

# The relationship between parenting styles and subjective well-being among Chinese sexual minorities: the mediating role of perceived social support and self-concept clarity

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**Abstract:** This study investigated the relationship between parenting styles and subjective well-being among 153 Chinese sexual minorities, with 147 non-sexual minorities as a comparison group. Using variance, correlation, and mediation analyses, results showed that sexual minorities reported less parental emotional warmth and lower levels of subjective well-being, perceived social support, and self-concept clarity. Parental rejection and overprotection were negatively associated with these outcomes. Moreover, perceived social support mediated the effect of parental rejection on well-being, while self-concept clarity mediated the effect of overprotection. These findings highlight the impact of parenting on the mental health of Chinese sexual minorities.

**Keywords:** chinese sexual minorities; parenting styles; subjective well-being; perceived social support; self-concept clarity

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## 1 Introduction

Sexual minorities — individuals whose orientation is not heterosexual — comprise 3 – 5% of global populations (Hatzenbuehler & Pachankis, 2016; Meyer, 1995), yet continue to face stigma and mental health risks including anxiety, depression, and low well-being (Eskin et al., 2005; Fleming et al., 2007; Perales, 2016). In China's family-oriented culture, parenting plays a critical psychological role (Wah-Shan, 2001). Emotional warmth fosters better mental health (WANG, 2005), while overprotection is linked to lower well-being (Wang & Gao, 2024). Parental rejection increases suicide risk in sexual minorities (Zhang & Ye, 2019), though its specific effects in China remain underexplored (Baumrind, 1968).

Perceived social support — belief in support availability (Barrera, 2000) — buffers stress and enhances well-being (Barling et al., 1988; Cohen & Wills, 1985; Diener, 1985; Yan et al., 2019), yet is often lacking due to cultural expectations (Xie, 2014; Zhang & Ye, 2019). Self-concept clarity—the stability of self-perception (Campbell et al., 1996)—also promotes well-being, but is vulnerable to stigma and rejection (Shin et al., 2016; LI, 2016; Ritchie et al., 2011; Warburton et al., 2006). Early parenting is key in shaping self-concept (Hattie, 1992; Roosa & Vaughan, 1984).

This study examines how parenting styles affect the well-being of Chinese sexual minorities, with perceived social support and self-concept clarity as mediators, using non-sexual minorities as a comparison group.

## 2 Method

### 2.1 Participants and Procedure

The study participants included 153 Chinese sexual minorities with a sexual identity, and 147 non-sexual minorities were selected as a control group. In consideration of the unique characteristics and clandestine nature of sexual minorities in China, this study employed a questionnaire survey through online social platforms, with the assistance of mutual aid groups for sexual minorities. A total of 365 questionnaires were distributed, and 300 valid questionnaires were collected, yielding a response rate of 82.2%. The survey subjects were drawn from 25 areas in China, with an average age of  $22.87 \pm 6.54$  years.

## 2.2 Measures

### 2.2.1 Parenting Style

Parenting styles were assessed using the Chinese version of the short Egna Minnen av Barndoms Uppfostran (s-EMBU-C; JIANG et al., 2010), which includes 21 items across three dimensions: emotional warmth, rejection, and overprotection. Responses were rated on a 4-point scale (1 = never, 4 = always). Cronbach's  $\alpha$  values were 0.86, 0.83, and 0.78, respectively.

### 2.2.2 Subjective well-being

Subjective well-being was measured using the Overall Life Satisfaction Scale (Diener, 1985) and the revised Positive and Negative Affect Schedule (Qiu et al., 2008). Life satisfaction was assessed with 5 items ( $\alpha = 0.89$ ), and affect with 18 items reflecting emotions over the past week ( $\alpha = 0.87$ ), both using 5-point Likert scales.

### 2.2.3 Perceived Social Support

This study employs the Multidimensional Scale of Perceived Social Support (MSPSS), which was initially compiled by Zimet and his colleagues (1988) and subsequently revised by Huang and Jiang (1996) with a view to aligning the scale with the actual situation in China. The scale under review consists of 12 items, including three dimensions: family support, friend support, and support from significant others. The scale utilised in this study employs a 5-point rating scale, ranging from 1 (strongly disagree) to 5 (strongly agree). Higher total scores on this scale are indicative of higher perceived social support. The Cronbach's  $\alpha$  for this scale is 0.92.

### 2.2.4 Self-concept clarity

The present study employed the Chinese version of the Self-Concept Clarity Scale (SCCS), which was originally developed by Campbell and his colleagues (1996) and later revised by Niu and his colleagues (2016). The scale under consideration comprises 12 items and is of a single-dimensional nature. A 5-point scoring system was utilised, with 1 representing 'very disagree' and 5 representing 'very agree'. Higher totals indicated greater self-concept clarity. The Cronbach's  $\alpha$  for this scale was 0.84.

## 2.3 Data Analysis

The present study utilised SPSS 25.0 software for the purpose of conducting a comprehensive statistical analysis. This involved the implementation of various analytical procedures, including descriptive statistics, analysis of variance, Pearson correlation analysis, and the process 3.3 plug-in to assess the mediating effects. These analyses were employed to systematically explore the disparities and interrelationships among the groups under investigation.

## 3 Results

### 3.1 Variance analysis between sexual minorities and non-sexual minorities

Table1 Descriptive statistics and variance analysis of the two groups in terms of parenting style, subjective well-being, perceived social support, and self-concept clarity ( $M \pm SD$ )

	Parental Rejection	Parental Emotional Warmth	Parental Overprotection	Subjective Well-Being	Perceived Social Support	Self-Concept Clarity
Sexual Minorities	11.52 $\pm$ 4.33	16.91 $\pm$ 5.16	18.48 $\pm$ 4.64	5.90 $\pm$ 1.22	36.90 $\pm$ 8.51	33.50 $\pm$ 6.92
Non-Sexual Minorities	11.74 $\pm$ 3.96	18.46 $\pm$ 4.68	18.30 $\pm$ 3.84	6.37 $\pm$ 0.93	40.00 $\pm$ 6.60	34.91 $\pm$ 4.96
Total	11.63 $\pm$ 4.15	17.67 $\pm$ 4.98	18.39 $\pm$ 4.26	6.13 $\pm$ 1.11	38.41 $\pm$ 7.78	34.19 $\pm$ 6.07
F	0.196	7.48**	0.131	14.60***	12.47***	4.126*

Note: \* $p < 0.05$ , \*\* $p < 0.01$ , \*\*\* $p < 0.001$ .

Following the conducting of a variance analysis of the research data, it was determined that a significant discrepancy existed between sexual minorities and non-sexual minorities with regard to parenting style. This discrepancy manifested exclusively in the domain of emotional warmth, signifying that sexual minorities exhibited considerably diminished levels of parental emotional warmth in comparison to non-sexual minorities. Concurrently, sexual minorities exhibited diminished levels of subjective well-being, perceived social support, and self-concept clarity. A further comparison of perceived social support levels revealed that sexual minorities experienced significantly lower levels of perceived social support from their families than non-sexual minorities ( $\Delta M = 2.02$ ,  $p < .001$ ), while no significant difference in support from friends and other sources was observed ( $p > .05$ ).

### 3.2 Correlation analysis of parenting styles, subjective well-being, perceived social support, and self-concept clarity among sexual minorities

Table 2 Correlation coefficients between parenting styles, subjective well-being, perceived social support, and self-concept clarity among parents of sexual minorities

	1	2	3	4	5	6
1 Parental Rejection	-					
2 Parental Emotional Warmth	-0.469***	-				
3 Parental Overprotection	0.677***	-0.170*	-			
4 Perceived Social Support	-0.264***	0.600***	-0.151	-		
5 Self-Concept Clarity	-0.277***	0.180*	-0.285***	0.079	-	
6 Subjective Well-Being	-0.311***	0.442***	-0.173*	0.508***	0.260**	-

Note: \* $p < 0.05$ , \*\* $p < 0.01$ , \*\*\* $p < 0.001$ .

A subsequent analysis of data concerning sexual minorities yielded findings that suggest a significant positive correlation between rejection and overprotection with regard to parenting styles, and a significant negative correlation between both of these and emotional warmth. A robust and statistically significant negative correlation was identified between parental rejection and several key psychological variables, namely perceived social support, the clarity of one's self-concept, and subjective well-being. The present study found a significant positive correlation between parental emotional warmth and perceived social support, self-concept clarity, and subjective well-being. A robust and statistically significant negative correlation was identified between parental overprotection and both the clarity of self-concept and subjective well-being. Concurrently, perceived social support and self-concept clarity exhibited a positive correlation with subjective well-being among sexual minorities.

### 3.3 Mediating analysis of perceived social support and self-concept clarity in the relationship between parenting style and subjective well-being

A mediation effect analysis was conducted using the SPSS process3.3 plug-in(Hayes, 2013; Hayes & Preacher, 2014), with 5,000 repeated samples and a confidence interval (CI) of 95%. All variables were standardised.

The findings indicated that perceived social support functioned as a mediator in the association between parental rejection and subjective well-being, exhibiting a substantial indirect effect ( $\beta = -0.03$ , 95% CI = [-0.056, -0.012]), and a

notable direct effect ( $\beta = -0.05$ , 95% CI =  $[-0.092, -0.014]$ ).

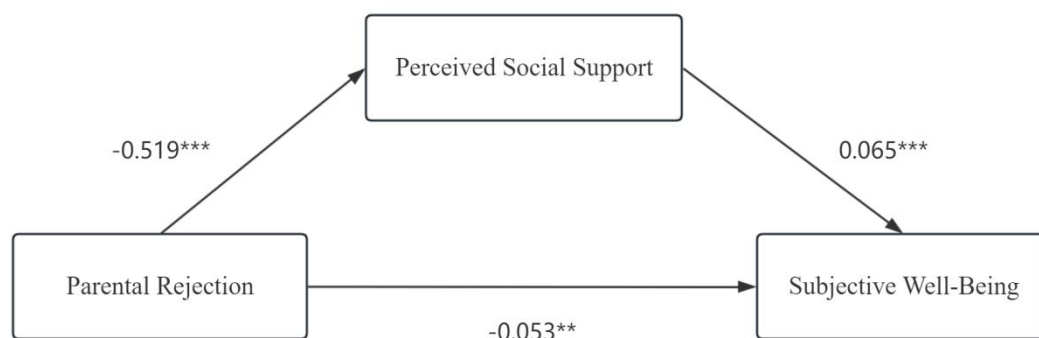


Fig. 1 Mediating role of perceived social support between parental rejection and subjective well-being

Note: Path coefficients are standardised coefficients; \*\* $p < 0.01$ , \*\*\* $p < 0.001$ .

Self-concept clarity mediates the relationship between parental overprotection and subjective well-being, with a significant indirect effect ( $\beta = -0.02$ , 95% CI =  $[-0.032, -0.002]$ ), and a non-significant direct effect ( $\beta = -0.03$ , 95% CI =  $[-0.070, 0.013]$ ).

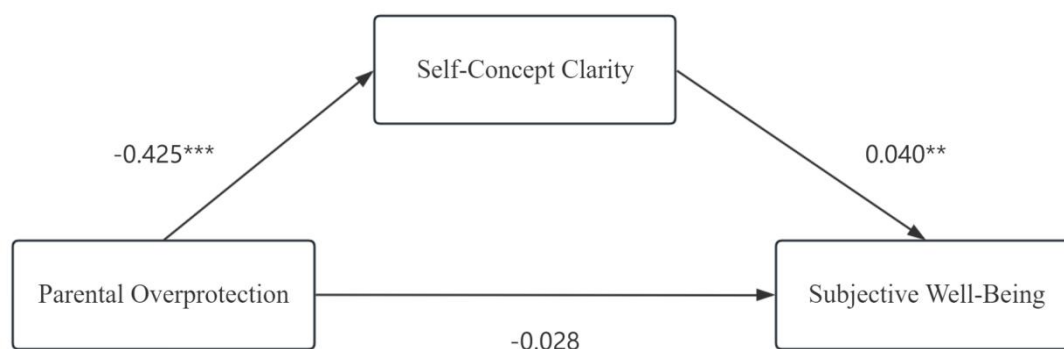


Fig. 2 The mediating role of self-concept clarity between parental overprotection and subjective well-being

Note: Path coefficients are standardised coefficients; \*\* $p < 0.01$ , \*\*\* $p < 0.001$ .

## 4 Discussion

### 4.1 Differences between sexual minorities and non-sexual minorities: warmth and support from family

Sexual minorities reported significantly lower parental emotional warmth, perceived social support, self-concept clarity, and subjective well-being than non-sexual minorities. This aligns with prior findings of increased familial rejection and mental health risks in this group (Meyer, 2003; Ryan et al., 2009). Emotional warmth, often overlooked in past studies, emerged as a key protective factor.

Perceived family support was especially low, underscoring its central role in well-being disparities. Perceived support, more than objective support, benefits mental health (Prati & Pietrantonio, 2010). In Chinese culture, familial rejection is often perceived as rejection of identity, deeply affecting self-worth (Ryan et al., 2010).

### 4.2 The impact of parenting styles on sexual minorities: the negative effects of rejection and overprotection

Parenting styles significantly impacted subjective well-being, mediated by perceived social support and self-concept clarity. Rejection reduced perceived support, leading to isolation and lower well-being (Wolfe et al., 2004; Helliwell & Putnam, 2004). Overprotection impaired identity formation and autonomy (Cass, 1984; Kagitcibasi, 2005), weakening self-concept clarity and well-being (Deci & Ryan, 2000; Grolnick et al., 1991).

### 4.3 Implications and limitations

Findings highlight parenting style as a key factor in the mental health of Chinese sexual minorities. Emotional warmth

is protective, while overprotection poses hidden risks. Promoting perceived social support and self-concept clarity may improve well-being. Limitations include reliance on self-reported data and a small, non-representative sample recruited via community platforms. Future research should expand methods and participant diversity to enhance validity and generalisability.

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