

## Impact of Family Pathology on Behavioural and Emotional Problems of Children

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### ABSTRACT

The aim of the present study is to find out the impact of family pathology on behavioural and emotional problems of children. The data has been taken from the parents, both father and mother of 60 boys and 60 girls (120 children) between the age group of 9-12 years using the Family Pathology Scale (FPS) and Problem Behavior Checklist (PBCL) questionnaire along with a General Information Schedule. The data obtained from the sample was statistically analysis by using Frequency, Percentage, Mean, SD, Correlation and 't'-test. The obtained result showed that both of the boys (M-75) and girls (M-73.05) parents have moderate family pathology and mothers' placed their children at moderate level (M-104.22) in PBCL but the fathers' placed them at mild level (M-77.12) in PBCL. The analysis reveals that there is a significant difference between father of boys and girls ( $p < 0.05$ , 3.92/ $p > 0.05$ , 2.53) as well as mother of boys and girls ( $p < 0.05$ , 12.38/ $p > 0.05$ , 20.2) in respective of FPS and PBCL. Finally the study reveals that there is a slightly significant relationship with family pathology (with father and children-0.06 and with mother and children-0.09) on the behavioural and emotional problems of children.

**Keywords:** Family, Pathology, Children, Behavioural Problem, Emotional Problem.

The family is a primary social unit of every culture. The biological, sociological and socio-cultural functions of the family occurs in terms of the interactions of the family members with each other and with persons outside of the family. If the interactions between the family members are good then the emotional bond which exists among the members are strong. But if some kind of maladaptive behaviors are present in the interactions with each the family members then they might have some pathological problems. Pathology (from the Ancient Greek roots of pathos, meaning "experience" or "suffering", and logia, "an account of") is a significant component of the causal study of disease and a major field in modern medicine and diagnosis. There are certain theories which provide an explanation to the phenomenon of marriage as well as marriage as an institution such as the Attachment theory. Attachment

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Received: June 29, 2017; Revision Received: September 5, 2017; Accepted: September 15, 2017

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theory of marriage draw from the works of Bowlby (1969) on relationships between infants and their primary caregivers. Hazan and Shaver, (1994) applied these ideas to adult relationships directly arguing that close relationships between adults reflect enduring styles of attachment developed in infancy and early childhood. Attachment styles developed by Ainsworth et al. (1978) had earlier confirmed this process as occurring in the emergence of styles of adult attachment and as pointed out by Hazan and Shaver the success of a given relationship will rest on whether each spouse trusts his/her partner in fulfilling those needs. Sometimes marital discord may bring out stress in marital relationship as well as the behavioural and emotional problems in children. Some typical problematic issues for couples are economical issues, companionship, parenting, household chores, communication, non-fulfilment of expectation, lack of concern, friends and substance abuse etc. Many studies have investigated the effects of parenting style on children's emotional development and behavior (Liem, Cavell, & Lustig, 2010; Pezzella, 2010; Schaffer, Clark, & Jeglic, 2009; Steward & Bond, 2002; Timpano, Keough, Mahaffey, Schmidt, & Abramowitz, 2010) as well as differences in parenting across cultures (Keels, 2009; Paulussen-Hoogeboom, Stams, Hermans, Peetsma, & Wittenboer, 2008). The parenting style literature has identified and defined four different styles of parenting (Baumrind, 1971; Knutson, DeGarmo, & Reid, 2004; Maccoby, & Martin, 1983): Authoritative parenting style refers to parents who are responsive, supporting, and attached to their children. Authoritarian parenting style describes parents who show low support, control their children and request them to follow specific rules. Permissive parenting style describes parents who exhibit behaviours highly support their children and very lenient to their children. In Neglectful parenting style parents show behavior that is low in monitoring and low in supporting their children.

Emotional problems, this term describes as a child who experiencing anxious, depressed, having somatic complaints and withdrawn from social activities (McCrae, 2009). Behavioral problems, this term describes as a child who exhibit aggressive behavior, anger, fighting that affect his/her relationship with the people around him/her (McCrae, 2009). Behaviors is the range of actions and mannerisms made by organisms, systems, or artificial entities in conjunction with their environment, which includes the other systems or organisms around as well as the physical environment. It is the response of the system or organism to various stimuli or inputs, whether internal or external, conscious or subconscious, overt or covert, and voluntary, or involuntary.

### ***Conduct Disorders***

Conduct disorders according to ICD-10, have been characterized by a repetitive and persistent pattern of dissocial, aggressive or defiant conduct. Examples of this behavior include excessive levels of fighting or bullying, cruelty to animals or other peoples, severe destructiveness to property, fire-setting, stealing, repeated lying, truancy from home and school, unusually frequent and severe temper tantrums. Conduct disorders may be of the following types -

***Unsocialized Conduct disorder confined to the family context, Unsocialized Conduct disorder, Socialized Conduct disorder, Oppositional Conduct disorder, Emotional***

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### *Disorders, Separation Anxiety disorder, Phobic Anxiety, Social Anxiety Disorder, Sibling Rivalry disorder*

Some significant conduct and emotional problems of children of 9-12years old are aggression, irritability, fear, temper tantrums, anxiety, phobia, speech articulation disorder, sleep disorder, truancy, blame, isolation, attention deficit hyperactivity disorder(ADHD), emotional behavioural disorder, oppositional defiant disorder(ODD), anxiety disorder.

Getting to the bottom of parent-child relationship problems can be difficult because there can be many underlying issues. The possible outcomes may also vary depending upon individual families, religion, culture, attitudes, ethnicity and resources available.

#### *Some possible managements are-*

- A family-focused approach is helpful in many clinical scenarios - eg, autism, drug dependence.
- Counseling: family counseling and therapy, parental education and training.
- Self-help.
- Referral.
- Marriage guidance.
- Social support.
- Medication to treat specific health problems.
- Police/law enforcement.
- Change schooling - eg, different school, boarding or private education.
- Pediatric healthcare.
- Prevention

There are some important review of literature supporting this present study such as According to Frank C. Verhulst and Grard W. Akkerhuis (1989) Parents' and teachers' reports of behavioral/emotional problems in 1 161 children aged 4–12 from the general population and assessed via the Achenbach Child Behavior Checklist were compared. Low to moderate agreement was found, with parents reporting more problems than teachers. Agreement was higher for externalizing problems than for internalizing problem and higher for children receiving special education than for those receiving regular education, Teachers scored higher on problems related to peer relations and on problems interfering with academic functioning, whereas parents scored their children higher on problems associated more strongly with externalizing than with internalizing syndromes. On a other study According to Andrew G. Billings and Rudolf H. Moos (1983) in a controlled comparison, children of 133 depressed parents had significantly more symptoms of emotional, somatic, and behavioral impairment than did children of 135 non depressed parents. In the study of Helen Orvaschel, Geraldine Walsh-Allis, Weijai Ye (1988) examined the prevalence of psychopathology in children of parents with recurrent major depression (n=61)and children of normal control parents (n=46).Rates of psychopathology in the children of depressed parents were consistently higher when compared either with the control children or with rates of disorder reported for

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nonclinically referred children from other studies. 41% of high-risk children met criteria for at least one psychiatric disorder compared with 15% of low-risk children.

The present study has been conducted for identifying the effect of family pathology on behavioural and emotional problem of children. According to Hall & Elliman psychological, emotional and behavioral problems are 'Behavior or distressed emotions, which are common or normal in children at some stage of development, but become abnormal by virtue of their frequency or severity, or their inappropriateness for a particular child's age compared to the majority of ordinary children. The present study has been conducted to show whether the family with pathological problem are related to the behavioural and emotional disorders of children or not.

### **METHOD**

#### *Objectives*

1. To study the impact of family pathology on behavioral problems of children.
2. To study the impact family pathology on emotional problems of children.

#### *Hypotheses*

1. There is significance difference between boys and girls in terms of their family pathology in perspective of their parents' viewpoints.
2. There is significance difference between boys and girls in terms of their problem behavior checklist in perspective of their parents' viewpoint.
3. There is significant relationship with family pathology (with father and child) on behavioral and emotional problem of children.
4. There is significant relationship with family pathology (with mother and child) on behavioral and emotional problem of children.

#### *Sample (Participants):*

A group of 120 parents (60 boys and 60 girls) with age group of 9 to 12 years will be taken as sample in the present study.

#### *Measure:*

After completion of the information schedule of the sample the following tools were administered.

##### **1. Family Pathology Scale -**

The family pathology scale was developed by Vimala Veeraraghavan and Archana Dogra. The family pathology scale indicates the extent to which maladaptive behaviour is present amongst the family members in their interaction with each other that is between spouses and between parents and children. There are 42 items in the scale to be responded by the subject with 'most often', 'occasionally' and 'never'. That indicates scoring as 3 for 'most often', 2 for 'occasionally' and 1 for 'never'. These were then administered to a group of 300 married couples from the normal population, (N=600) and 100 couples from the psychiatric (pathological) population (N=200) and the reliability and validity were worked out.

## 2. Problem Behaviour Checklist -

The Problem Behaviour Checklist (PBCL) prepared by Vimala Veeraraghavan and Archana Dogra (2000) helps to assess the problem behaviour of a child (above 8 years). The PBCL was devised to identify the emotional and conduct problems of children. There are 58 items in the scale to be responded by the parents with 'most often', 'occasionally', and 'never'. That indicates scoring as 3 for 'most often', 2 for 'occasionally' and 1 for 'never'. Two separate scores will be obtained for the two different domains of problem behaviours. Addition of scores from item no 1 to 29 gives the score for emotional problems where as item no 30 to 58 gives a score for behavioural problem or conduct problems.

### *Procedure and analysis-*

For data collection permission was taken from the participants (both father and mother). Data were collected after a special interview and in an appropriate manner. For scoring all scores were collected and scored using the proper scoring method such as frequency, percentage, mean, 't'-test and correlation.

## RESULTS

The analysis of result section is presented under descriptive statistics and inferential statistics for hypothesis testing. Although four hypotheses have been formulated and tested to understand the effect of family pathological problem on behavioural and emotional problems of children.

**Table 1: Family Pathology differs between boys and girls (mean score) in perspective of their parents' viewpoint.**

Parents	Boy			Girl			Combined		
	Mean	SD	Remark	Mean	SD	Remark	Mean	SD	Remark
Father	70	11.39	Moderate	80	16.17	Moderate	75	13.99	Moderate
Mother	91.06	15.29	Moderate	56.63	15.21	Mild	73.05	15.26	Moderate

Results reveal that Family Pathology differs between boys and girls in terms of mean score in perspective of their parents' viewpoint. In the boys' family both father and mother has moderate family pathology. But in the girls' family the father has moderate family pathology and the mother has mild family pathology. Overall the family pathology of father (boys + girls) and mother (boys + girls) is moderate.

To test hypothesis- 1 't'-test was conducted and results are presented below in the Table 2.

**Table 2 : Comparison between boys and girls interns of their family pathology in perspective of their parents' viewpoint.**

Parent	Boys		Girls		t- Value
	Mean	SD	Mean	SD	
Father	70	11.39	80	16.17	3.92*
Mother	91.06	15.29	56.63	15.21	12.38*

\*Difference is Significant.

\*\*p < 0.05.

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Result reveals that the difference between boys' father and girls father in terms of their family pathology is significant and the girls fathers' have higher mean value than the boys fathers'. The result also showed that the difference between boys' mother and girls' mother in terms of their family pathology is significant and the boys' mother have higher mean value than the girls' mother. Thus the hypothesis 1 is accepted.

**Table 3 : Problem behavior checklist of boys (mean score) in perspective of their parents' viewpoint.**

Parent	Emotional Problem		Behavioural Problem		Combined		Remark
	Mean	SD	Mean	SD	Mean	SD	
Father	40	9.64	34	6.61	74	12.14	Mild
Mother	60	11.95	66.4	10.51	126.4	14.19	Moderate

The result also reveals that there are difference of perceiving the problems of boys between father and mother. According to the fathers' the boys have ranked at mild level in the problem behavior checklist (PBCL) .Where as the mothers' ranked their boys as moderate level in PBCL. The opinion also differs between father and mother in the two dimensions of PBCL that is – “Emotional problem” and “behavioral problem”. According to the mothers' the boys have high behavioral problems than emotional problem in terms of mean score and the fathers' states the opposite view.

**Table 4 : Problem behavior checklist of girls (mean score) in perspective of their parental viewpoint.**

Parent	Emotional Problem		Behavioural Problem		Combined		Remark
	Mean	SD	Mean	SD	Mean	SD	
Father	34.36	6.30	46	11.08	80	13.79	Mild
Mother	44.56	6.63	37	4.74	82	9.46	Mild

Findings also showed that parents ranked their girls' as having mild emotional and behavioral problem in problem behavior checklist. By the fathers opinion the girls have more behavioral problem than emotional problem. According to the mothers the girls have more emotional problems than behavioral problems.

**Table 5: Problem Behavior Checklist of boys and girls (mean score) in perspective of their parents' viewpoint.**

Parent	Emotional Problem		Behavioural Problem		Combined		Remark
	Mean	SD	Mean	SD	Mean	SD	
Father	37.38	8.16	39.74	9.13	77.12	12.99	Mild
Mother	52.28	9.66	51.7	8.15	104.22	12.06	Moderate

According to the fathers' the children (boys + girls) have mild level at PBCL and according to the mothers' the children(boys + girls) have moderate level of PBCL.

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To test the hypothesis 2 ‘t’-test was conducted and results are presented below in the Table - 6.

**Table 6: Comparison between boys and girls in terms of their problem behavior checklist in perspective of their parents’ viewpoint.**

Parent	Boys(N-60)		Girls(N-60)		t-Value
	Mean	SD	Mean	SD	
Father	74	12.14	80	13.79	2.53*
Mother	126.4	14.19	82	9.46	20.2*

\*Difference is Significant.

\*\*p> 0.05.

Result reveals that the difference between boys’ father and girls father in terms of their Problem Behaviour Checklist is significant and the girls fathers’ have higher mean value than the boys fathers’. The result also showed that the difference between boys’ mother and girls mother in terms of their Problem Behaviour Checklist is significant and the boys’ mother have higher mean value than the girls’ mother. Thus the hypothesis 2 is accepted.

**Table 7: Comparative relationship between boys and girls in terms of their family pathology scale and problem behavior checklist.**

Parent	Boys(N-60)	Girls(N-60)
Father	0.05	0.06
Mother	0.11	0.07

Result also showed that the comparative relationships between boys and girls in terms of their family pathology and problem behavior checklist. The correlation is found between the father (FPS + PBCL) and the mother (FPS + PBCL) of both boys and girls that is almost slight negligible relationship in terms of the norm.

To test the hypothesis 3 and 4 ‘correlation’ was conducted and results are presented below in Table-8.

**Table 8- Comparative relationship between parents’ in terms of their family pathology scale and problem behavior checklist.**

Parent	Boys + Girls (N-120)
<b>Father</b>	<b>0.06</b>
<b>Mother</b>	<b>0.09</b>

Finally the results reveals that there is a slight significant relationship with family pathology ( with father and child ) on behavioral and emotional problem of children and also there is a slight significant relationship with family pathology ( with mother and child ) on behavioral and emotional problems of children.

## **DISCUSSION**

The present study showed that according to the parent the family pathology differs between boys and girls and it also effects on the children behavior and emotion. In the family of boys (N-60) the fathers and mothers have moderate family pathology where as in the girls’ family

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the father has moderate and the mother has mild family pathology. So, the pathological problem differs between boys and girls regarding their mother. Overall the family pathology on father of all children (N-120) is in moderate level. Simultaneously the mothers of children (N-120) also have moderate family pathology.

The study also reveals that according to the 't'-value there are significant difference in family pathology between boys and girls by the opinion of their father. Both families have some common and some different type of pathological problem. Mothers of children (boy + girl) also reported significant difference about family pathological problem among them.

The result of the present study also showed that According to the fathers' the boys have mild problem behavior, high at emotional problems than behavioral problems. Since the mothers' perceive their boys as having more behavioral problems than emotional problems and at moderate level in the problem behavior checklist (PBCL). So, the vision, outlook as well as opinion differs between father and mother about their boys. On the other hand the result also shows the problem behavior checklist of girls in terms of mean score by their parent. Parents' perceives their girls are mild level of problem behavior checklist. According to the fathers' girls have more behavioral problem than emotional problems and mothers' reported the vice-versa. But in a combined basis parent has same view point about their girl. The finding shows the different perspective of parents about problem behavior checklist of their children (boys + girl). Fathers' of boys and girls marked them as mild level at problem behavior checklist where as mothers' of boys and girls ranked them as moderate level at problem behavior checklist. Fathers' perceive more behavioral problem among their children and mothers' perceive more emotional problem among their children. This opinion differs between parents because of their personality, perception, parenting style, role and responsibility about the children as well as family.

It is also found that the significant comparison between boys and girls (N-60) about problem behavior checklist according to the 't'-value in perspective of their parents viewpoint. The problem behavior of boys and girls significantly differs by the opinion of their father. Simultaneously according to their mother boys and girls significantly differs in terms of their problem behavior checklist. It can be elicited that the behavioral problem significantly differs between boys and girls.

Beside these findings it is also found the correlation between family pathology scale (FPS) and problem behavior checklist (PBCL) that's shows the difference between boys and girls. The correlation between FPS and PBCL among boys and girls in perspective of their father is slight relationship. Simultaneously according to the mother of boys and girls the relationship between FPS and PBCL is also slightly correlated.

Finally it has been found that the comparative relationship between parents in terms of their family pathology scale (FPS) and problem behavior checklist (PBCL). In this instance the correlation between FPS and PBCL regarding fathers' is positive but almost negligible

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relationship. According to the mother they have correlation between FPS and PBCL but this is also slight almost negligible relationship. It can conclude from this study that FPS and PBCL is positively associated with each other but in a negligible manner. . Between the age group of 9-12 years, is a developmental period of the children (late childhood 8-11) that's why children are affected by some other important factors (schooling, peer group) including their family factors that influence their behavior. It can be concluded that parent, both father and mother have slightly significant effect of their pathological problem on their children behavior.

### CONCLUSION

Family is the single most important influence in a child's life. From their first moments of life, children depend on parents and family to protect them and provide for their needs. Parents and family form a child's first relationships. They are a child's first teachers and act as role models in how to act and how to experience the world around them. Pathological comes from a Greek word, 'pathologikos', which means "treating of diseases" — pathos means "suffering". Family pathological problems which caused by or evidencing a mentally disturbed condition. Family pathological problems are positively related to children emotions and behaviors.

Finally it can be concluded that in the present study the parents with moderate family pathological problem are slightly correlated with the behavioural and emotional problems of children. It has been found that the opinion differs between the father and mother. Fathers' placed their children in Mild level and mothers' placed their children in Moderate level in the Problem Behaviour Checklist. Because the role structure, functioning, responsibility taking about child rearing, parenting style are also different between them. In a fathers' viewpoint the children both boys and girls (N-120) have more behavioral problem but mothers' reported the exact opposite statement of the fathers' viewpoint. It can be seen that mothers' are reported more problems in children (mean score) because they are more involved in child rearing than fathers' in Indian context. Communication and understanding are especially important at late childhood stage of development. The children have many stages at this period of life such as cognitive, moral, psychological, emotional, self-concept, relationships to parents, other adults and peer relations etc. The children can overcome successfully this stages with the help of their parents but mothers' are more important place to children to fulfill their emotional need. In Indian context most of the fathers' are working so they don't have the enough time to solve their children problems. But overall the parent both father and mother are needed to the children (boys + girls) to develop a healthy mental and physical life. Family has a great influence on children behavior but at this late childhood there are some other factors seems to be equal important to the children, such as schooling environment, peer pressure and the socio-cultural atmosphere. Many physical and psychological changes occurs in this period (9-12 years) which have a great effect on children emotion and behavior. These factors have different impact on boys and girls. The study reveals that the boys are more influenced by their peers than girls. They are involved in more physical and social activities than girls. The family violence also has a major influence on children. The boys are become

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more stubborn, irritable than girls if they face quarrel between their parents. Stealing, lying, disobedience, violence, reluctance of sharing with sibling is also very prominent for boys rather than girls. So, the family pathological problem has different effects between boys and girls about their problem behavior but there is slight relationship between FPS and PBCL.

### *Acknowledgments*

The author appreciates all those who participated in the study and helped to facilitate the research process.

*Conflict of Interests:* The author declared no conflict of interests.

## REFERENCES

- Alexandrisa, M, M, Hammond, W, S and McKaya, M. (2013). Children's emotional and behavioural problems and carer-child relationship in permanent care. *Children Australia*,38:22-27.
- Arin, C , Goodman , H, S. (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
- Beck, A, Hastings, P, R, Daley, D, Stevenson, J. (2004). Pro-social behaviour and behaviour problems independently predict maternal stress. *Journal of Intellectual and Developmental Disability*, 29(4), 339-349.
- Billings, G, A , Moss, H, R. (1983). Comparisons of children of depressed and non depressed parents: A social-environmental perspective. *Journal Of Abnormal Child Psychology*, 11(4), 463-485.
- Cassidy, J , Parke, D, R , Butkovsky, L , Braungart, M , J. (1992). Family-Peer Connections: The roles of emotional expressiveness within the family and children's understanding of emotions. *Child Development*, 63(3), 603-618.
- Davies, T, P , Cummings, M, E. (1994). Marital conflict and child adjustment: An emotional security hypothesis. *Psychological Bulletin*, 116(3), 387-411.
- Davies, T, P, Cummings, M, E. (1998). Exploring children's emotional security as a mediator of the link between marital relations and child adjustment. *Child Development*. 69(1), 124-139.
- Eisenberg, N, Fabes, A, R, Shepard, A, S, Guthrie, K, I, Murphy, C, B, Reiser, M. (1999). Parental reactions to children's negative emotions: Longitudinal relations to quality of children's social functioning. *Child Development*. 70(2), 513-534.
- Emery E, R , O'Leary, D, K. (1982). Children's perceptions of marital discord and behavior problems of boys and girls. *Journal of Abnormal Child Psychology*, 10(1), 11-24.
- Flouri, E. (2010). Fathers' behaviors and children's psychopathology. *Clinical Psychology Review*, 30(3), 363-369.
- Holt, S , Buckley, H, Whelen, S. (2008). The impact of exposure to domestic violence on children and young people: A review of the literature. *Child Abuse & Neglect*, 32(8), 797-810.

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- Hudson, L, J , Rapee, M, R. (2001). Parent-child interactions and anxiety disorders; an observational study. *Behavior Research and Therapy*, 39(12), 1411-1427.
- Hugh L, David M. R. (1991). Parents' differential socialization of boys and girls- A meta analysis. *Psychological Bulletin*, 109(2), 267-296.
- Larsson B, Frisk C. (1999). Social competence and emotional/behavior problems in 6-16 year old Swedish school children. *Eur Child Psychiatry*, 8(1), 24-33.
- Lei, C, David, S, Kenneth, D, Bride-Chang, M, Catherine, (2003). Harsh parenting in relation to child emotion regulation and aggression. *Journal of Family Pathology*, 17(4), 598-606.
- Leppanen, M, J, Hietanen, K, J. (2001). Emotion recognition and social adjustment in school-aged girls and boys. *Scandinavian Journal of Psychology*, 42(5), 429-435.
- Littlea E, Hudsona A and Wilksa R(2000).Conduct Behavior Across Home and school *Behavior change*, 17:69-77.
- Michael, A, Gerow, S, Kendall, C, P. (2002). Emotion regulation and understanding: Implications for child psychopathology and therapy. *Clinical Psychology Review*, 22(2), 189-222.
- Morris, S, A, Silk, S, J, Steinberg, L, Myers, S, S, Robinson, R, L. (2007). The role of the family context in the development of emotion regulation. *Social Development*, 16(2), 361-388.
- Najman, M, J, Williams, M, G, Anderson, J, M. (2000). Mothers' Mental Illness and Child Behavior Problems: Cause-Effect Association or Observation Bias? *Child and Adolescent Psychiatry* .39(5), 592-602.
- Orvaschel, H , Walshallis,G ,Ye, W. (1988). Psychopathology in children of parents with recurrent depression. *Journal of abnormal psychology*,16(1), 17-28.
- Sanders, R, M , Carol, D, M , Lucy , T , William, B. (2000). The Triple P-Positive Parenting Program: A comparison of enhanced, standard, and self-directed behavioral family intervention for parents of children with early onset conduct problems. *Journal of Consulting and Clinical Psychology*, 68(4), 624-640.
- Sanders, R, M. (1990). New Directions in Behavioral Family Intervention with Children. *Advances in Clinical Child Psychology*, 18, 283-330.
- Serketich, J, W, Dumas, E, J. (1996). The Effectiveness of Behavioral Parent Training to Modify Antisocial Behavior in Children: A Meta-Analysis. *Behavior Therapy*, 27(2):171 186 .
- Smith, M. (2004.) Parental mental health: disruptions to parenting and outcomes for children. *Child & Family Social Work*, 9(1) ,3-11.
- Stiles, B, W, White, L, M. (1981). Parent-child interaction in the laboratory: Effects of role, task, and child behavior pathology on verbal response mode use. *Journal Of Abnormal Child Psychology*, 9(2), 229-241.
- Verhulst, C, F. (1989). Agreement Between Parents' and Teachers' Ratings of behavioral/emotional problems of children. *Journal of child psychology and psychiatry*, 30( 1), 123-136.
- Wan, W, M, Green, J. (2009). The impact of maternal psychopathology on child-mother attachment. *Archives of Women's Mental health*, 12(3), 123-134.

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- Waxlera Z, C, Parka J, H, Ushera B, Belouada F, Colea P and Grubera R (2008). Young children representation of conflict and distress : A longitudinal study of boys and girls with disruptive behavioral problems. *Development and psychopathology*, 20 : 99 – 119.
- Zubrick, R, S, Ward, A, K, Silburn, R, S, Lawrence, D, Williams, A, A, Blair, E, Robertson, D, Sanders, R, M. (2005). Prevention of Child Behavior Problems through Universal Implementation of a Group Behavioral Family Intervention. *Prevention science*, 6:287.

**How to cite this article:** Ghosh A & Chakraborty P (2017). Impact of Family Pathology on Behavioural and Emotional Problems of Children *International Journal of Indian Psychology*, Vol. 4, (4), DIP:18.01.102/20170404, DOI:10.25215/0404.102