

Conceptualising Adolescent Healthy Development of Self in Contemporary Indian Families: A Narrative Review

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ABSTRACT

Adolescence is often considered a challenging period marked by stress and emotional turmoil, which can put young people at risk for a variety of health problems. While many factors contribute to positive development, families are widely recognized as playing a crucial role in this process, serving as the primary source through which young people acquire the skills, knowledge, and resources necessary to thrive. Unfortunately, our rapidly changing society poses significant threats to both adolescents and their families, potentially leading to harmful outcomes. This narrative review delves into the intricate interplay of familial dynamics, cultural contexts, and their impact on the well-being of Indian adolescents. Moreover, this review offers a conceptual framework that outlines the various intertwined factors that significantly influence healthy adolescent development. This review provides valuable insights for various stakeholders including researchers, practitioners, and policymakers working to promote adolescent health and well-being in India.

Keywords: *Adolescent development, Collectivistic culture, Identity development, Indian Families, Problem behaviours*

Adolescence is a pivotal phase in human development, recognised universally for its profound impact on shaping future health, behaviour, and well-being. India is home to a substantial population of adolescents, estimated to be around 268 million, comprising one-fifth of the world's total population (Dandona et al., 2023). These young minds represent a significant demographic and serve as the foundation for future progress, both on personal and national levels (Sivagurunathan et al., 2015).

Central to this transitional phase is the concept of the development of self, intricately interwoven with familial influences and cultural contexts (Kapadia, 2017; Nagpal & Tripathi, 2019; Tsai et al., 2021). In Indian culture, self-concept is deeply rooted in familial relationships, societal expectations, and religious beliefs (Farver et al., 2007; V. Kumar &

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Talwar, 2014; Nebhinani & Jain, 2019; Rao et al., 2013). Adolescents navigate this intricate web of identities, seeking to reconcile traditional values with modern aspirations, familial duties with personal desires, and collective norms with individual autonomy. Yet, their journey unfolds amidst shifting sands, where conventional notions of family and their role in shaping identity intertwine with the complexities of the contemporary world.

Amidst India's rapidly evolving socio-cultural landscape, adolescents and families navigate shifting tides of change (Kapadia, 2017). Globalisation, urbanisation, and technological advancements have ushered in a new era of opportunities and challenges, reshaping familial dynamics, cultural norms, and adolescent experiences (Okikiola, 2022). Traditional hierarchies are challenged, generational gaps widen, and intergenerational conflicts emerge as families grapple with a rapidly modern society's demands (Chadda & Deb, 2013).

The journey from childhood to adulthood holds great significance in India, where adolescents face various cultural, social, and economic challenges as they navigate their personal growth. This review seeks to examine how modern Indian families can promote positive development among young people, particularly in terms of fostering a strong sense of self and identity formation.

METHODOLOGY

This narrative review article delves into the intricate relationship between family dynamics, cultural context, and the healthy growth of adolescents in modern Indian families. It puts forth a theoretical framework to enhance our understanding of the various factors that contribute to the sound development of adolescents. Additionally, it aims to pinpoint the gaps in current research, suggest avenues for future studies, and offer culturally sensitive interventions that promote healthy adolescent development in Indian families. To achieve these objectives, an extensive literature search was conducted using relevant keywords such as "adolescence," "family dynamics," "self-concept," "identity development," "Indian culture," "social change," and "problem behaviours." The search covered databases like PubMed, PsycINFO, Clarivate Scopus, Google Scholar and also included a manual review of grey literature and reference lists of pertinent studies in English.

Understanding Healthy Adolescent Development

Adolescence is a transitional life phase when individuals begin exploring their social and cultural backgrounds to develop a more defined sense of self (Branje et al., 2021). During this stage of life, individuals are on a journey of self-discovery, navigating a complex web of social influences, personal traits, and the ever-present question: "Who am I?" (Arnett, 1999; Natarajan, 2013). While this exploration is crucial for forming a stable sense of self, research suggests that many adolescents experience prolonged uncertainty, characterized by confusion, anxiety, and difficulty navigating life transitions, which can lead to mental health challenges (Branje, 2022; Crocetti et al., 2014).

Over a century ago, scholars like James and Cooley introduced the concept of the "looking-glass self," which suggests that social interactions offer valuable insights into our identities (Crocetti et al., 2014). According to Vygotsky's developmental theory, children acquire knowledge about their surroundings through social interactions with more knowledgeable individuals. Bronfenbrenner's ecological systems theory builds on this premise by suggesting that relationships within individual contexts, communities, and society as a whole influence human development. Erik Erikson also emphasized the importance of social

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interactions in shaping one's sense of self and identity (Steinberg, 2016). In summary, these theories recognize the central role of social relationships and their interconnectedness in shaping human development. Additionally, they suggest that young people strive for competence and identity formation through social relationships, highlighting the systemic nature of mental health in young individuals. Understanding factors shaping this uncertainty versus a stable identity is crucial for promoting healthy development and fostering the well-being of young minds.

Erikson's theory of psychosocial development and Identity Stages of Marcia

In 1950, Erik Erikson formulated the psychosocial development theory, which outlines eight life stages (Steinberg, 2016). Each psychosocial stage has a positive or negative tendency that can either lead to virtue or mal-development (Orenstein & Lewis., 2022). The proposed first four stages occur during childhood and serve as a foundation for the fifth stage (McMaken, 2000). Erikson's fifth stage centres on adolescence and is called 'identity versus role confusion'. This stage involves two opposing tendencies: *ego identity and confusion/diffusion* (Steinberg, 2016). Developing a strong ego identity leads to fidelity, while confusion/diffusion results in repudiation. Erikson believed balancing these tendencies is crucial to avoid maladaptation or malignancy (Orenstein & Lewis., 2022).

James Marcia further built upon Erikson's work, proposing the concept of identity statuses (Kasinath, 2013). He identified two key components, *Exploration and Commitment*, which lead to four statuses: *Identity diffusion, Foreclosure, Moratorium, and Identity achievement* (Marcia, 1980). According to Marcia, *Exploration* involves searching for objectives, beliefs, and values that align with one's life; conversely, *Commitment* entails making decisive choices and engaging in corresponding behaviours (Kasinath, 2013; Marcia, 1980, 2001). Marcia further mentioned that during adolescence, an individual can experience *identity confusion* if they have not yet committed to a specific developmental task or explored different alternatives for identity. *Foreclosure*, on the other hand, occurs when an adolescent has committed without exploring, which can lead to close-mindedness and dependence on authority figures. *Moratorium* is characterised by active exploration but a lack of commitment, which can result in feelings of anxiety and dissatisfaction with school. Finally, the stage of *identity achievement* is reached when an adolescent has finished active exploration and made a related commitment. The final stage promotes *fidelity*, higher levels of well-being, and a healthier foundation for subsequent epigenetic growth (Helsel, 2008; Waterman, 1999).

Branje's studies (Branje, 2022; Branje et al., 2021) indicate that adolescents with a clear sense of identity tend to have better psychosocial adjustment, including greater life satisfaction, self-esteem, civic beliefs, and academic engagement. Moreover providing with the emotional and cognitive life-skills, identity achievement become the building blocks for maturation into a functional adult (McMaken, 2000).

According to both Erikson and Marcia, the absence of a well-defined self can trigger an identity crisis. The achievement of a positive self-identity is crucial to promoting healthy self-esteem and avoiding negative emotions like depression and anxiety (Orenstein & Lewis., 2022). This process also fosters purposeful behaviour and advanced cognitive abilities rather than a sense of stagnation or personal inadequacy. Additionally, it encourages constructive social attitudes such as tolerance, cooperation, and acceptance, which are necessary for building intimate personal relationships (McMaken, 2000). Lacking these

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critical psychosocial skills can leave children ill-prepared to navigate the challenges of the adolescent identity crisis, potentially leading to a range of emotional and behavioural problems (Crocetti et al., 2014; McMaken, 2000).

Problem behaviours in adolescents

Problem behaviour refers to the actions that have a negative impact on one's own quality of life, as well as the quality of life of others, or pose a significant risk to the health and safety of oneself or others (O'Brien, 2003). Miller, (1967) referred to these behaviours as "inhibition versus aggression," while Achenbach (1978) labelled them "over-controlled versus under-controlled," later known as Internalizing versus Externalizing problems (Achenbach et al., 1987; Achenbach & Ruffle, 2000). The most widely accepted classification for behavioural problems is the categorization of externalizing and internalizing behaviours by Achenbach, which is considered by most literature for evaluating problem behaviours (Achenbach & Ruffle, 2000; Kanwar, 2020; Keiley et al., 2003; Van, 1999).

Externalizing disorders refer to the psychosocial problems that cause individuals to direct their attention and actions towards the external world, often resulting in impulsivity, disruptive behaviour, aggression, and hyperactivity (Hasan & Husain, 2016; Steinberg, 2016). These behaviours are associated with a higher risk of delinquency and criminal behaviour in adulthood, particularly in children from lower socioeconomic backgrounds (Connell & Goodman, 2002). On the other hand, internalizing disorders are characterized by behaviours that are oriented inward and are often indicative of depression or anxiety (Zayia et al., 2021). These behaviours typically include a sense of sadness, excessive worry, withdrawal from peers and family, lethargy, and negative self-perceptions (ibid).

Several studies conducted in India indicate a prevalence rate of problematic behaviours ranging from 14% to 50% (Ginige et al., 2014; Harikrishnan et al., 2017; Harikrishnan & Sailo, 2021; Khan & John, 2021; S. Nair et al., 2017; Pathak et al., 2011). These findings highlight the need for professional intervention, as untreated problematic behaviours can lead to functional impairment and social burden in adulthood. Moreover considering that adolescents constitute a significant portion of India's population, this poses a significant challenge to society's well-being (Sivagurunathan et al., 2015).

HEALTHY DEVELOPMENT IN A FAMILY CONTEXT

An individual's identity does not form in isolation but through meaningful interactions with essential individuals such as parents (Branje, 2022; Crocetti et al., 2014). Family interactions are crucial in this process, serving as the foundation for adolescent identity (Crocetti et al., 2014; McMaken, 2000; Tsai et al., 2021). Warmth and support from family members are essential for developing self-esteem and self-efficacy, and open communication within the family allows for sharing of concerns and opinions, leading to a healthy identity (Becoña et al., 2012; Grotevant & Cooper, 1985, 1999; Schwartz et al., 2005). Conversely, inconsistent discipline, lack of support, excessive control, and family conflicts can create a chaotic environment and instability, leading to problem behaviours a pressing issue in contemporary society (ibid). According to Grotevant and Cooper, (1985), permeability, mutuality, self-assertion, and separateness are linked to adolescent identity exploration. Mutuality aids adolescents in developing the support, acknowledgement, and respect necessary for forming their own beliefs. Permeability helps manage boundaries

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between oneself and others, while separateness and self-assertion enable family members to hold differing opinions, which is especially important during identity formation.

Healthy development in collectivistic Indian families

To gain a comprehensive understanding of adolescent development, examining the interplay between culture and family dynamics is essential as both are interconnected. Globally, there are two widely recognised cultural pathways: individualistic and collectivistic also referred to as western and non-western cultures (Chadda & Deb, 2013; Greenfield et al., 2003; Kapadia, 2017; Smetana, 2011; White et al., 2010). Independent cultures are prevalent in the United States, Australia, Western Europe, and New Zealand, emphasising personal independence, while Collectivist cultures are dominant in much of Asia, Africa, and South America, emphasising interdependence (Kapadia, 2017; Smetana, 2011). The independent cultural families highlights personal choice and individual rights, while the interdependent families focuses on social obligations and responsibilities, prioritising relatedness and group harmony (Kapadia, 2017; Rao et al., 2013). In societies prioritising interdependence, hierarchical structures and respect for authority are valued, and the autonomy may be understood differently than in Western cultures (Greenfield et al., 2003; Kapadia, 2017).

According to Sethi, (1989), the Indian family is deeply rooted in its ancestral legacy, and its influence extends to future generations. Indian families value mutual dependence, hierarchy, and compromise, while Western families emphasise independence, autonomy, equality, and justice (Chadda & Deb, 2013). Unlike in the West, where the husband and wife are often seen as the central relationship, the Indian family's foundation is built upon the bond between parent and child (Chadda & Deb, 2013; Sethi, 1989). Relationships are highly prized, often at the expense of independence, which can complicate the idea of autonomy as a developmental task during adolescence. Parents emphasise obedience, conformity, reliability, and appropriate behaviour. Communication within Indian families is often indirect, and negative emotions and critical comments are avoided when expressing feelings and sharing information (Sethi, 1989). In India, individuals are held accountable for their actions within the family unit, whereas in Western societies, personal success or failure is usually attributed solely to the individual (ibid).

The Indian sense of self is closely tied to the family, and the honour of the extended family is often prioritised over relationships with those outside of it. This contrasts with the "I"-focused self that is more commonly found in Western cultures (Kapadia, 2017; Smetana, 2011). Nonetheless, it is widely acknowledged that preparing for adulthood requires a certain level of independence, which may require re-evaluating one's relationship with one's parents (Kapadia, 2017). However, modern Indian society is a blend of individualistic and collectivistic tendencies (Kapadia, 2017; Nagpal & Tripathi, 2019).

Family Functioning and problem behaviours

According to Lei and Kantor, family functioning refers to family members' role in completing various tasks and the methods of communication and interaction among them (Yu et al., (2022). When a family is functioning optimally, it serves as a protective factor for members; conversely, when it is dysfunctional, it can act as a risk factor (Kustanti et al., 2022).

In recent decades, empirical research on adolescent adaptation has heavily relied on family systems theory. This theory posits that a family unit comprises interconnected relationships

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between its members, and these systems are constantly evolving (Yu et al., 2022). As system theories highlight, changes in one part of the family system can affect other parts (Johnson & Ray, 2016; Sexton & Stanton, 2016). Van, (1999) studied family functioning and problem behaviours, identifying four distinct categories of family functioning that relate to child behaviour problems: the Structural approach, the Intergenerational approach, the Parenting approach, and the Communication approach. The Parenting approach focuses on support, control, supervision, and monitoring, while the Intergenerational approach emphasizes the quality of the relationship between the child and their parents. The Structural approach considers the family's structural functioning as a whole, such as roles, rules, and boundaries, and the Communication approach highlights the importance of the quality of the relationship between family members and their interactions. Through this comprehensive and nuanced examination of family functioning, Van's study provides valuable insights into the significant areas that connect family functioning and adolescent maladaptive behaviours.

Although indigenous models of family functioning are scarce in India, the researchers can adopt various theoretical models under systems school of thought, such as Olson's circumplex model of family functioning. This model, enables to understand how Cohesion, Flexibility, and Communication influences family functioning and adolescent outcomes (Olson, 1999; Olson et al., 2019). In Olson's circumplex Model, there are three dimensions; *Cohesion*, *Flexibility* and the linear dimension *Communication* facilitating the other two dimensions. Cohesion refers to the emotional bonds between family members, while flexibility pertains to how the family's leadership, organisation, roles, rules, and negotiations are managed. Effective Communication involves using positive patterns among family members (Láng, 2018). The extreme higher and lower levels of the circumplex dimensions are considered as unhealthy and are considered as unbalanced families (Olson et al., 2019). Ultimately, the model suggests that balanced family functioning leads to healthiness, while unbalanced family dynamics can lead to problems (ibid).

Within the realm of *Cohesion*, there exist two unbalanced levels: *Disengaged and Enmeshed*. In Disengaged families, there is a lack of involvement in family matters, independence, and a shortage of harmony and togetherness that is the core in any families. Adolescents hailing from such families tend to exhibit fewer empathetic tendencies (Mark Kaufman, 2011), alongside maladaptive symptoms such as depression (Bernstein et al., 1999) and externalising behaviours (Yahav, 2002). On the other hand, Enmeshed families have highly dependent members with little to no private space for each other. According to Minuchin et al., (1975) adolescents in these families may experience psychosomatic problems, while Campbell et al., (1984) reported that adolescents may have foreclosed identities.

The second dimension *Flexibility* consists of two unbalanced dimensions: *Rigidity and Chaos*. Rigidity refers to an inability to adapt to changes, while high levels of disorganisation characterise chaos (Olson, 1999; Olson et al., 2019). Chaotic families often lack structure in roles, leadership, and discipline, leading to disinterest in life and externalising symptoms in adolescents (Darby; et al., 1998; Kazdin, 1993; Paluszn et al., 1991). On the other hand, rigid families are often led by authoritarian parents with strict rules and discipline, which can result in poor problem-solving skills, loneliness, disinterest in life, and a lack of coherence in adolescents (Carris et al., 1998; Sharabi et al., 2012).

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Communication, the third aspect, is a linear dimension that facilitates the other two dimensions and is vital for determining healthy family functioning. Congruent, open, and positive communication is essential to healthy adolescent development and family well-being (Eisenberg et al., 2004). Research has shown that families with externalising children tend to be located in the chaotic - disengaged area of the circumplex model, while families with internalising children are often found in the rigid - enmeshed region (Dreman & Ronen-Eliav, 1997; Láng, 2018; Mannarino & Cohen, 1996; Minuchin & Rosman, 1978).

The maladaptive family functioning is a form of family psychopathology, which encompasses a spectrum of atypical behaviours, emotions, thoughts, and physiological responses that may indicate mental illness (P. Kumar & Tiwari, 2008).

Family Psychopathology and Adolescent mental health

Family psychopathology can be defined as a range of risk factors, including maladaptive communication patterns, problematic interpersonal relationships, and dysfunctional family dynamics, that have an impact on mental health (P. Kumar & Tiwari, 2008; Sethi, 1989). When these risk factors disrupt the equilibrium of the family environment, it is referred to as family pathology (ibid.). Research has shown that the family unit significantly contributes to the onset of mental disorders (Aboobaker et al., 2018; P. Kumar & Tiwari, 2008; Sethi, 1989).

Kumar and Tiwari, (2008) categorised the impact of family on mental disorders into three main categories: the causative role, the maintenance role, and the therapeutic role. According to them, children who exhibit emotional and behavioural disturbances often display specific *parent-child patterns*, which can be classified into several categories that include *overprotection and restrictiveness, over-permissiveness and indulgence, unrealistic demands, rejection, faulty discipline, and undesirable parental models* (Kumar & Tiwari, 2008). Even though no ideal family structure exists, certain family types can negatively influence a child's development. *Maladaptive family structure* is another causative factor that Kumar & Tiwari, (2008) mentioned, in the causation of emotional and behavioural problems which include *a disrupted family, an inadequate family, a disturbed family, an antisocial family, and a discordant or dissonant family* (ibid.).

However, it is essential to keep in mind that factors beyond family functioning can also play a role in developing psychopathology. Quoting Coie and Dodge's work, Van, (1999) reported that the child's heritable characteristics, temperament, and mental processes can influence development, and the environment also plays a vital role. Ecological factors like poverty and inadequate housing, and social stressors like family loss and illness can also increase the risk of behavioural problems. Children experiencing multiple stressors are at greater risk than those experiencing only one. Finally, peer contexts, like rejection or association with deviant peers, can reinforce antisocial behaviour.

However, Branje et al., (2021) emphasize that family dynamics and adolescent identity cannot be considered unidirectional, as adolescent mood swings and rebelliousness can strain family functioning. Nonetheless, families can adapt to these challenges by remaining flexible and navigating transition difficulties, leading to stronger bonds and a more nurturing environment for identity development. As parents, creating a warm, supportive, and open space fosters exploration and autonomy. Adolescents, in turn, can learn to communicate effectively, express their needs assertively, and navigate conflict constructively. This

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collaborative approach lays the foundation for a healthy and positive identity journey, one built on mutual respect, understanding, and love.

TURBULENT SOCIAL CURRENTS: FAMILIES SURFING IN RAPID CHANGES

The fast-moving nature of our world impacts people from all backgrounds. Families and young people cannot remain untouched by the constantly shifting landscape. According to Kapadia, (2017), social change involves a transformation in the typical characteristics of a society, including its cultural products, norms, values, social institutions, and economic systems.

Influence of Industrialisation, Urbanisation, Globalisation and Modernisation

Globalisation, industrialisation, urbanisation, and modernisation are complex and interconnected phenomenon that drive societal change today (Okikiola, 2022). According to Okikiola, (2022), *globalisation* involves interacting and integrating people, companies, and governments from different countries through international trade, investment, and information technology. On the other hand, *industrialisation* involves transforming an economy from agricultural to manufacturing-based, typically replacing manual labour with mass production systems and skilled artisans with assembly lines. *Urbanisation* is the process by which rural areas become more urbanised due to economic development and industrialisation, while *modernisation* refers to the gradual transition from traditional to modern societies. These phenomenon fundamentally alter how we structure our social systems and construct physical environments (Kapadia, 2017; Okikiola, 2022; Sethi, 1989). As the primary socialisation unit for children and the hub of social, economic, and cultural activities, these interconnected processes have greatly affected families (Okikiola, 2022). While these phenomena can enhance the standard of living, facilitate social mobility, and introduce individuals to new concepts, traditions, and technologies (Kapadia, 2017), it can also result in cultural fragmentation, eroding traditional values and customs, and creating new societal dysfunctions such as technoference (Kapadia, 2017; T. Nair, 2020; Tadpatrikar et al., 2021).

Cultural fragmentation

In India, the younger generation offers a unique example of maintaining a local identity while embracing a global one (Arnett, 2002; Kapadia, 2017). It is evident in contemporary dressing, language, food and living patterns. The country's thriving high-tech economic sector owes much of its success to the highly educated youth, who are fully integrated into the global economy. Despite this, most youth still hold traditional values, such as preferring arranged marriages and caring for their elders, as per Indian tradition (Kapadia, 2017; T. Nair, 2020).

The concern is that this social changes has brought about cultural changes and an increasing identity issues among the youth (Arnett, 2002; Muttaqin, 2020; Rao et al., 2013). In a review article by Arnett, (2002), John Berry's work on the various concepts of acculturation was discussed, with a focus on the impact of globalization on identity confusion. Berry's four concepts include Marginalization, Culture shedding, Acculturative stress, and Cultural distance that is associated with identity confusion or repudiation. The effects of these results in the emergence of bicultural and hybrid identities, which may leave some individuals feeling excluded from both local and global cultures (Arnett, 2002). The theories of identity formation are highly applicable in this context, as globalization can lead to identity confusion among young people in non-western cultures. As cultures continue to evolve,

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traditional worldviews may lose their power, leaving some youth needing a clear sense of cultural certainty.

Transformation of traditional Indian families

For generations, the Indian tradition of joint families has supported its members. This system has acted as a cushion against pain, stress, and depression, allowing individuals to recover and continue with their daily activities (Chadda & Deb, 2013; Sethi, 1989). However, significant changes within and outside the family unit have altered this dynamic in recent decades. Household growth has exceeded population growth, leading to fragmentation, decreased household size, younger household heads, and more households headed by females (Chadda & Deb, 2013). The shift from extended and joint families to nuclear families, changing gender roles, increased female employment, and the loss of experienced elderly family members have all contributed to increased pressure on families (Ramadass et al., 2017; Raphael et al., 2017; Sethi, 1989). As a result, they are more vulnerable to emotional disorders.

Within Indian families, there is a clearly defined hierarchy based on age and gender, with each family member having specific responsibilities (Medora, 2007). The elderly are highly regarded for wisdom and knowledge, and parental decisions are typically respected (ibid). However, with the increasing tech-savvy of younger generations, this hierarchy has become more egalitarian, with the internet serving as a source of information for all ages. Additionally, due to work-life stress and non-availability of family members to allocate tasks, technology is increasingly being utilized for child-rearing, which can lead to both familial and health-related challenges. As Van, (1999) mentioned it affects the structure, parenting and communication that influences the family functioning and adolescent maladaptive behaviours. Ultimately, societal changes, family breakdowns, parental media use, and shifts in traditional parenting have all contributed to conflicts related to family functioning impacting adolescent health and vice versa.

ICTs- A new member in the families

To truly understand the modern family dynamics, it is essential to examine the complex interplay between social and technological factors (Kayany & Yelsma, 2000). This interaction, known as the "domestic socio-technical system", first described by Silverstone in 1991, recognizes that people and technology are integral components of a single entity (Kayany & Yelsma, 2000). As a result, technology needs to be considered as a non-living member of the family unit, influencing the overall cohesion, cooperation, and harmony within the household (Akyıl et al., 2017; Bacigalupe & Lambe, 2011; Tadpatrikar et al., 2021)

In the past, parents often entertained and educated their babies by pointing out animals and objects, telling stories and singing songs. Similarly, grandparents would share stories with moral messages, engage in playtime and encourage religious activities. However, with the advent of technology, the introduction of digital devices in caregiving has changed infants' environments (Medora, 2007). Traditional printed storybooks have been replaced with e-books, video cartoons, and podcasts. Moreover, technological devices now serve as electronic babysitters (Nikken, 2019).

According to recent reports, digital technologies have become increasingly crucial for India's socio-economic development (KPMG, 2019; Marwaha & Kaur, 2016; Statista,

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2023). As a result, Indian families have adopted new media, with children, adolescents, and their families using ICTs for various purposes. This trend will likely continue as education, healthcare, and support services increasingly rely on accessible new technologies. In fact, Information and Communication Technologies (ICTs) have become so prevalent that they are considered as a new member of the family (Bacigalupe & Lambe, 2011).

However, along with the numerous advantages, the use of new media technologies also have negative effects, including increased social isolation and the privatization of personal lives (Capri et al., 2021; Carvalho et al., 2015; Tadpatrikar et al., 2021). Although Indian literature on this topic is limited, studies abroad have found that introducing new technology to households can lead to changes in family interaction and functioning, resulting in technofence that has clinical implications for the mental health of individuals from infants to elders (Tanu Gupta, 2017). It can also negatively impact families' cultural and moral values, leading to several ill effects.

A CONCEPTUAL FRAMEWORK

With these pieces of literatures reviewed, the researcher has made a conceptual framework that depicts the significant psycho social factors that influence adolescents' healthy development, shown below (fig. 1).

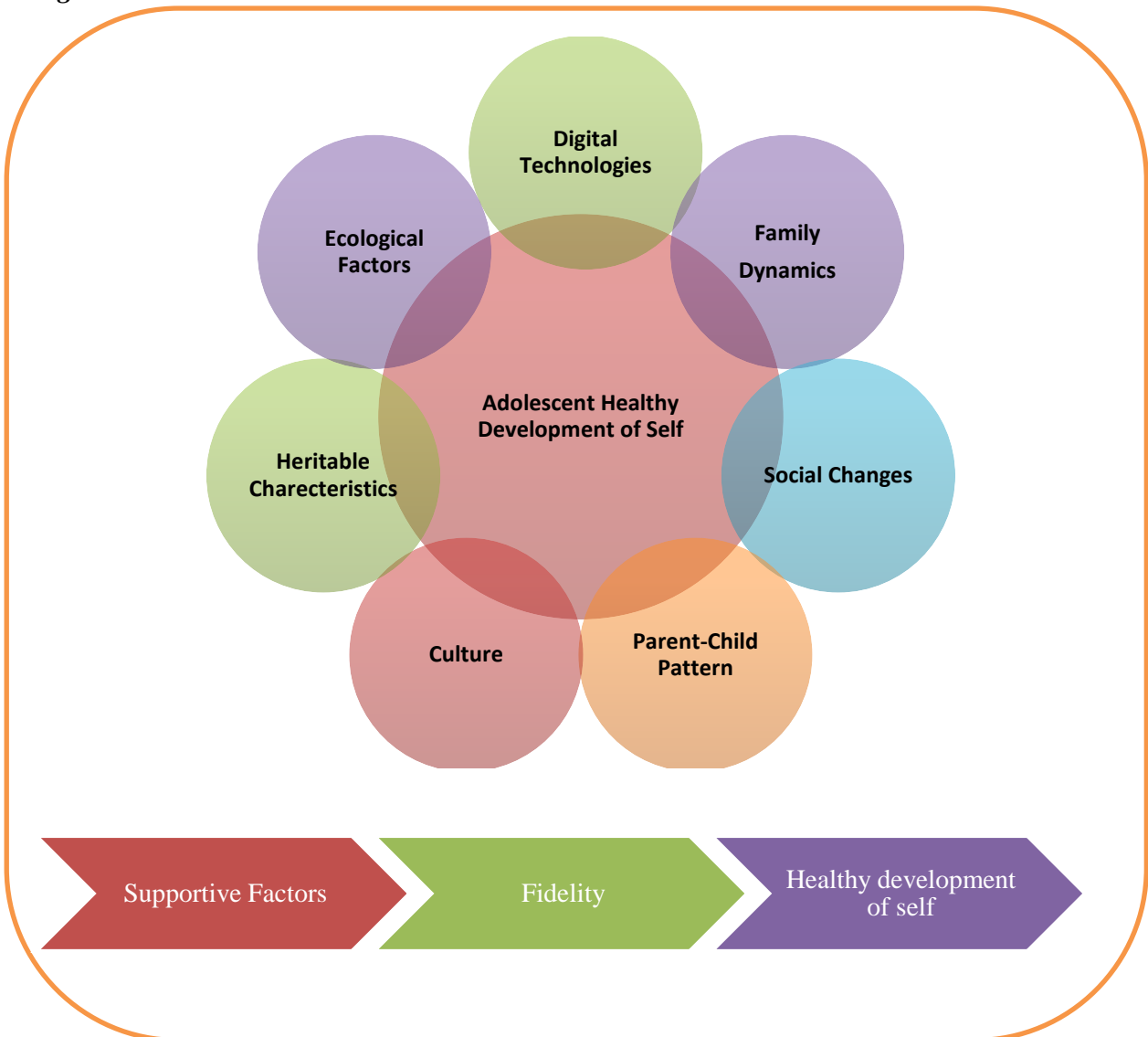
The factors emerged from the review include digital technologies, family dynamics, social changes, parent-child patterns, cultural factors, heritable characteristics, and ecological factors. Regarding digital technologies, maladaptive use, technofence, phubbing, sharenting, problematic internet use, and increased screen time can all have adverse effects. Family dynamics also play a role, and maladaptive family structures can lead to pathological families such as disrupted, inadequate, disturbed, antisocial, and discordant families. Social changes like industrialisation, globalisation, urbanisation, and modernisation can also impact. Maladaptive parent-child patterns can also be detrimental, such as overprotection and restrictiveness, over-permissiveness and indulgence, unrealistic demands, faulty discipline, rejection, and undesirable parental models. Cultural factors like marginalisation, culture shedding, acculturative stress, and cultural distance can further impact healthy adolescent development, as can heritable factors such as temperament and mental processes. Finally, unfavourable ecological factors like poverty, inadequate housing, and social stressors such as family loss and illness can all contribute to adverse outcomes.

These elements directly impact adolescent development and are also interrelated, influencing one another. For instance, as outlined in the framework, digital technologies are directly linked to adolescent wellbeing (Hinduja & Patchin, 2010; Joseph et al., 2022; Orben, 2020; Slonje & Smith, 2008; Strasburger & Hogan, 2013; Twenge & Campbell, 2018), also linked to family functioning, social changes, culture, parent-child relationships, and social stressors (Carvalho et al., 2015; D'Cruz & Bharat, 2001; Kapadia, 2017; Kildare & Middlemiss, 2017; T. Nair, 2020; Ragnedda et al., 2022; Sondhi, 2017; Tadpatrikar et al., 2021).

The more the supportive factors the smoother way to fidelity and healthy development of self and in converse, it will lead to repudiation/ identity confusion leading to mental health issues.

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Figure 1



This conceptual framework provides a valuable insight into the various factors that influence adolescents' healthy growth and development. As societal changes continue to affect families, their role in fostering healthy adolescent development becomes increasingly important. Despite the challenges posed by these changes, families can adapt and grow stronger by remaining flexible and working together to navigate difficulties. Therefore, it is crucial to explore further how these factors are interconnected and how they impact adolescent mental health through rigorous scientific literature.

Scope and Implications

This comprehensive review explores adolescent development in Indian families and offers valuable insights for stakeholders in various sectors. The role of parents and caregivers is crucial in shaping adolescents' growth by fostering positive relationships, promoting open communication, and creating supportive environments. Educators can encourage positive socio-emotional development and academic success by establishing inclusive and nurturing learning environments, promoting empathy and understanding, and working collaboratively

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with parents. Healthcare professionals can play a vital role in promoting physical and mental health among adolescents by providing accessible and culturally sensitive care, preventive care, mental health screening, counselling, and support. Community organizations can also contribute to positive youth development by offering mentorship programs, after-school activities, and community events and advocating for policies that support adolescent well-being. Policymakers can further support healthy adolescent development by enacting policies that address social determinants of health, investing in youth-friendly services, promoting parental leave and flexible work policies, and allocating resources for adolescent mental health services. By working together, stakeholders can create supportive environments that empower adolescents to reach their full potential.

CONCLUSION

As we approach the fifth industrial revolution, our society and families are constantly evolving, which can significantly impact adolescents and their families. The current generation of young people is particularly susceptible to changes in their social environment, making navigating their developmental transitions quite complex. Adolescents require nurturing, guidance, supervision, attentive ears, and monitoring. The quality of their family life can either help or hinder their overall development, which can have a significant impact on their mental health outcomes. Therefore, we must consider the influence of their surroundings on their growth and provide them with safe and impartial spaces where they can seek guidance and support to grow positively.

This narrative review highlights the crucial role of contemporary Indian families in shaping the healthy development of adolescents, particularly in fostering their self-concept and identity formation. The conceptual framework also outlines the various intertwined factors that significantly influence healthy adolescent development. This review provides valuable insights for researchers, practitioners, and policymakers working to promote adolescent health and well-being in India. Further research is needed to address critical gaps and advance our understanding of the complex interplay between families, culture, and teenage development.

REFERENCES

- Aboobaker, S., Jangam, K. V., Sagar, K. J. V., Amaresha, A. C., & Jose, A. (2018). Predictors of emotional and behavioral problems among Indian adolescents: A clinic-based study. *Asian Journal of Psychiatry*, *39*, 104–109. <https://doi.org/10.1016/j.ajp.2018.12.002>
- Achenbach, T. M., McConaughy, S. H., & Howell, C. T. (1987). Child/Adolescent Behavioral and Emotional Problems: Implications of Cross-Informant Correlations for Situational Specificity. *Psychological Bulletin*, *101*(2), 213–232. <https://doi.org/10.1037/0033-2909.101.2.213>
- Achenbach, T. M., & Ruffle, T. M. (2000). The child behavior checklist and related forms for assessing behavioral/emotional problems and competencies. *Pediatrics in Review*, *21*(8), 265–271. <https://doi.org/10.1542/pir.21-8-265>
- Akyıl, Y., Bacigalupe, G., & Üstünel, A. Ö. (2017). Emerging Technologies and Family: A Cross-National Study of Family Clinicians' Views. *Journal of Family Psychotherapy*, *28*(2), 99–117. <https://doi.org/10.1080/08975353.2017.1285654>
- Arnett, J. J. (1999). Adolescent storm and stress, reconsidered. *American Psychologist*, *54*(5), 317–326. <https://doi.org/10.1037//0003-066x.54.5.317>
- Arnett, J. J. (2002). The psychology of globalization. *American Psychologist*, *57*(10), 774–783. <https://doi.org/10.1037/0003-066X.57.10.774>

**Conceptualising Adolescent Healthy Development of Self in Contemporary Indian Families: A
Narrative Review**

- Bacigalupe, G., & Lambe, S. (2011). Virtualizing Intimacy: Information Communication Technologies and Transnational Families in Therapy. *Family Process, 50*(1), 12–26. <https://doi.org/10.1111/j.1545-5300.2010.01343.x>
- Becoña, E., Martínez, Ú., Calafat, A., Juan, M., Fernández-Hermida, J. R., & Secades-Villa, R. (2012). Parental styles and drug use: A review. *Drugs: Education, Prevention and Policy, 19*(1), 1–10. <https://doi.org/10.3109/09687637.2011.631060>
- Bernstein, G. A., Warren, S. L., Massie, E. D., & Thuras, P. D. (1999). Family dimensions in anxious-depressed school refusers. *Journal of Anxiety Disorders, 13*(5), 513–528. [https://doi.org/10.1016/S0887-6185\(99\)00021-3](https://doi.org/10.1016/S0887-6185(99)00021-3)
- Branje, S. (2022). Adolescent identity development in context. *Current Opinion in Psychology, 45*, 101286. <https://doi.org/10.1016/j.copsyc.2021.11.006>
- Branje, S., de Moor, E. L., Spitzer, J., & Becht, A. I. (2021). Dynamics of Identity Development in Adolescence: A Decade in Review. *Journal of Research on Adolescence, 31*(4), 908–927. <https://doi.org/10.1111/jora.12678>
- Campbell, E., Adams, G. R., & Dobson, W. R. (1984). Familial correlates of identity formation in late adolescence: A study of the predictive utility of connectedness and individuality in family relations. *Journal of Youth and Adolescence, 13*(6), 509–525. <https://doi.org/10.1007/BF02088596>
- Capri, T., Gugliandolo, M. C., Iannizzotto, G., Nucita, A., & Fabio, R. A. (2021). The influence of media usage on family functioning. *Current Psychology, 40*(6), 2644–2653. <https://doi.org/10.1007/s12144-019-00204-1>
- Carris, M. J., Sheeber, L., & Howe, S. (1998). Family rigidity, adolescent problem-solving deficits, and suicidal ideation: A mediational model. *Journal of Adolescence, 21*(4), 459–472. <https://doi.org/10.1006/jado.1998.0170>
- Carvalho, J., Francisco, R., & Relvas, A. P. (2015). Family functioning and information and communication technologies: How do they relate? A literature review. *Computers in Human Behavior, 45*, 99–108. <https://doi.org/10.1016/j.chb.2014.11.037>
- Chadda, R. K., & Deb, K. S. (2013). Indian family systems, collectivistic society and psychotherapy. *Indian Journal of Psychiatry, 55*(Suppl 2), S299. <https://doi.org/10.4103/0019-5545.105555>
- Connell, A. M., & Goodman, S. H. (2002). The association between psychopathology in fathers versus mothers and children's internalizing and externalizing behavior problems: A meta-analysis. *Psychological Bulletin, 128*(5), 746–773. <https://doi.org/10.1037/0033-2909.128.5.746>
- Crocetti, E., Meeus, W. H. J., Ritchie, R. A., Meca, A., & Schwartz, S. J. (2014). Adolescent Identity: Is This the Key to Unraveling Associations between Family Relationships and Problem Behaviors? In L. M. Scheier & W. B. Hansen (Eds.), *Parenting and Teen Drug Use*. Oxford University Press.
- D'Cruz, P., & Bharat, S. (2001). Beyond joint and nuclear: The Indian family revisited. *Journal of Comparative Family Studies, 32*(2). <https://doi.org/10.3138/jcfs.32.2.167>
- Dandona, R., Pandey, A., Kumar, G. A., Arora, M., & Dandona, L. (2023). Review of the India Adolescent Health Strategy in the context of disease burden among adolescents. *The Lancet Regional Health - Southeast Asia, 20*(1), 100283. <https://doi.org/10.1016/j.lansea.2023.100283>
- Darby, P. J., Allan, W. D., Kashani, J. H., Hartke, K. L., & Reid, J. C. (1998). Analysis of 112 Juveniles Who Committed Homicide: Characteristics and a Closer Look at Family Abuse. *Journal of Family Violence, 13*(4), 365–375.

**Conceptualising Adolescent Healthy Development of Self in Contemporary Indian Families: A
Narrative Review**

- Dreman, S., & Ronen-Eliav, H. (1997). The relation of divorced mothers' perceptions of family cohesion and adaptability to behavior problems in children. *Of Marriage and the Family*, 59, 324–331.
- Eisenberg, M. E., Olson, R. E., Neumark-Sztainer, D., Story, M., & Bearinger, L. H. (2004). Correlations between family meals and psychosocial well-being among adolescents. *Archives of Pediatrics and Adolescent Medicine*, 158(8), 792–796. <https://doi.org/10.1001/archpedi.158.8.792>
- Farver, J. M., Xu, Y., Bhadha, B. R., Narang, S., & Lieber, E. (2007). Ethnic Identity, Acculturation, Parenting Beliefs, and Adolescent Adjustment: A Comparison of Asian Indian and European American Families. *Merrill-Palmer Quarterly*, 53(2), 184–215.
- Ginige, P., Tennakoon, S. U. B., Wijesinghe, W. H. M. K. J., Liyanage, L., Herath, P. S. D., & Bandara, K. (2014). Prevalence of behavioral and emotional problems among seven to eleven year old children in selected schools in Kandy District, Sri Lanka. *Journal of Affective Disorders*, 167, 167–170. <https://doi.org/10.1016/j.jad.2014.05.062>
- Greenfield, P. M., Suzuki, L. K., & Rothstein-Fisch, C. (2003). Cultural Pathways through Human Development. *Annu. Rev. Psychol.* <https://doi.org/10.1002/9780470147658.chpsy0417>
- Grotevant, H. D., & Cooper, C. R. (1985). Patterns of Interaction in Family Relationships and the Development of Identity Exploration in Adolescence. *Child Development*, 56(2), 415–428.
- Grotevant, H. D., & Cooper, C. R. (1999). Patterns of Interaction in Family Relationships and the Development of Identity Exploration in Adolescence. In *Adolescents and Their Families Structure, Function, and Parent-Youth Relationships* (pp. 103–117).
- Harikrishnan, U., Arif, A., & Sobhana, H. (2017). Assessment of mental health status among school going adolescents in North East India: A cross sectional school based survey. *Asian Journal of Psychiatry*, 30, 114–117. <https://doi.org/10.1016/j.ajp.2017.08.021>
- Harikrishnan, U., & Sailo, G. L. (2021). Prevalence of Emotional and Behavioral Problems among School-Going Adolescents: A Cross-Sectional Study. *Indian Journal of Community Medicine*, 46(1), 232–235. <https://doi.org/10.4103/ijcm.IJCM>
- Hasan, A., & Husain, A. (2016). Behavioural Problems of Adolescents. *IAHRW International Journal of Social Sciences Review*, 4(2), 238–244.
- Helsel, S. D. (2008). The influence of technology on adolescent development: An eco-cultural analysis of cybersocial activity. In *Doctoral dissertation, Duquesne University*. [http://search.proquest.com/docview/250169820?accountid=14744%0Ahttp://fama.us.es/search*spi/i?SEARCH=%0Ahttp://pibserver.us.es/gtb/usuario_acceso.php?centro=\\$USEG¢ro=%24USEG&d=1](http://search.proquest.com/docview/250169820?accountid=14744%0Ahttp://fama.us.es/search*spi/i?SEARCH=%0Ahttp://pibserver.us.es/gtb/usuario_acceso.php?centro=$USEG¢ro=%24USEG&d=1)
- Hinduja, S., & Patchin, J. W. (2010). Bullying, Cyberbullying, and Suicide. *Archives of Suicide Research*, 14(3), 206–221.
- Johnson, B. E., & Ray, W. A. (2016). Family Systems Theory. In *The Wiley Blackwell Encyclopedia of Family Studies* (Vol. 2, Issue March 2016, pp. 782–787). <https://doi.org/10.1002/9781119085621.wbef130>
- Joseph, G. V., M. A. T., Elizabeth, S., & Thomas, J. (2022). The Impact of Screen Time and Mobile Dependency on Cognition, Socialization and Behaviour Among Early Childhood Students During the Covid Pandemic- Perception of the Parents. *Digital Education Review*, 41, 114–123.
- Kanwar, P. (2020). Pubertal development and problem behaviours in Indian adolescents. *International Journal of Adolescence and Youth*, 25(1), 753–764. <https://doi.org/10.1080/02673843.2020.1739089>

Conceptualising Adolescent Healthy Development of Self in Contemporary Indian Families: A Narrative Review

- Kapadia, S. (2017). Adolescence in Urban India. In *Adolescence in Urban India*. <https://doi.org/10.1007/978-81-322-3733-4>
- Kasinath, H. M. (2013). Adolescence: Search for an Identity. *I-Manager's Journal on Educational Psychology*, 7(1), 1–6.
- Kayany, J. M., & Yelsma, P. (2000). Displacement effects of online media in the socio-technical contexts of households. *Journal of Broadcasting and Electronic Media*, 44(2), 215–229. https://doi.org/10.1207/s15506878jobem4402_4
- Kazdin, A. E. (1993). Conduct disorder. In T. H. O. & M. Hersen (Ed.), *Handbook of child and adolescent assessment* (pp. 292–310).
- Keiley, M. K., Lofthouse, N., Bates, J. E., Dodge, K. A., & Pettit, G. S. (2003). Differential risks of covarying and pure components in mother and teacher reports of externalizing and internalizing behavior across ages 5 to 14. *Journal of Abnormal Child Psychology*, 31(3), 267–283. <https://doi.org/10.1023/A:1023277413027>
- Khan, F., & John, N. (2021). Assessment of the Behavioural Problems among Adolescents of a Selected School in New Delhi. *Indian Journal of Youth & Adolescent Health*, 08(02), 18–21. <https://doi.org/10.24321/2349.2880.202109>
- Kildare, C. A., & Middlemiss, W. (2017). Impact of parents mobile device use on parent-child interaction: A literature review. *Computers in Human Behavior*, 75, 579–593. <https://doi.org/10.1016/j.chb.2017.06.003>
- KPMG. (2019). *India 's digital future* (Issue August).
- Kumar, P., & Tiwari, S. C. (2008). Family and Psychopathology : An Overview Series-1 : Children and Adults. *Delhi Psychiatry Journal*, 11(2), 140–149.
- Kumar, V., & Talwar, R. (2014). Determinants of psychological stress and suicidal behavior in Indian adolescents: A literature review. *Journal of Indian Association for Child and Adolescent Mental Health*, 10(1), 47–68.
- Kustanti, E. R., Afiatin, T., & Febriani, A. (2022). Family Functioning: Perspectives of Adolescents. *Proceedings of 3rd International Conference on Psychological Studies (ICPsyche) 2022*, 1–2.
- Láng, A. (2018). Family structure, family functioning, and well-being in adolescence: A multidimensional approach. *International Journal of Humanities and Social Science*, 8(2), 24–31.
- Mannarino, A. P., & Cohen, J. A. (1996). Family-related variables and psychological symptom formation in sexually abused girls. *Journal of Child Sexual Abuse*, 5, 105–120.
- Marcia, J. E. (1980). Identity In adolescence. In *Handbook of Adolescent Psychology* (Issue January, pp. 109–137). Newyork Wiley & Sons. <https://doi.org/10.4324/9780203346860>
- Marcia, J. E. (2001). Identity in Childhood and Adolescence. In *International Encyclopedia of the Social & Behavioral Sciences: Second Edition* (pp. 537–542). <https://doi.org/10.1016/B0-08-043076-7/01722-8>.
- Mark Kaufman. (2011). *How Families Facilitate The Development of Empathy in Children: A Family Systems Theory Perspective*. Kansas State University.
- Marwaha, A. S., & Kaur, S. (2016). Digital Media Reach: A Comparative Study of Rural and Urban People in India. *International Journal Of Scientific Research And Education*. <https://doi.org/10.18535/IJSRE/V4I07.03>
- Mcmaken, M. (2000). *The Relationship Between Erikson's Developmental Tasks and Children Identified as At Risk* [Utah State University]. All Graduate Theses and Dissertations. Paper 2630.

Conceptualising Adolescent Healthy Development of Self in Contemporary Indian Families: A Narrative Review

- Medora, N. P. (2007). Strengths and challenges in the Indian family. *Marriage & Family Review*, 41(1–2), 165–193. http://dx.doi.org/10.1300/J002v41n01_09
- Miller, L. C. (1967). Dimensions of psychopathology in middle childhood. *Psychological Reports*, 21(3), 897–903. <https://doi.org/10.2466/pr0.1967.21.3.897>
- Minuchin, S., Baker, L., Rosman, B. L., Liebman, R., Milman, L., & Todd, T. C. (1975). A Conceptual Model of Psychosomatic Illness in Children: Family Organization and Family Therapy. *Archives of General Psychiatry*, 32(8), 1031–1038. <https://doi.org/10.1001/archpsyc.1975.01760260095008>
- Minuchin, S., & Rosman, B. (1978). *Psychosomatic families: Anorexia nervosa in context*. Harvard University Press.
- Muttaqin, D. (2020). The Role of Cultural Orientation in Adolescent Identity Formation: Self-Construct as a Mediator. *Makara Human Behavior Studies in Asia*, 24(1), 7. <https://doi.org/10.7454/hubs.asia.1050719>
- Nagpal, N., & Tripathi, S. D. (2019). New media, youngsters and family: An emerging culture of changing communication practices in Indian families – a study in Delhi and NCR. *World of Media*, 1(3), 5–40. <https://doi.org/10.30547/worldofmedia.3.2019.1>
- Nair, S., Ganjiwale, J., Kharod, N., Varma, J., & Nimbalkar, S. M. (2017). Epidemiological survey of mental health in adolescent school children of Gujarat, India. *BMJ Paediatrics Open*, 1(1), 1–7. <https://doi.org/10.1136/bmjpo-2017-000139>
- Nair, T. (2020). Media, technology and family The changing dynamics of interaction. In B. Devi Prasad, S. Juvva, & M. Nayar (Eds.), *The Contemporary Indian Family Transitions And Diversity*. Routledge.
- Natarajan, G. (2013). Differences in Internalizing and Externalizing Problems Among Early Adolescent Subtypes Based on Attachment Security. *Psychological Studies*, 58(2), 122–132. <https://doi.org/10.1007/s12646-013-0179-9>
- Nebhinani, N., & Jain, S. (2019). Adolescent mental health: Issues, challenges, and solutions. *Annals of Indian Psychiatry*, 3(1), 4. https://doi.org/10.4103/aip.aip_24_19
- Nikken, P. (2019). Parents' Instrumental use of Media in Childrearing: Relationships with Confidence in Parenting, and Health and Conduct Problems in Children. *Journal of Child and Family Studies*, 28(2), 531–546. <https://doi.org/10.1007/s10826-018-1281-3>
- O'Brien, G. (2003). The classification of problem behaviour in diagnostic criteria for psychiatric disorders for use with adults with learning Disabilities/Mental Retardation (DC-LD). *Journal of Intellectual Disability Research, Supplement*, 47(1), 32–37. <https://doi.org/10.1046/j.1365-2788.47.s1.39.x>
- Okikiola, O. L. (2022). Globalisation, Industrialisation, Urbanisation, Modernisation and I.C.T As Correlates To Developing Social Structure in Nigeria. *British Journal of Global Ecology and Sustainable Development*, 1, 1–16.
- Olson, D. H. (1999). Circumplex model of marital and family systems. *The Journal of Family Therapy*, 53–69. <https://doi.org/10.1080/01591487.1980.11004154>
- Olson, D. H., Waldvogel, L., & Schlieff, M. (2019). Circumplex Model of Marital and Family Systems: An Update. *Journal of Family Theory and Review*, 11(2), 199–211. <https://doi.org/10.1111/jftr.12331>
- Orben, A. (2020). Teenagers , screens and social media : a narrative review of reviews and key studies. *Social Psychiatry and Psychiatric Epidemiology*, 55(4), 407–414. <https://doi.org/10.1007/s00127-019-01825-4>
- Orenstein, G. A., & Lewis., L. (2022). *Eriksons Stages of Psychosocial Development*. In: StatPearls [Internet]. Treasure Island (FL): StatPearls Publishing; 2023. <https://www.ncbi.nlm.nih.gov/books/NBK556096/>

Conceptualising Adolescent Healthy Development of Self in Contemporary Indian Families: A Narrative Review

- Paluszyn, M., Davenport, C., & Kim, W. J. (1991). Suicide attempts and ideation: adolescents evaluated on a pediatric ward. *Adolescence*, 26(101), 209–215.
- Pathak, R., Sharma, R. C., Parvan, U. C., Gupta, B. P., Ojha, R. K., & Goel, N. K. (2011). Behavioural and emotional problems in school going adolescents. *Australasian Medical Journal*, 4(1), 15–21. <https://doi.org/10.4066/AMJ.2011.464>
- Ragnedda, M., Ruiu, M. L., & Felice Addeo. (2022). The self-reinforcing effect of digital and social exclusion: The inequality loop. *Telematics and Informatics*, 72. <https://doi.org/https://doi.org/10.1016/j.tele.2022.101852>
- Ramadass, S., Gupta, S., & Nongkynrih, B. (2017). Adolescent health in urban India. *Journal of Family Medicine and Primary Care*, 6(3), 468. <https://doi.org/10.4103/2249-4863.222047>
- Rao, M. A., Berry, R., Gonsalves, A., Hastak, Y., Shah, M., & Roeser, R. W. (2013). Globalization and the Identity Remix Among Urban Adolescents in India. *Journal of Research on Adolescence*, 23(1), 9–24. <https://doi.org/10.1111/jora.12002>
- Raphael, L., Raveendran, R., & M. V., S. (2017). Prevalence and determinants of substance abuse among youth in Central Kerala, India. *International Journal Of Community Medicine And Public Health*, 4(3), 747. <https://doi.org/10.18203/2394-6040.ijcmph20170752>
- Schwartz, S. J., Pantin, H., Prado, G., Sullivan, S., & Szapocznik, J. (2005). Family Functioning, Identity, and Problem Behavior in Hispanic Immigrant Early Adolescents. *Journal of Early Adolescence*, 25(4), 392–420.
- Sethi, B. B. (1989). Family as a potent therapeutic force. *Indian Journal of Psychiatry*, 31(1), 22–30. <http://www.ncbi.nlm.nih.gov/pubmed/21927355> <http://www.pubmedcentral.nih.gov/articlerender.fcgi?artid=PMC2990867>
- Sexton, T. L., & Stanton, M. (2016). Systems theories. *APA Handbook of Clinical Psychology: Theory and Research*, 2, 213–239. <https://doi.org/10.1037/14773-008>
- Sharabi, A., Levi, U., & Margalit, M. (2012). Children's loneliness, sense of coherence, family climate, and hope: Developmental risk and protective factors. *Journal of Psychology: Interdisciplinary and Applied*, 146(1–2), 61–83. <https://doi.org/10.1080/00223980.2011.568987>
- Sivagurunathan, C., Umadevi, R., Rama, R., & Gopalakrishnan, S. (2015). Adolescent Health : Present Status and Its Related Programmes in India . Are We in the Right Direction ? *Journal of Clinical and Diagnostic Research*, 9(3). <https://doi.org/10.7860/JCDR/2015/11199.5649>
- Slonje, R., & Smith, P. K. (2008). Cyberbullying: Another main type of bullying? *Scandinavian Journal of Psychology*, 49(2), 147–154.
- Smetana, J. G. (2011). *Adolescents, Families, and Social Development How Teens Construct Their Worlds*. Wiley-Blackwell.
- Sondhi, R. (2017). Parenting Adolescents in India: A Cultural Perspective. *Child and Adolescent Mental Health*, May. <https://doi.org/10.5772/66451>
- Statista. (2023). *Digital Media - India*. <https://www.statista.com/outlook/dmo/digital-media/india>
- Steinberg, L. (2016). Adolescence. In *McGraw-Hill*.
- Strasburger, V. C., & Hogan, M. J. (2013). Children, adolescents, and the media. *Pediatrics*, 132(5), 958–961. <https://doi.org/10.1542/peds.2013-2656>
- Tadpatrikar, A., Sharma, M. K., & Viswanath, S. S. (2021). Influence of technology usage on family communication patterns and functioning: A systematic review. *Asian Journal of Psychiatry*, 58(October 2020), 102595. <https://doi.org/10.1016/j.ajp.2021.102595>

Conceptualising Adolescent Healthy Development of Self in Contemporary Indian Families: A Narrative Review

- Tanu Gupta. (2017). "Technoference": A phenomenon of clinical relevance. *18*(2), 2021. http://www.amhonline.org/temp/ArchMentHealth182156-1041825_025338.pdf
- Tsai, M. C., Ng, J. M. T., Yu, Y. F., Strong, C., Hsieh, Y. P., Lin, Y. C., & Lin, C. Y. (2021). Adolescent developmental assets and longitudinal weight status and psychosocial health outcomes: Exploratory analysis from a youth cohort study in Taiwan. *Pediatrics and Neonatology*, *62*(5), 522–528. <https://doi.org/10.1016/j.pedneo.2021.05.006>
- Twenge, J. M., & Campbell, W. K. (2018). Associations between screen time and lower psychological well-being among children and adolescents: Evidence from a population-based study. In *Preventive Medicine Reports* (Vol. 12, pp. 271–283). <https://doi.org/10.1016/j.pmedr.2018.10.003>
- Van, N. M. C. (1999). Family functioning and child behavior problems. *Dissertation*.
- Waterman, A. S. (1999). Identity, the Identity Statuses, and Identity Status Development: A Contemporary Statement. *Developmental Review*, *19*, 591–621. https://doi.org/10.1007/978-1-4419-1698-3_100686
- White, M. A., Elder, J. H., Paavilainen, E., Joronen, K., Helgadóttir, H. L., & Seidl, A. (2010). Family dynamics in the United States, Finland and Iceland. *Scandinavian Journal of Caring Sciences*, *24*(1), 84–93. <https://doi.org/10.1111/j.1471-6712.2009.00689.x>
- Yahav, R. (2002). External and internal symptoms in children and characteristics of the family system: A comparison of the linear and circumplex models. *American Journal of Family Therapy*, *30*(1), 39–56. <https://doi.org/10.1080/019261802753455633>
- Yu, X., Kong, X., Cao, Z., Chen, Z., Zhang, L., & Yu, B. (2022). Social Support and Family Functioning during Adolescence: A Two-Wave Cross-Lagged Study. *International Journal of Environmental Research and Public Health*, *19*(10). <https://doi.org/10.3390/ijerph19106327>
- Zayia, D., Parris, L., McDaniel, B., Braswell, G., & Zimmerman, C. (2021). Social learning in the digital age: Associations between technoference, mother-child attachment, and child social skills. *Journal of School Psychology*, *87*(March), 64–81. <https://doi.org/10.1016/j.jsp.2021.06.002>

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