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Parenting in the Shadow of Conflict: Trauma, Mental Health, and Resilience Pathways Among Adolescents in Syria

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ABSTRACT

Parenting is a cornerstone of adolescent mental health, yet little is known about its dynamics in post-conflict settings where trauma and resource depletion reshape family systems. Drawing on Bronfenbrenner's bioecological theory, the intergenerational trauma framework, and Hobfoll's Conservation of Resources theory, this study investigates how parenting practices mediate adolescent outcomes in Damascus, Syria. A total of 182 parents of adolescents (ages 13–18) identified by schools as exhibiting behavioral concerns completed validated measures of parenting (democratic/authoritative discipline, autonomy support, emotional warmth, punitive discipline, anxious intrusiveness, permissiveness) and adolescent emotional/behavioral difficulties. Results revealed that parenting practices were stronger predictors of adolescent mental health than sociodemographic factors such as paternal education and socioeconomic status. Punitive and anxious-intrusive parenting correlated strongly with adolescent anxiety, depression, and oppositional behavior, while democratic and autonomy-supportive parenting showed protective effects. Emotional warmth offered moderate buffering. These findings advance a trauma-informed ecological framework positioning parenting as the key mediator between conflict-related adversity and adolescent mental health. We argue that trauma-informed parenting support must be central to humanitarian recovery agendas, aligning with WHO's mhGAP, UNICEF's Parenting in Emergencies, and the Sustainable Development Goals on health, education, and peace.

Keywords: Parenting Practices, Adolescent Mental Health, Post-Conflict Syria, Intergenerational Trauma; Humanitarian Intervention

INTRODUCTION

Adolescence represents a pivotal developmental stage in which mental health vulnerabilities often emerge. Globally, the World Health Organization (2021) estimates that one in seven adolescents experience a mental health disorder, with depression, anxiety, and behavioral problems ranked among the leading causes of disability-adjusted life years in this age group. Parenting is consistently identified as one of the most proximal and modifiable influences on adolescent outcomes (Steinberg & Silk, 2002). Warm, autonomy-supportive, and structured parenting is linked with resilience and adaptive coping, whereas punitive, inconsistent, or intrusive practices are associated with elevated risks of internalizing and externalizing disorders (Baumrind, 1991; Maccoby & Martin, 1983).

In post-conflict societies, the significance of parenting is magnified. War and displacement disrupt social ecologies, erode institutional supports, and inflict widespread psychological trauma (Betancourt et al., 2010).

Parents in such settings are often exposed to chronic stress, poverty, and post-traumatic symptoms, which in turn shape their caregiving capacities. Research on intergenerational trauma demonstrates that unresolved parental trauma can manifest in maladaptive parenting behaviors, such as anxious intrusiveness, hypervigilant monitoring, or punitive discipline, that unintentionally transmit distress across generations (Danieli, 1998; Yehuda & Lehrner, 2018). Adolescents exposed to such parenting in conflict zones face elevated risks of depression, anxiety, post-traumatic stress disorder, and conduct problems (Panter-Brick et al., 2018).

Despite growing recognition of the mental health consequences of war on children, critical knowledge gaps remain. Existing scholarship has largely documented prevalence rates of adolescent psychopathology in conflict zones (Khamis, 2019; Thabet & Vostanis, 2016) but less often examined the mechanisms within the family that link macro-level conflict to adolescent outcomes. In particular, the role of parenting practices as mediating pathways between parental trauma, resource loss, and adolescent mental health has been underexplored in Arab contexts. This omission limits both theory and practice: without a trauma-informed understanding of parenting in post-conflict societies, interventions risk importing Western frameworks that may fail to resonate culturally or address the realities of resource scarcity.

Syria represents a critical site for addressing this gap. More than a decade of conflict has left families navigating displacement, economic collapse, and pervasive psychosocial distress (United Nations High Commissioner for Refugees [UNHCR], 2023). Adolescents in Syria are reported to face exceptionally high rates of emotional and behavioral difficulties (Save the Children, 2020), yet empirical evidence on how parenting contributes to these risks, and how it might serve as a protective factor, remains scarce. Moreover, paternal education and socioeconomic factors, often predictors of positive parenting in stable contexts, may lose predictive power when overshadowed by chronic trauma and systemic resource loss (Hobfoll, 1989).

This study addresses these gaps by examining parenting practices among high-risk families in Damascus, Syria, with an explicit focus on adolescent mental health outcomes. Drawing on Bronfenbrenner's bioecological model (Bronfenbrenner & Morris, 2006), Hobfoll's Conservation of Resources theory (1989), and the intergenerational trauma framework (Danieli, 1998), the study interprets parenting not merely as a cultural phenomenon but as a trauma-mediated process. By situating findings within global humanitarian agendas, including the Sustainable Development Goals on health, education, and peace (United Nations, 2015), this research aims to advance both scientific knowledge and policy-relevant insights for rebuilding family resilience in post-conflict ecosystems.

Research Objectives

The overarching aim of this study is to investigate how parenting practices, shaped by trauma and resource loss, influence adolescent mental health outcomes in post-conflict Syria. Specifically, the study seeks to:

1. Map the landscape of parenting practices among high-risk families in Damascus, with attention to how these practices reflect trauma-related adaptations.
2. Examine associations between specific parenting practices (authoritative/democratic discipline, autonomy support, emotional warmth, punitive discipline, anxious intrusiveness, permissiveness) and adolescent emotional and behavioral difficulties.
3. Assess the role of sociodemographic stressors, particularly paternal education and economic strain, in shaping parenting practices and adolescent outcomes in contexts of resource depletion.
4. Interpret parenting patterns through integrated theoretical lenses, Bronfenbrenner's bioecology, intergenerational trauma, family systems, and Conservation of Resources theory, to inform trauma-informed, culturally grounded interventions.

Research Questions

Prevalence & Trauma Lens: What parenting practices are most prevalent among parents of high-risk adolescents in Damascus, and how do these reflect trauma-related adaptations to conflict?
Associations: How are parenting practices (supportive vs. intrusive/punitive) associated with adolescent emotional difficulties (e.g., anxiety, depression) and behavioral challenges in a post-conflict ecosystem?
Sociodemographic Stressors: To what extent do paternal education and economic strain influence parenting practices and adolescent outcomes, and how does resource loss modify these relationships?
Theoretical & Intervention Implications: How can these findings be interpreted within trauma-informed and ecological frameworks to guide interventions that strengthen family resilience and adolescent mental health in Arab post-conflict contexts?

LITERATURE REVIEW

This review is organized to first establish what is known about parenting and adolescent mental health, then to situate these dynamics within trauma-informed theoretical frameworks, and finally to integrate emerging dimensions, such as digital parenting, toxic stress, and global policy debates, that are essential for understanding post-conflict family life.

Parenting, Adolescence, and Mental Health

Parenting is a cornerstone of adolescent development, shaping trajectories of resilience, well-being, and risk. Foundational models of parenting styles (Baumrind, 1991; Maccoby & Martin, 1983) emphasize the balance between warmth and control, with authoritative or democratic parenting consistently linked to positive psychosocial outcomes and resilience (Steinberg & Silk, 2002). Conversely, punitive, inconsistent, or neglectful practices are associated with elevated risks of depression, anxiety, and externalizing disorders (Pinquart, 2017).

While these associations hold globally, contextual variation is critical. In Arab societies, parenting is deeply influenced by cultural norms emphasizing respect, obedience, and family cohesion (Dwairy & Achoui, 2010). Yet empirical studies in Lebanon, Palestine, and Jordan demonstrate that harsh discipline, even when culturally normalized, predicts outcomes similar to Western contexts, including increased emotional and behavioral difficulties (Khamis, 2019; Thabet & Vostanis, 2016). This suggests that culture does not immunize adolescents against the harms of coercive or intrusive parenting.

In Syria, where families face protracted conflict, economic collapse, and widespread trauma, the risks are amplified. Save the Children (2020) reports alarmingly high rates of adolescent anxiety, depression, and behavioral difficulties. Early studies suggest that parenting under these conditions often reflects trauma-driven adaptations: anxious-intrusive parenting may emerge from parental hypervigilance, while punitive discipline may reflect chronic irritability and emotional depletion (Panter-Brick et al., 2018; Betancourt et al., 2010). Yet little empirical work has directly examined how these practices influence adolescent outcomes in the Syrian context.

Theoretical Framework: Parenting in Post-Conflict Ecosystems

To interpret these dynamics, multiple complementary theories are relevant. Bronfenbrenner's Bioecological Model (Bronfenbrenner & Morris, 2006) situates parenting within nested systems. Conflict reshapes every level: the macrosystem (collective trauma), exosystem (economic collapse, weakened institutions), mesosystem (broken school–family ties), microsystem (parent–child interaction), and chronosystem (timing of conflict during adolescence).

The Intergenerational Trauma Framework (Danieli, 1998; Yehuda & Lehrner, 2018) explains how unresolved parental trauma is transmitted through caregiving behaviors. Anxious intrusiveness can be seen as hypervigilance born of lived danger, while punitive discipline may reflect post-traumatic irritability and dysregulation. These patterns extend trauma across generations, perpetuating cycles of distress.

Family Systems Theory (Minuchin, 1974; Bowen, 1978) underscores how war destabilizes family boundaries and roles, producing enmeshment (overcontrol) or disengagement (withdrawal). Attachment theory, extended through a trauma lens (Bowlby, 1969; Main & Hesse, 1990), highlights how parents' unresolved trauma disrupts secure caregiving, fostering disorganized or fearful attachment patterns in children.

Conservation of Resources (COR) Theory (Hobfoll, 1989) adds explanatory depth. Conflict strips families of material, social, and psychological resources, leaving parents depleted of the reserves needed for adaptive parenting. This explains why paternal education, typically protective, may lose predictive power under conditions of extreme resource loss.

Finally, the Social-Ecological Model of Resilience (Ungar, 2011) reframes resilience as access to and navigation of resources across levels. Adolescents' well-being depends not only on parenting but on the availability of safe schools, supportive communities, and policies that reduce trauma stigma.

Together, these perspectives converge in a Trauma-Informed Parenting Model: conflict and resource loss generate parental trauma, which shapes maladaptive parenting (anxious-intrusive, punitive), thereby producing adolescent mental health risks. At the same time, protective practices (democratic discipline, emotional warmth, autonomy support) can buffer these effects, enabling resilience even in post-conflict settings.

Digital Parenting, Toxic Stress, and Global Policy Frameworks

Beyond classical parenting frameworks, three additional strands of contemporary research, digital parenting, toxic stress, and global policy guidance, offer critical insights into how families in Syria navigate the layered challenges of post-conflict life.

Digital Parenting as a Practice Dimension

Parenting in the digital era entails navigating both risks and opportunities. Adolescents in conflict-affected settings are particularly vulnerable to online threats such as cyberbullying, exposure to extremist content, and misinformation (Livingstone et al., 2017; UNICEF, 2021). Yet digital platforms may also provide compensatory resources, access to education, peer connections, and psychosocial support, when offline structures are disrupted (Banati & Jones, 2020).

Effective digital parenting, defined as parental guidance, monitoring, and open communication regarding online activity, has the potential to reduce risks while enhancing opportunities. In Syria and neighboring Arab contexts, this dimension remains underexplored, but its importance is growing as humanitarian actors increasingly integrate digital platforms into educational delivery and mental health interventions. We therefore position digital parenting not as a central variable in the present study, but as an emerging terrain for future research, particularly relevant in fragile ecosystems where digital life partially substitutes for fractured offline systems.

Adverse Childhood Experiences and Toxic Stress

The global evidence base on Adverse Childhood Experiences (ACEs) demonstrates that exposure to violence, neglect, and instability contributes to toxic stress, which disrupts neurodevelopment and increases vulnerability to long-term mental health problems (Felitti et al., 1998; Shonkoff, 2012). In conflict zones, adolescents face not only ACEs but also chronic collective trauma, amplifying these stress effects.

Parenting plays a critical mediating role: punitive or intrusive practices intensify adolescents' stress reactivity, whereas supportive and autonomy-enhancing parenting can buffer against its impact (Luby et al., 2020). Situating Syrian adolescents' struggles within this global framework highlights the urgency of trauma-informed parenting interventions as essential for reducing the mental health burden in post-conflict contexts.

Global Best Practices and Policy Frameworks

International agencies increasingly recognize parenting as a cornerstone of child protection and post-conflict recovery. The World Health Organization's mhGAP Humanitarian Intervention Guide (WHO, 2018) prioritizes caregiver support to prevent the intergenerational transmission of trauma. UNICEF's Parenting in Emergencies framework (2019) advocates community-based programs that combine psychosocial first aid with practical parenting skills. UNHCR underscores family strengthening as integral to achieving the Sustainable Development Goals on health (SDG 3) and peace (SDG 16).

Evidence-based programs such as Parenting for Lifelong Health and Problem Management Plus (PM+), adapted for low-resource, conflict-affected settings, demonstrate that scalable, trauma-informed, and culturally contextualized interventions can effectively reduce harsh discipline and improve adolescent well-being (Cluver et al., 2018; Rahman et al., 2016).

These frameworks collectively reframe families not as passive victims of war but as active agents of recovery. Embedding trauma-informed parenting support within Syrian community, school, and humanitarian systems therefore aligns local realities with global best practices.

Taken together, this literature underscores parenting as the central pathway through which conflict-related trauma and resource loss shape adolescent mental health. Yet empirical research in Syria remains scarce, particularly studies that integrate perspectives on trauma, digital practices, and resilience. By situating Syrian parenting within global debates on ACEs, toxic stress, and humanitarian best practices, the present study advances a trauma-informed ecological model that bridges local evidence with international policy priorities.

METHODOLOGY

This section outlines the methodological design of the study, including the setting, participants, measures, procedures, and analytic strategies. Particular care was taken to align methods with the study's theoretical foundations, Bronfenbrenner's ecological model, intergenerational trauma framework, and Conservation of Resources theory, and with the ethical requirements of working in fragile, post-conflict contexts.

Setting

The study was conducted in Damascus, Syria, a city that has endured more than a decade of protracted conflict, economic instability, and social disruption. Families in this context face compounded challenges: displacement, unemployment, and chronic exposure to trauma. The choice of Damascus reflects both practical feasibility and conceptual importance: as one of the most densely populated post-conflict urban centers in the Arab world, it offers critical insights into parenting in fragile, resource-constrained ecosystems.

Participants

Participants were 182 parents of adolescents aged 12–18 years who were identified as being at elevated risk for emotional or behavioral difficulties. Recruitment was purposive, facilitated through community organizations, mental health centers, and schools that provide support for at-risk youth. Inclusion criteria required that participants (a) were primary caregivers of an adolescent, (b) resided in Damascus during the period of data collection, and (c) consented voluntarily.

The decision to focus on families already experiencing adolescent behavioral concerns was intentional: these families represent the highest-risk group for intergenerational trauma transmission and are most in need of evidence-based, trauma-informed interventions. While this approach limits generalizability, it deepens relevance to humanitarian programming and policy.

Demographically, the sample included 65% mothers and 35% fathers, with an average parental age of 42.7 years (SD = 6.3). Approximately 54% of participants reported secondary education or lower, and 46% had some post-secondary or university training. Nearly 70% of families reported income below the national poverty line, consistent with economic collapse in the region.

Measures

Parenting Practices

Parenting styles were measured using an adapted version of the Parenting Styles and Dimensions Questionnaire (PSDQ; Robinson et al., 2001). Subscales included:

1. Authoritative/democratic discipline (warmth, autonomy support, inductive reasoning)
2. Authoritarian/punitive practices (harsh discipline, verbal hostility)
3. Permissiveness
4. Anxious-intrusive parenting (items reflecting hypervigilant monitoring and overcontrol, adapted for conflict settings)

The instrument was translated into Arabic and back-translated for linguistic and cultural equivalence. Reliability coefficients for subscales ranged from .72 to .84 in the current sample.

Adolescent Emotional and Behavioral Outcomes

Adolescent outcomes were assessed via the Strengths and Difficulties Questionnaire (SDQ; Goodman, 1997), parent-report version. Key domains included emotional difficulties (e.g., anxiety, depression), conduct problems, hyperactivity, peer relationship difficulties, and prosocial behavior. Given the mental health focus, emotional and conduct subscales were emphasized as indicators of adolescent psychological distress. Cronbach's alpha coefficients for the SDQ subscales ranged from .71 to .79 in this study.

Sociodemographic and Stress Variables

Data were collected on parental age, education, employment, family size, and household income. Economic strain was measured using a four-item scale capturing ability to meet basic needs, employment disruption, and debt burden ($\alpha = .81$).

Procedure

Data were collected between March and July 2023. Surveys were administered in Arabic via paper questionnaires during scheduled sessions at schools, community centers, and health organizations. Trained field researchers explained study aims, obtained informed consent, and provided assistance when needed. Participation was voluntary, and confidentiality was assured. Families identified as in distress were offered referral information for available psychosocial services.

Data Analysis

Analyses were conducted using SPSS v.28. Descriptive statistics were computed to identify the prevalence of parenting practices and adolescent difficulties. Pearson correlations tested bivariate associations between parenting dimensions and adolescent outcomes. Multiple regression analyses examined the predictive power of parenting practices on adolescent emotional and behavioral outcomes, controlling for parental education and economic stress. Interaction terms were explored to test whether sociodemographic factors moderated these relationships.

Interpretation was grounded in trauma-informed ecological theory, focusing on associations rather than causality, given the cross-sectional and single-informant design.

Ethical Considerations

The study adhered to the ethical principles of the Declaration of Helsinki and received approval from the Institutional Review Board of [University Name, anonymized for review]. Informed consent was obtained from all participating parents after the study aims and procedures were explained in accessible language. Given the vulnerability of post-conflict populations, confidentiality and anonymity were strictly maintained, and all data were de-identified prior to analysis. Trained field staff were prepared to respond sensitively to participant distress, and families reporting acute difficulties were provided with referrals to psychosocial services available through NGOs and community health organizations. These safeguards ensured that the research was conducted with respect, cultural sensitivity, and a commitment to minimizing harm while maximizing social value.

Methodological Limitations

In line with best practices for research transparency, it is essential to acknowledge the methodological constraints of this study, which provide important context for interpreting its findings.

First, the exclusive reliance on parent-report measures introduces the risk of single-informant bias and social desirability effects. Parents may underreport harsh or punitive practices or overestimate positive ones. Future studies should incorporate multi-informant approaches (e.g., adolescent self-reports, teacher ratings, clinician assessments) to provide a more comprehensive picture.

Second, the cross-sectional design restricts conclusions to associations rather than causality. Longitudinal designs are needed to establish the temporal sequence between parental trauma, parenting practices, and adolescent mental health outcomes.

Third, the purposive sampling strategy, focusing on families of adolescents already identified as at high risk, enhances applied relevance but limits generalizability to the broader Syrian population. These findings should therefore be interpreted as representative of vulnerable families most exposed to intergenerational trauma, which also makes them particularly valuable for humanitarian programming and targeted intervention design.

Finally, while standardized tools such as the Parenting Styles and Dimensions Questionnaire (PSDQ) and the Strengths and Difficulties Questionnaire (SDQ) were culturally adapted and showed acceptable reliability in this sample, further psychometric validation in Syrian and Arab post-conflict contexts remains warranted. Addressing these methodological challenges represents a key agenda for strengthening the evidence base on parenting and adolescent mental health in fragile settings.

FINDINGS

This section presents the study's findings in four stages: descriptive statistics of parenting practices and adolescent outcomes, correlations between variables, regression analyses controlling for sociodemographic stressors, and exploratory moderation effects. Each set of results is accompanied by preliminary interpretive notes that situate the findings within trauma-informed and ecological frameworks.

Sample Characteristics

Table 1 summarizes the demographic profile of the participating parents. Mothers comprised the majority of respondents, with a mean parental age of 42.7 years (SD = 6.3). The sample reflected substantial economic vulnerability, with nearly 70% reporting household income below the poverty line. Educational attainment was mixed: 54% reported secondary education or less, while 46% reported some post-secondary or university training. Adolescents ranged from 12 to 18 years of age (M = 14.9, SD = 1.6), with a slight majority of boys (52%).

Table 1. Demographic Characteristics of Participants (N = 182)

Variable	n	%
Parent Gender		
– Mothers	118	65%
– Fathers	64	35%
Parental Age (Mean, SD)	42.7 (6.3)	,
Parent Education		
– Secondary or less	98	54%
– Post-secondary/University	84	46%
Employment Status		
– Employed	77	42%
– Unemployed/Informal	105	58%
Household Income (Below Poverty Line)	127	70%

Adolescent Gender		
– Boys	95	52%
– Girls	87	48%
Adolescent Age (Mean, SD)	14.9 (1.6)	,

These demographic patterns highlight the dual pressures of economic precarity and parental stress, aligning with the Conservation of Resources framework (Hobfoll, 1989). They also situate the study as an examination of high-risk families, a group most vulnerable to intergenerational trauma transmission.

Descriptive Statistics: Parenting Practices and Adolescent Outcomes

Table 2 presents the descriptive statistics for parenting practices. Across the sample, anxious-intrusive parenting showed the highest mean score, followed by authoritarian/punitive practices. Authoritative/democratic parenting and emotional warmth were present but less prevalent, while permissiveness was least reported.

Table 2. Mean Scores of Parenting Practices (N = 182)

Parenting Practice	Mean (M)	Standard Deviation (SD)	Range
Authoritative/Democratic	3.12	0.64	1–5
Emotional Warmth	2.98	0.71	1–5
Authoritarian/Punitive	3.45	0.82	1–5
Anxious-Intrusive	3.78	0.69	1–5
Permissiveness	2.34	0.58	1–5

Adolescent outcomes (Table 3) revealed high levels of emotional difficulties (M = 3.52, SD = 0.73) and conduct problems (M = 3.34, SD = 0.69). Prosocial behaviors were moderately reported, but hyperactivity/attention difficulties also scored above normative benchmarks.

Table 3. Mean Scores of Adolescent Outcomes (SDQ, N = 182)

Adolescent Outcome	Mean (M)	Standard Deviation (SD)	Range
Emotional Difficulties	3.52	0.73	1–5
Conduct Problems	3.34	0.69	1–5
Hyperactivity/Inattention	3.10	0.74	1–5
Peer Relationship Difficulties	2.97	0.61	1–5
Prosocial Behaviors	3.25	0.65	1–5

These descriptive patterns indicate that Syrian adolescents in this high-risk sample are experiencing elevated psychosocial challenges, consistent with evidence on post-conflict toxic stress and intergenerational trauma (Felitti et al., 1998; Panter-Brick et al., 2018). The prominence of anxious-intrusive and punitive parenting aligns with theoretical expectations that trauma-exposed parents may rely on hypervigilant control and harsh discipline as coping mechanisms (Danieli, 1998; Hobfoll, 1989).

Correlations between Parenting Practices and Adolescent Outcomes

Table 4 presents Pearson correlation coefficients between parenting practices and adolescent outcomes. Results reveal strong and theoretically consistent patterns:

- Authoritative/democratic parenting was negatively correlated with adolescent emotional difficulties ($r = –.29$, $p < .01$) and conduct problems ($r = –.25$, $p < .01$), while positively correlated with prosocial behaviors ($r = .34$, $p < .001$).
- Authoritarian/punitive parenting was positively correlated with emotional difficulties ($r = .32$, $p < .001$), conduct problems ($r = .38$, $p < .001$), and peer difficulties ($r = .27$, $p < .01$).
- Anxious-intrusive parenting was significantly associated with emotional difficulties ($r = .36$, $p < .001$) and hyperactivity ($r = .22$, $p < .01$).
- Permissiveness was weakly but positively correlated with hyperactivity/inattention ($r = .19$, $p < .05$).
- Emotional warmth showed inverse associations with emotional and conduct problems, though weaker than the authoritative dimension.

Table 4. Correlations between Parenting Practices and Adolescent Outcomes (N = 182)

Parenting Practice	Emotional Difficulties	Conduct Problems	Hyperactivity	Peer Difficulties	Prosocial Behavior
Authoritative/Democratic	–.29**	–.25**	–.11	–.09	.34***
Emotional Warmth	–.21*	–.18*	–.08	–.12	.26**
Authoritarian/Punitive	.32***	.38***	.17*	.27**	–.19*
Anxious-Intrusive	.36***	.14	.22**	.11	–.09
Permissiveness	.08	.12	.19*	.07	–.04

*p < .05, **p < .01, ***p < .001

These associations reinforce theoretical expectations:

Trauma-Informed Lens: The positive link between anxious-intrusive parenting and adolescent emotional difficulties reflects how parental hypervigilance, common in trauma-exposed caregivers, translates into adolescent anxiety and internalizing symptoms (Danieli, 1998; Main & Hesse, 1990).

Resource Loss (COR Theory): Authoritarian/punitive practices' strong correlation with conduct problems suggests that depleted psychological and social resources lead parents toward harsh discipline, which in turn escalates externalizing behaviors (Hobfoll, 1989).

Resilience Pathways: The protective correlations of authoritative/democratic parenting with reduced difficulties and higher prosociality align with cross-cultural resilience frameworks (Ungar, 2011), showing that even under extreme stress, supportive practices buffer adolescents from toxic stress.

Regression Analyses: Parenting Practices Predicting Adolescent Outcomes

To examine the predictive role of parenting practices beyond sociodemographic influences, hierarchical regression analyses were conducted. In Step 1, parental education, employment status, and household income were entered as controls. In Step 2, parenting practices were added.

Table 5. Hierarchical Regression Analyses Predicting Adolescent Outcomes (N = 182)

Predictor Variables	Emotional Difficulties (β)	Conduct Problems (β)	Prosocial Behaviors (β)
Step 1: Controls			
Parental Education	–.07	–.05	.09
Household Income	–.11	–.13	.08
Parental Employment Status	–.06	–.09	.05
Step 2: Parenting Practices			
Authoritative/Democratic	–.21**	–.18*	.27***
Emotional Warmth	–.14*	–.12	.16*
Authoritarian/Punitive	.24***	.31***	–.15*
Anxious-Intrusive	.28***	.10	–.07
Permissiveness	.05	.08	–.04
R^2 (Step 1)	.06	.07	.04
ΔR^2 (Step 2)	.29***	.33***	.26***
Final R^2	.35***	.40***	.30***

*p < .05, **p < .01, ***p < .001

Key Findings

Parenting practices were far stronger predictors than sociodemographic factors. Education, income, and employment status together explained less than 7% of variance in outcomes. Once parenting practices were added, variance explained rose substantially (35–40%).

- Anxious-intrusive parenting was the strongest predictor of emotional difficulties, even after controls (β = .28, p < .001).
- Authoritarian/punitive parenting most strongly predicted conduct problems (β = .31, p < .001).
- Authoritative/democratic parenting predicted higher prosocial behaviors (β = .27, p < .001) and fewer emotional/conduct problems.

These results emphasize that in a post-conflict context, sociodemographic resources such as education and employment lose much of their predictive power when compared to parenting behaviors shaped by trauma and stress. This aligns with Conservation of Resources Theory (Hobfoll, 1989), which argues that when resource loss is extreme, psychosocial processes (e.g., caregiving quality) become the most critical determinants of well-being.

Moreover, the finding that anxious-intrusive parenting predicts emotional difficulties resonates with intergenerational trauma theory (Danieli, 1998), suggesting that parental hypervigilance is a trauma-mediated mechanism driving adolescent internalizing problems. Conversely, the protective role of democratic parenting confirms the cross-cultural value of autonomy-supportive practices as buffers of toxic stress (Ungar, 2011).

Exploratory Moderation Analyses

To probe whether contextual stress alters the parenting–outcome link, we tested moderation by economic strain and paternal education. All continuous predictors were mean-centered; interaction terms were created by multiplying centered parenting scores with the moderator. Models controlled for parental education, employment, and household income (where not used as moderator), as in §4.4.

Table 6. Interaction Terms Predicting Adolescent Outcomes (N = 182)

Interaction Term (Step 3)	Emotional Difficulties (β)	Conduct Problems (β)	Prosocial Behaviors (β)
Punitive × Economic Strain	.11*	.12 *	−.06
Anxious-Intrusive × Economic Strain	.13 *	.07	−.04
Democratic × Economic Strain	−.09	−.08	.10
Punitive × Paternal Education (0/1)	.05	.06	−.03
Anxious-Intrusive × Paternal Education (0/1)	.04	.03	−.02
Democratic × Paternal Education (0/1)	−.06	−.05	.07

$p < .05$. Entries shown from final step including controls and main effects; ΔR^2 for interaction block = .02–.03 across models.

Summary and preliminary interpretation

Economic Strain Amplified Risk: The link between punitive parenting and conduct problems was stronger under higher economic strain (β_int = .12, $p < .05$). Simple slopes indicated a modest association at −1 SD strain (b = .18, p = .07) that became significant and larger at +1 SD strain (b = .33, $p < .001$).

Trauma/Internalizing Pathway: Anxious-intrusive parenting predicted emotional difficulties more strongly when economic strain was high (β_int = .13, $p < .05$). This pattern is consistent with intergenerational trauma (hypervigilance) operating most forcefully when families are resource-depleted.

Buffering not Contingent on Resources: Interactions with democratic (authoritative-like) parenting were nonsignificant, suggesting its protective association with prosociality and lower symptomatology held across strain levels, an encouraging signal for scalable interventions.

Education did not Moderate: No interaction with paternal education reached significance, reinforcing §4.4: under severe resource loss (COR theory), the *quality of parenting behaviors* outweighs educational advantage.

***(Optional visual) Figure* 1 (to be added):** Interaction plots for Punitive × Economic Strain → Conduct Problems, and Anxious-Intrusive × Economic Strain → Emotional Difficulties, with simple slopes at ±1 SD.

Summary of Findings

Taken together, the results paint a consistent picture. Anxious-intrusive and punitive parenting practices were prevalent and strongly associated with adolescent emotional and behavioral difficulties, particularly under conditions of economic strain. By contrast, authoritative/democratic parenting predicted resilience, reflected in lower problem scores and higher prosocial behaviors, and its benefits were evident across socioeconomic groups. Importantly, sociodemographic variables such as paternal education and employment contributed little explanatory power once parenting was considered, underscoring the centrality of caregiving practices in shaping adolescent outcomes in post-conflict Syria.

These findings establish a clear empirical basis for the subsequent discussion, where results are interpreted through trauma-informed, ecological, and intergenerational frameworks, and situated within global debates on family recovery and adolescent mental health in conflict settings.

DISCUSSION

Before turning to specific contributions and directions, it is important to situate the study's closing message. Parenting in post-conflict Syria is not only a matter of individual family choices but a reflection of wider ecological forces, trauma, resource loss, and fragile recovery. The evidence presented here underscores that any durable social reconstruction must begin in the intimate space of families, where resilience is either fostered or fractured.

Parenting as Trauma Translated into Practice

The findings of this study reveal a clear, if sobering, pattern: anxious-intrusive and punitive parenting practices are both prevalent in Syrian families and strongly linked to adolescent mental health difficulties. These results cannot be understood in isolation from the broader ecology of post-conflict life. In a society marked by economic collapse, pervasive insecurity, and collective trauma, parenting itself becomes a site where trauma is transmitted and enacted. What we are observing in the data is not simply "strictness" or "overprotection," but trauma translated into practice, hypervigilance becoming anxious intrusiveness, irritability and depletion becoming punitive coercion.

At the same time, the protective role of democratic and supportive parenting is striking. Even in households where material resources were scarce and education levels low, these practices correlated with resilience, prosocial behavior, and fewer emotional and behavioral difficulties. This suggests that the capacity for nurturing, structured, autonomy-supportive parenting can operate as a buffer even under the most adverse conditions. Such findings reinforce the view of resilience as a relational and social process, rather than a fixed individual trait.

Reinterpreting Findings through Trauma and Resource Loss

Theoretically, these patterns extend and deepen several established frameworks. Bronfenbrenner's bioecological model is visible here in stark relief: macro-level conflict and exosystemic shocks (such as economic strain and institutional collapse) shape family microsystems, altering the dynamics of everyday caregiving. Hobfoll's Conservation of Resources theory offers further explanatory power: when resources are stripped away, income, stability, safety, parents are left depleted, and caregiving behaviors shift toward coercion and control.

The moderating role of economic strain confirms this logic. Under high levels of strain, punitive parenting more strongly predicted conduct problems, while anxious-intrusive parenting was more powerfully linked to adolescent emotional distress. This suggests that stress does not simply operate as a background condition, but actively magnifies the risks inherent in maladaptive parenting. In contrast, paternal education, while often associated with more democratic styles, failed to moderate or significantly predict outcomes here. Education, in other words, cannot compensate for the grinding effects of prolonged scarcity and trauma.

Toward a Trauma-Informed Ecological Framework

Taken together, these findings point toward a framework we might call the Trauma-Informed Ecological Model of Parenting and Adolescent Mental Health. This model locates parenting practices at the center of post-conflict recovery, acting as the critical mediator between structural violence and adolescent well-being. In this model, war and displacement disrupt families at every ecological level:

- At the macrosystem level, cultural norms and social cohesion are fractured.
- At the exosystem level, poverty and unemployment erode stability.
- At the mesosystem level, connections between schools, families, and communities weaken.
- At the microsystem level, parents coping with PTSD, depression, and anxiety transmit distress through intrusive or punitive interactions with their children.

Yet within this ecology, the data show space for resilience. When parents practice warmth, democratic discipline, and open communication, they provide adolescents with what the literature on toxic stress calls "buffering relationships", protective relational experiences that can interrupt the cycle of trauma transmission.

Implications for Practice and Policy

The implications of this model are both urgent and practical. Parenting support in Syria should not be treated as an optional or secondary intervention, but as a central component of humanitarian and mental health programming. Trauma-informed parenting interventions, particularly those integrated with low-intensity caregiver mental health support such as Problem Management Plus, can address both parental distress and parenting practices simultaneously.

School-based safe havens offer a promising delivery platform, bringing together adolescents and caregivers in spaces where they can rebuild routines, learn coping strategies, and receive psychosocial support. Importantly, such programs must be culturally grounded. Concepts such as "authoritative parenting" should be translated into

the moral language of local communities, framed in terms of compassion, balance, and responsibility, rather than imported Western terminology. Religious leaders, teachers, and community elders can act as cultural translators of parenting practices that align with both tradition and resilience.

Digital parenting also deserves greater attention. In a context where offline spaces are limited or unsafe, digital environments become central to adolescents' education, socialization, and even psychosocial recovery. Parents' ability to guide, monitor, and communicate about digital use is therefore not peripheral, but integral to the ecology of post-conflict parenting.

Limitations and Directions for Future Research

Of course, the study's limitations must be recognized. Its cross-sectional design cannot establish causality, and reliance on parent-report introduces single-informant bias. The purposive sample, drawn from families already experiencing adolescent behavioral concerns, limits generalizability. Nevertheless, the strength of the associations observed underscores their practical significance. Future research should move toward longitudinal, multi-informant, and mixed-method designs, incorporating adolescents' own voices alongside those of parents and teachers.

Equally important is the need for intervention research. Culturally adapted parenting programs that integrate trauma support should be piloted, tested for feasibility, and scaled in partnership with local communities. Measuring outcomes should go beyond behavioral checklists to include validated mental health measures, qualitative accounts of family recovery, and indicators of community cohesion.

Families as Agents of Recovery

Parenting in Syria is occurring in the shadow of war, displacement, and loss. Yet even within these conditions, the daily interactions between parents and children remain decisive in shaping adolescent mental health. Coercion compounds harm; warmth and democratic discipline enable recovery. By embedding trauma-informed parenting support into humanitarian aid and national recovery strategies, policymakers and practitioners can acknowledge families not merely as victims of conflict, but as agents of resilience and recovery.

This study, therefore, makes a dual contribution: empirically, it demonstrates the central role of parenting in adolescent mental health in a post-conflict ecosystem; theoretically, it proposes a trauma-informed ecological framework that integrates intergenerational trauma, resource loss, and resilience. As Syria, and other societies recovering from conflict, look toward rebuilding, the evidence is clear: rebuilding families is rebuilding the future.

CONCLUSION

This study examined how parenting practices in post-conflict Syria shape adolescent behavioral and mental health outcomes. Findings are clear: anxious-intrusive and punitive practices, rooted in trauma and scarcity, were strongly associated with heightened emotional difficulties and conduct problems, whereas democratic and supportive parenting fostered prosocial behavior and buffered against toxic stress. In societies destabilized by conflict, parenting is not peripheral; it is central to the ecology of recovery.

War dismantles not only infrastructure and economies but also the intimate patterns of caregiving through which adolescents learn safety, trust, and regulation. Left unaddressed, these altered practices risk perpetuating trauma across generations. Yet even in households marked by poverty and displacement, supportive parenting emerged as a pathway of resilience.

While grounded in post-conflict Syria, these findings resonate with families in other war-affected contexts, from Ukraine to South Sudan, and with broader Arab societies balancing traditional disciplinary norms with modern pressures. This underscores the global relevance of trauma-informed, culturally adaptive parenting interventions that can be embedded within diverse sociocultural ecosystems.

This study makes three key contributions. Empirically, it demonstrates that parenting behaviors predict adolescent outcomes more strongly than sociodemographic resources such as education or employment in fragile settings. Theoretically, it advances a trauma-informed ecological framework that integrates Bronfenbrenner's systems theory, intergenerational trauma, and Hobfoll's conservation of resources. This model provides a more nuanced explanation than previous work by positioning parenting as the key mediator between structural violence and adolescent mental health. Practically, it situates parenting support at the heart of humanitarian response, aligning with global frameworks such as WHO's mhGAP and UNICEF's Parenting in Emergencies.

Naturally, the study has limitations. Its cross-sectional design prevents causal inference, its reliance on parental self-report introduces bias, and its purposive sampling limits generalizability. Future research should adopt longitudinal and multi-informant designs, incorporating adolescents' voices, teacher perspectives, and clinical assessments. Mixed-methods approaches that capture lived experiences alongside quantitative measures will be crucial for deepening contextual understanding.

The most urgent next step is intervention research. Parenting programs in post-conflict Syria must be trauma-informed, culturally grounded, and scalable. Integrating caregiver mental health support with parenting skills, embedding interventions in schools and communities, and, where feasible and culturally appropriate, leveraging digital platforms can foster sustainable change. By testing, adapting, and scaling such interventions, future scholarship can transform evidence into practice.

In closing, this study underscores that rebuilding Syria requires rebuilding its families first. Parenting is where trauma is transmitted, but also where resilience is cultivated. The capacity for warmth, structure, and democratic engagement remains a powerful resource, even in contexts of loss. Investing in trauma-informed parenting is therefore not only a matter of child protection and mental health but also of social reconstruction. Supporting parents is, quite simply, supporting the future.

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Conflict of Interest Statement

The authors declare no conflicts of interest relevant to this study.

Ethical Statement / Informed Consent

This study was conducted in accordance with the ethical guidelines of Mohamed Bin Zayed University for Humanities (MBZUH) and adhered to the principles of the Declaration of Helsinki. All participants were fully informed of the study's aims and procedures and provided written or verbal consent prior to participation. Confidentiality, anonymity, and voluntary participation were strictly ensured to protect the rights and well-being of all individuals involved.

Author Contribution Statement

Dr. Cecile Awad: Conceptualization, Methodology, Data Collection, Writing, Original Draft, Writing, Review & Editing.
Dr. Karima Almazroui: Data Analysis, Interpretation, Writing, Review & Editing, Supervision.

Data Availability Statement

The datasets generated and analyzed during this study are available from the corresponding author on reasonable request. To preserve participant confidentiality, raw data cannot be made publicly available.

AI Statement

No artificial intelligence (AI) tools were used in the design, analysis, or drafting of this manuscript. All research processes, including data collection, analysis, and writing, were conducted by the authors in line with ethical academic standards.

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