stressors (parental psychological control), personal traits (alexithymia), buffers (social support, health status, etc.), coping styles (immature coping), and stress responses (physical exhaustion, behavior, and perceived impact, etc.; Social avoidance-distress). (4) Alexithymia has a stronger mediating effect than immature coping, as well as a stronger mediating effect than alexithymia-immature coping. However, there was not a significant difference between the chain mediating impact of alexithymia-immature coping and the mediating impact of immature coping.

Based on the aforementioned research, successful intervention programs have been put forth to lessen parental psychological control, alexithymia, immature coping styles, and social avoidance and distress, as well as to support college students' mental health and social adaptation.

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