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The Mediating Role of Emotion Regulation in the Relationship Between Parent-Child Relationship Quality and Risky Behaviors in Adolescents

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ABSTRACT

Objective: Adolescence is a critical period in life. During adolescence, individuals experience new situations and, as a result, face various risks. The present study aims to determine the mediating role of emotion regulation in the relationship between the quality of the parent-child relationship and risky behaviors in adolescents.

Methods and Materials: This study is descriptive-correlational in terms of data collection and structural equation modeling in nature. The study population includes all adolescents in Tehran city. Based on Morgan's table, 222 individuals were selected as the sample size through a convenient sampling method and participated in the current study. Data were collected using the Parent-Child Relationship Assessment questionnaire, the Cognitive Emotion Regulation questionnaire, and the Adolescent Risk-Taking Scale. Data analysis was conducted using Pearson correlation analysis and path analysis in the AMOS and SPSS version 22 software.

Findings: The results of the research showed that maladaptive emotion regulation is significantly positively correlated with risky behaviors in adolescents (P < 0.01). The quality of the parent-child relationship had a significant negative correlation with components of risky behaviors in adolescents (P < 0.01).

Conclusion: Other findings of this research indicated that emotion regulation strategies play a mediating role in the relationship between the quality of the parent-child relationship and risky behaviors. Therefore, in adolescents, the quality of the parent-child relationship determines risky behaviors through emotion regulation strategies.

Keywords: Risky behaviors, Parent-child relationship, Adolescents, Emotion regulation.

1. Introduction

A

dolescent puberty in numerous studies has been considered as one of the most significant stressors and turning points in



the developmental stages of the family (Parsakia, Rostami, Darbani, et al., 2023). Researchers believe that hormonal changes and sexual arousal resulting from puberty lead to significant pressure towards individuation from parents and increased engagement in peer relationships (Branje, 2018). Adolescence is a period of significant changes; rapid emotional and physical changes, a time of exploration, selfreliance, self-control, independent decision-making, and a period of choice. Adolescence is when acquiring autonomy, responsibility, and decision-making regarding health, family, career, and peers occur (Sadeghzadeh & Samani, 2010). This period is when adolescents assume new roles and responsibilities and learn social skills to take on these roles, but as a precise, clear, and comprehensive model or pattern of appropriate behavior is not defined for them, they engage in weighing behaviors, experimenting with roles, distinguishing themselves from adults, and in some cases, disregarding rules, eventually leading to risky behaviors (De Los Reyes et al., 2019). Therefore, adolescence and youth are often synonymous with risk-taking, and the individual is defined as a risk-taker. Risk-taking refers to a group of behaviors that increase the likelihood of negative and destructive physical, psychological, and social outcomes for the individual (Wiguna et al., 2018).

Understanding adolescent risk-taking and emphasizing it as an expected requirement of this age group, rather than as deviant criminal behavior, makes the recognition and prevention of the criminalization process in adolescents more realistic. In other words, before legal centers directly focus on criminal adolescents and signs of crime and legal punishments, they should consider their emotional and physical changes and social and family conditions in the inclination towards risk-taking (Zablotska et al., 2019). The occurrence and spread of crime in the youth and adolescence periods often start with risky behaviors during middle and high school. Risky behaviors are the most important factor endangering the health of the community. Risky behaviors are those that jeopardize the health and well-being of adolescents, youth, and other community members. Smoking, tobacco use, alcohol consumption, risky sexual behaviors, substance abuse, etc., are considered risky behaviors (Achterbergh et al., 2017). When the biological and psychological pressures of puberty and the emergence of communication and social problems with family and peers, academic competitions and failures, lack of healthy relationships and resilience, create a breeding ground for substance and alcohol abuse, sexual risk-taking, running away from home, theft, and violence. Today, the prevalence

of risky behaviors, especially in adolescents and youth, has become one of the most significant and widespread concerns of human societies, and despite three decades of activities, risky behaviors have shown an exponential growth worldwide. According to statistics from the Centers for Disease Control and Prevention, the prevalence of behaviors that endanger health is increasing in the community of youth and the elderly. Alcohol consumption among youth, for example, is a high-risk behavior that not only causes trouble for the perpetrator but also imposes significant costs on society and results in the deaths of millions of young people and billions of dollars in costs to human societies. In European and American countries, weekly alcohol consumption is higher among 15-year-old boys than girls (Esmaielzadeh et al., 2014).

Psychoanalytic theories believe that hormonal changes resulting from puberty drive Oedipal desires to the surface. These surfaced desires, involved in issues related to impulse control and anxiety, lead to rebelliousness in adolescents, consequently creating a distance between them and their parents. Most researchers distinguish parent-adolescent interaction due to the essential difference of the adolescent period from the childhood period from parent-child interaction (Sadeghzadeh & Samani, 2010). Consequently, studying this interaction is of special importance in shaping individual identity and the developmental changes of adolescents and parents, and hence many studies have focused on this bilateral interaction. Despite the importance of the parent-adolescent relationship, depending on which theoretical approach we examine the interaction between adolescents and their parents, the concept of "parentadolescent relationship" will take a different form (Satoorian et al., 2016). The theory of individuation highlights that a skeptical parent-adolescent relationship during puberty serves to facilitate relationships outside the family group and tends toward risky behaviors, consequently driving the adolescent towards less intimacy with parents and independence from them. Therefore, the parent-child interaction, influenced by the child's puberty, transforms into parent-adolescent interaction and thus becomes significantly important. The first theory in this area is the theory of individuation (or the endogenous change approach) (Achterbergh et al., 2017). Thinkers in this theory believe that intimacy in the parent-adolescent relationship decreases under the influence of the adolescent's efforts to achieve social, cognitive, and emotional independence. In other words, concurrent with the transition of children to adolescence, they also begin the process of individuation. In



this approach, individuation is a process in which the individual, while maintaining a relationship with their parents, also begins to separate from them as an independent individual, and therefore, the likelihood of inclination towards risky behaviors increases during such a process (Zablotska et al., 2019). It appears that the process of emotion regulation could play a mediating role in the relationship between the quality of the parent-child relationship and risky behaviors in adolescents.

Everyday life experiences have a fundamental impact on psychological health, motivational processes, appropriate responsiveness to stress-inducing incidents and social development, affecting various individual actions. Although emotions (such as fear, anger, and disgust) have biological bases, individuals can influence the intensity, duration, and type of their emotional experiences (Morris et al., 2017). This process, in psychological texts, is called emotion regulation. Emotion regulation can be defined as processes through which individuals can impact which emotions they have, when they experience and express them. Emotion regulation encompasses all external and internal processes responsible for monitoring, evaluating, and modifying emotional reactions, especially intense and transient states, to achieve individual goals, which can be automatically or controlled, consciously unconsciously. Difficulty in emotional regulation should be the result of a lack of emotional regulation abilities and skills (Wante et al., 2018). Researchers, based on previous studies, state that emotional regulation refers to a stage where individuals influence their emotions and how they express and experience them. According to the emotion regulation model, emotional regulation is a unique and singular process for moderating emotional experience aimed at achieving social desirability and being in a physical and psychological state ready for appropriate responses to internal and external psychological demands (Van Lissa et al., 2019).

The Gross model consists of five stages (onset, situation, attention, appraisal, and response). Gross believes each stage of the emotion production process has a potential regulatory goal, and emotional regulation skills can be applied at different points in this process (Van Lissa et al., 2019). At the onset of an emotion or choosing a situation, there are factors that either put an individual in a situation of emotional arousal or keep them away from it (avoidance stage). In the second stage (situation), changes can be made in the emotion production process by modifying the situation. In the third stage (attention), one of the ways to create change and regulate emotion is to shift or expand

attention. Three methods of expanding attention include distraction, focusing, and rumination (Kazemi Rezaei et al., 2019). In the fourth stage of the emotion production process (appraisal), creating cognitive changes is the regulatory part's task in this stage, and one of the strategies is cognitive reappraisal. The last stage of the emotional sequence is the response stage, and adjusting the response constitutes the last part of the emotion regulatory process. Therefore, the Gross emotion regulation process model includes five stages, each containing a set of adaptive and maladaptive strategies, where individuals with emotional problems use more maladaptive strategies such as rumination, avoidance, etc. (Wante et al., 2018). Based on this, considering the sensitivity of adolescence and the likelihood of risky behaviors in this period and the importance of examining variables related to these behaviors, the present study is designed to respond to this question: whether emotion regulation strategies have a mediating role in the relationship between parent-child relationship quality and risky behaviors in adolescents.

2. Methods and Materials

2.1. Study Design and Participants

This study is a descriptive-correlational research and a structural equation modeling type. The study population includes all adolescents in Tehran city. Based on Morgan's table, 222 individuals were selected as the sample size through a convenient sampling method and participated in the current study. Sample selection criteria for the research included being an adolescent, not having a serious medical illness, not having a major psychiatric disorder, and consenting to participate in the study. Exclusion criteria included lack of consent to continue the research and having any serious physical or mental illness. According to Morgan's table, 222 adolescents in Tehran city were selected as the sample size through a convenient sampling method.

2.2. Measures

2.2.1. Emotion Regulation

Emotion Regulation Scale was developed by Garnefski and Kraaij to assess cognitive emotion regulation (Garnefski & Kraaij, 2007). This is an 18-item instrument assessing cognitive emotion regulation strategies in response to threatening and stressful life events on a five-point scale ranging from never (1) to always (5), based on 9 subscales: self-blaming; other-blaming; focusing on





thought/rumination; catastrophizing; minimizing; positive refocusing; positive reappraisal; acceptance; and refocusing on planning. The minimum and maximum scores for each subscale range from 6 to 10, with higher scores indicating more frequent use of that cognitive strategy. Cognitive emotion regulation strategies in the questionnaire are divided into two general categories: adaptive (conforming) strategies and maladaptive (non-conforming) strategies. Adaptive strategies consist of the subscales of minimizing (questions 13 and 14); positive refocusing (questions 7 and 8); positive reappraisal (questions 11 and 12); acceptance (questions 3 and 4); refocusing on planning (questions 9 and 10). Maladaptive strategies consist of the subscales of selfblaming (questions 1 and 2); other-blaming (questions 17 and 18); focusing on thought/rumination (questions 5 and 6); catastrophizing (questions 15 and 16). Scores range from one to five for each question. Then, scores of each of the nine subscales are calculated by summing the scores of related questions. The score of adaptive strategy subscales is obtained by dividing the total scores by ten (number of questions), and the score of maladaptive strategy subscales is obtained by dividing the total scores by eight (number of questions) ((Garnefski & Kraaij, 2007). It is validated and the reliability is confirmed in Iran by many researchers.

2.2.2. Parent-Child Relationship

Parent-Child Relationship Scale (PCRS), developed by Mark et al. (1983), consists of 24 items used to measure the quality of parent-child communication. This questionnaire includes four components: positive feelings, role confusion/disgust, identity setting, and communication. The scoring of the questionnaire is based on a 7-point Likert scale. Items 9, 13, and 14 are scored inversely, and then the scores of the options are summed and divided by the number

of options of each factor (average of each subscale). The total score is the sum of the averages of the subscales (Foran et al., 2020). In Iran, the construct validity, face validity, and content validity of this scale were confirmed, and the Cronbach's alpha coefficient for the subscales of positive relationship aspects and conflict were satisfactory (Seydi et al., 2019; Seyed Mousavi et al., 2013; Teimouri et al., 2010).

2.2.3. Risky Behaviors

Iranian Adolescent Risk-Taking Scale is used to assess adolescents' vulnerability to a range of risky behaviors. The questionnaire consists of 38 questions to assess risky driving behaviors (6 questions), violence (5 questions), smoking (5 questions), drug use (8 questions), alcohol consumption (6 questions), sexual relationships and attraction to the opposite sex (8 questions). The scale consists of 38 items, and respondents express their agreement or disagreement with these items on a 5-point scale from strongly disagree (1) to strongly agree (5). The construct validity, face validity, content validity, and reliability of the Iranian Adolescent Risk-Taking Scale were confirmed by several researchers (Dastjerdi et al., 2010; Esmaielzadeh et al., 2014; Ghoreishi Rad & Pour JabbarAkhouni, 2019).

2.3. Data analysis

For data analysis, correlation coefficients and path analysis were used under the AMOS and SPSS version 22 software.

3. Findings and Results

The demographic results of the study revealed that out of 222 participants, 121 were female and 91 were male.

 Table 1

 Descriptive Statistics

Variable	Mean	Standard Deviation	Minimum	Maximum	Skewness	Kurtosis
Driving	15.49	3.95	7	30	0.29	0.82
Violence	17.39	3.61	5	25	-0.49	-0.71
Smoking	17.11	4.78	6	25	0.30	0.94
Substance Use	22.82	6.08	10	38	-0.51	-0.88
Alcohol Consumption	18.91	5.61	7	28	0.63	0.83
Sexual Behavior	23.90	6.29	8	40	-0.93	-0.77
Adaptive Emotion Regulation	25.60	6.74	10	48	0.79	0.62
Maladaptive Emotion Regulation	28.31	7.39	8	40	-0.80	-0.59
Parent-Child Relationship	8.58	3.14	3	17	-0.44	-0.48



Table 2

Correlation Matrix

Variables	Driving	Violence	Smoking	Substance Use	Alcohol Consumption	Sexual Behavior	Adaptive Emotion Regulation	Maladaptive Emotion Regulation
Driving	1							
Violence	0.41**	1						
Smoking	0.38**	0.27**	1					
Substance Use	0.40**	0.33**	0.64**	1				
Alcohol Consumption	0.52**	0.43**	0.67**	0.28**	1			
Sexual Behavior	0.57**	0.58**	0.41**	0.48**	0.36**	1		
Adaptive Emotion Regulation	-0.42**	-0.31**	-0.29**	-0.37**	-0.40**	-0.25**	1	
Maladaptive Emotion Regulation	0.38**	0.53**	0.33**	0.28**	0.24**	0.38**	-0.28**	1
Parent-Child Relationship Quality	-0.56**	-0.51**	-0.45**	-0.39**	-0.47**	-0.52**	0.37**	-0.62**

As the results in Table 2 show, the quality of the parentchild relationship had a significant negative correlation with the components of risky behaviors in adolescents, including driving (P < 0.01, R = 0.56), violence (P < 0.01, R = 0.51), smoking (P < 0.01, R = 0.45), substance use (P < 0.01, R = 0.39), alcohol consumption (P < 0.01, R = 0.47), and sexual behavior (P < 0.01, R = 0.52). The quality of the parent-child relationship had a significant positive correlation with adaptive emotion regulation strategies (P < 0.01, R = 0.37) and a significant negative correlation with maladaptive emotion regulation strategies (P < 0.01, R = 0.62). Moreover, adaptive emotion regulation was significantly negatively correlated with risky behaviors in adolescents, including driving (P < 0.01, R = 0.42), violence (P < 0.01, R= 0.31), smoking (P < 0.01, R = 0.29), substance use (P < 0.01, R = 0.37), alcohol consumption (P < 0.01, R = 0.40), and sexual behavior (P < 0.01, R = 0.25). Maladaptive emotion regulation had a significant positive correlation

with risky behaviors in adolescents, including driving (P < 0.01, R = 0.38), violence (P < 0.01, R = 0.53), smoking (P < 0.01, R = 0.33), substance use (P < 0.01, R = 0.28), alcohol consumption (P < 0.01, R = 0.24), and sexual behavior (P < 0.01, R = 0.38).

In this study, the chi-square value was 74.95, which is significant at the P < 0.01 level. Given the large sample size of the study, the ratio of chi-square to degrees of freedom was used, which was 1.44. Based on this index, the resulting number from this ratio should not exceed 3 for the model to be accepted. Since the ratio of chi-square to degrees of freedom is less than 3, it can be said that the data obtained are consistent with the hypothetical model. Considering the model fit indices, especially the chi-square to degrees of freedom ratio of 1.61, the GFI index of 0.94, the AGFI index of 0.91, the CFI index of 0.93, the TLI index of 0.86, the IFI index of 0.90, the NFI index of 0.93, and the RMSEA index of 0.05, it can be stated that the model has a good fit.

Table 3

Direct Effects

Path Description	Non-Standard Coefficient (B)	Standard Coefficient (β)	SE	Critical Ratio	p
Parent-Child Relationship Quality on Adaptive Emotion Regulation	0.64	0.44	0.033	10.41	< 0.001
Parent-Child Relationship Quality on Maladaptive Emotion Regulation	0.50	0.31	0.051	8.21	< 0.001
Adaptive Emotion Regulation on Driving	0.64	0.32	0.031	8.26	< 0.001
Adaptive Emotion Regulation on Substance Use	0.70	0.38	0.012	10.01	< 0.001
Adaptive Emotion Regulation on Sexual Behavior	0.63	0.32	0.046	8.25	< 0.001
Maladaptive Emotion Regulation on Violence	0.50	0.37	0.061	9.98	< 0.001
Maladaptive Emotion Regulation on Smoking	0.38	0.29	0.042	6.78	0.001
Maladaptive Emotion Regulation on Substance Use	0.34	0.21	0.012	5.85	0.001
Maladaptive Emotion Regulation on Sexual Behavior	0.55	0.30	0.050	8.46	0.001



In the conceptual model, it is assumed that the quality of the parent-child relationship is related to risky behaviors in adolescents through emotion regulation. In the initial model, i.e., the hypothetical model of the mediating role of emotion regulation in the relationship between the quality of the parent-child relationship and risky behaviors in adolescents, some path coefficients were not significant, and these paths were removed to better fit the model with the data. Figure 1 shows the paths of the hypothetical model of the mediating role of emotion regulation in the relationship between the quality of the parent-child relationship and risky behaviors in adolescents after modification. According to the results of

Table 3 and based on the path analysis results, the coefficients of all paths in this model were significant.

After reviewing and confirming the model for hypothesis significance testing, two indices, the Critical Ratio (CR) and P, were used. Based on the significance level of 0.05, the critical value must be greater than 1.96 or less than -1.96, and a parameter value other than this in the model is not considered significant. Also, values less than 0.05 for the P value indicate a significant difference of the calculated value for the regression weights from zero at the 95 percent level. Based on the mentioned indices, as the results in Table 3 show, the regression weights related to the results of this table are all significant at a level less than 0.05.

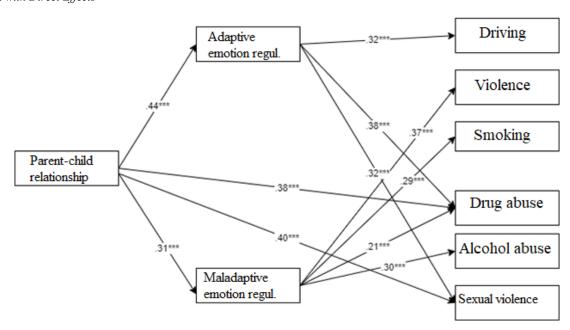
Table 4

Indirect Effects

Path Description	Standard Coefficient (B)	Non-Standard Coefficient (β)
Parent-Child Relationship Quality on Driving	0.22	0.12
Parent-Child Relationship Quality on Violence	0.24	0.10
Parent-Child Relationship Quality on Smoking	0.18	0.11
Parent-Child Relationship Quality on Substance Use	0.20	0.13
Parent-Child Relationship Quality on Alcohol Consumption	0.17	0.10
Parent-Child Relationship Quality on Sexual Behavior	0.23	0.12

Figure 1

Final Model with Direct Effects



Since one of the objectives of path analysis is to present the indirect effect of independent variables on dependent variables, in addition to the direct effect, the indirect effect of the independent variable on the dependent is shown in Table 4. As can be seen, the indirect effect of the quality of the parent-child relationship on the components of risky behaviors in adolescents was significant at the 0.001 level.





4. Discussion and Conclusion

The present study aimed to explore the mediating role of emotion regulation in the relationship between the quality of the parent-child relationship and risky behaviors in adolescents. According to the results of this study, higher levels of parent-child relationship quality were associated with a decrease in risky behaviors among adolescents, such as reckless driving, smoking, and sexual behaviors. In other words, there was a significant negative relationship between the quality of the parent-child relationship and the reduction of risky behaviors in adolescents. These findings are consistent with the results of previous studies (Álvarez-García et al., 2019; Ghoreishi Rad & Pour JabbarAkhouni, 2019; Liu et al., 2017; Satoorian et al., 2016). Furthermore, the study found a significant negative relationship between adaptive emotion regulation strategies and risky behaviors in adolescents, indicating that higher levels of adaptive emotion regulation strategies were associated with a decrease in risky behaviors such as reckless driving, smoking, and sexual behaviors. There was also a significant positive relationship between maladaptive emotion regulation strategies and risky behaviors in adolescents, indicating that higher levels of maladaptive emotion regulation strategies were associated with an increase in risky behaviors such as reckless driving, smoking, and sexual behaviors. These findings align with some previous studies (Dadfarnia et al., 2020; Ghoreishi Rad & Pour JabbarAkhouni, 2019; Wante et al., 2018). Lastly, the study found that emotion regulation plays a mediating role in the relationship between the quality of the parent-child relationship and risky behaviors in adolescents, in such a way that the quality of the parent-child relationship, with an increase in the level of adaptive strategies, can lead to a reduction in risky behaviors in adolescents. This finding is consistent with some previous studies (Sadeghi & Mazaheri, 2007; Van Lissa et al., 2019).

Adolescence is a transition period from childhood to adulthood, where individuals experience significant physical and emotional changes that can bring stress and tension, leading adolescents to seek relief from these pressures through peer groups and consequently engaging in risky behaviors (Pirzadeh & Parsakia, 2023). Involvement in risky behaviors during adolescence, associated with reduced academic and social performance, can lead to a decline in the quality of life even in later ages, including adulthood and old age. Risky behaviors not only affect adolescents but also have numerous negative consequences for their families and

society, entailing various individual and social harms (Liu et al., 2017). Adolescents who have a warm and intimate family environment and relationships with their parents can use these emotional relationships as a protective factor against their inclination towards risky behaviors. Having a warm and intimate relationship with family members, especially parents, is associated with functions such as increasing self-esteem, impacting personal and social wellbeing, enhancing problem-solving abilities, social cohesion, strengthening ethical commitments, and social stability, which are factors in combating the pressures and tensions of adolescence and deterring the occurrence of risky behaviors among adolescents (Álvarez-García et al., 2019). Psychologists and researchers have supported the hypothesis that individual experiences during childhood adolescence play a significant role in personality development. Research on childhood experiences has highlighted the impact of childhood experiences and their failures on physical and psychological health throughout life (Perryman et al., 2017). Often, behavioral maladjustments and disorders after childhood in the family result from a lack of attention to this sensitive period and lack of proper guidance in the process of growth and development. This negligence leads to maladjustment and non-conformity with the environment and various deviations in different dimensions for the child and the family (Khanjani et al., 2016; Morris et al., 2017).

Adolescence, as a transitional stage between childhood and adulthood, is a period of significant biological, social, emotional, and cognitive changes. If adolescents do not satisfactorily navigate this stage, it can lead to emotional and behavioral problems in adulthood (Dastjerdi et al., 2010). Adolescence is a period of transition from childhood to adulthood, marked by numerous biological, social, emotional, and cognitive changes that can bring stress and tension for adolescents. They might turn to peer groups and consequently risky behaviors as a means of coping with the stress and pressures arising from the developmental stages of adolescence. In fact, if adolescents cannot satisfy their emotional needs and reduce their stress and tension within their family and interpersonal relationships with their parents, they might seek to relieve the stress and pressures of adolescence by gaining independence from their parents, seeking emotional support outside the home, and seeking approval from peer groups. Having a loving relationship with family members and parents is associated with increased self-esteem, impacting personal and social wellbeing, enhancing problem-solving abilities, social cohesion,



strengthening ethical commitments, and social stability, which are considered factors in combating the pressures and tensions of adolescence and deterring the occurrence of risky behaviors among adolescents (Álvarez-García et al., 2019; Parsakia, Rostami, Darbani, et al., 2023; Parsakia, Rostami, Saadati, & Navabinejad, 2023).

Furthermore, emotion regulation is a central process for all aspects of human functioning and plays a vital role in how individuals cope with stressful experiences. Emotion regulation helps adolescents increase their emotional understanding and adjust their emotional experience and expression of emotions. Emotion regulation, as a set of processes through which individuals seek to monitor, evaluate, and redirect the automatic flow of emotions in accordance with their needs and goals, is essential for initiating, increasing, maintaining, or decreasing positive and negative emotions in response to environmental events, as it influences physiological, behavioral, and experiential processes (Debeuf et al., 2020). Difficulty in emotion regulation, such as lack of understanding and awareness of emotions, difficulty in accepting negative emotional experiences, inability to control impulses, difficulty in achieving desired goals, and inability to use appropriate emotion regulation strategies when faced with negative emotions, can be associated with many psychological and behavioral harms (Ashori & Najafi, 2020; Izadpanah et al., 2016). A warm and affectionate parent-child relationship can ensure adolescents' success in managing their emotions, especially in critical situations, by increasing and expanding internal psychological resources and capabilities, including emotion regulation skills. Therefore, cognitive emotion regulation strategies, as actions indicative of ways people cope with stressful situations and adverse events, are important factors in determining health and successful performance in social interactions, and the quality of the parent-child relationship can help reduce the inclination of the child towards risky behaviors by helping them better manage emotions in crisis situations (Mikulincer & Shaver, 2019). Emotion regulation is an inherent aspect of emotional response tendencies and involves changing or modulating an emotional state, a specific form of self-regulation in external and internal processes involved in emotional reactions. When parents are in a healthy and loving relationship with their children, in a warm and intimate interaction, the child is in touch with their emotions without any anxiety and avoidance and can easily express themselves and their emotions and receive positive responses from their parents. Such a two-way parent-child relationship can acquaint the

child with their emotions and enable them to show the best response in stressful situations by increasing their awareness of emotions and how to deal with them.

Research results indicate that individuals' capacity for effective emotion regulation impacts psychological, physical, and interpersonal well-being; for example, signs of emotion regulation failure occur in over half of axis one disorders and in all personality disorders (Mosadegh et al., 2023; Parsakia, Rostami, & Saadati, 2023). Additionally, examining psychological texts and studies shows that emotion regulation is an important factor in determining health and successful performance in social interactions (Abutalebi et al., 2018). Emotion plays a significant role in affective disorders. Psychoticism involves emotional changes. Neuroticism is related to anxiety. Antisocial personality is rooted in the apparent lack of emotion. Common mental disorders and various types of abnormal behaviors are rooted in emotional problems, and even intellectual disabilities are often considered as emotional developmental delays. Based on previous studies, it has been hypothesized that individuals with emotion regulation skills demonstrate greater success in various areas of their personal lives (Cludius et al., 2020; Vuillier et al., 2021).

5. Limitations & Suggestions

In this research, the researcher faced certain limitations. The study was correlational, which limits causal conclusions. Various factors such as age, gender, parents' educational level, economic status, etc., that could potentially act as intervening variables affecting the results, were not examined and controlled. Another limitation of the present study was the small number of subjects, hence caution should be exercised in generalizing the results. It is recommended that future research be conducted with larger samples and with different groups of individuals, taking into account variables such as age, gender, parents' educational level, and economic status. Different dimensions of risky behaviors in different individuals and groups and identifying factors involved in them should be investigated. Programs and interventions based on identified factors in risky behaviors in adolescents should be implemented.

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Declaration of Interest

The authors of this article declared no conflict of interest.

Ethics Considerations

The study protocol adhered to the principles outlined in the Helsinki Declaration, which provides guidelines for ethical research involving human participants.

Transparency of Data

In accordance with the principles of transparency and open research, we declare that all data and materials used in this study are available upon request.

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None.

Authors' Contributions

Ali Jamali contributed to the research design, data collection, and the assessment of the quality of the parent-child relationship and risky behaviors in adolescents. Amin Rafiepoor provided expertise in research methodology, data analysis, and the investigation of the mediating role of emotion regulation in the relationship between parent-child relationship quality and risky behaviors.

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