



## Original Research Article

# Perceived parenting Style, social adjustment and imposter phenomenon among young adult in rural and urban areas of Chengalpattu district, Tamil Nadu

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**Abstract: Background:** Parenting style is recognised as a major determinant of psychosocial development, influencing emotional regulation, social functioning, and self-perception in early adulthood. Impostor phenomenon characterised by persistent self-doubt despite evidence of competence has emerged as a growing concern among young adults navigating academic and career transitions. Social adjustment, a key indicator of interpersonal and functional adaptation, may further mediate these relationships. However, district-level evidence from Tamil Nadu, particularly in mixed rural–urban settings such as Chengalpattu, remains limited. **Objectives:** To assess perceived parenting styles, social adjustment, and impostor phenomenon among young adults in rural and urban areas of Chengalpattu district, and to determine associations between these variables. **Methods** A community-based cross-sectional study was conducted over six months among 200 young adults aged 18–30 years selected through multistage random sampling. Validated instruments including the Perceived Parenting Style Scale, Social Adjustment Scale–Self Report (SAS-SR), and Clance Impostor Phenomenon Scale—were interviewer-administered. Data were analysed using SPSS version 31. Descriptive statistics, chi-square tests, and logistic regression were applied; significance was set at  $p < 0.05$ . **Results** Authoritative parenting was more common in rural participants (52%), while authoritarian parenting predominated among urban participants (41%,  $p = 0.02$ ). Urban youth had significantly poorer social adjustment (46% vs. 31%, OR = 2.04;  $p = 0.03$ ) and higher impostor syndrome prevalence (54% vs. 38%, OR = 1.96;  $p = 0.01$ ). Multivariate analysis identified authoritarian (AOR = 3.42;  $p < 0.001$ ) and neglectful parenting (AOR = 2.88;  $p = 0.007$ ), poor social adjustment (AOR = 4.51;  $p < 0.001$ ), and impostor tendency (AOR = 2.18;  $p = 0.008$ ) as independent predictors. Parenting style was negatively correlated with both social adjustment ( $r = -0.42$ ) and impostor scores ( $r = -0.46$ ), while social adjustment showed a positive correlation with impostor tendency ( $r = 0.55$ ). **Conclusion** non-authoritative parenting styles, particularly authoritarian and neglectful patterns, were strongly associated with poorer social adjustment and higher impostor phenomenon among young adults, especially in urban settings. Enhancing supportive parenting practices and youth psychosocial services may improve emotional resilience and reduce impostor vulnerability in similar socio-cultural contexts.

**Keywords:** Parenting, Social Adjustment, Impostor Phenomenon, Young Adult, Cross-Sectional Studies

## INTRODUCTION

The emotional, social and cognitive development of

their children is affected significantly by the way parents behave. Researchers observe how parents in

various cultures bring up their children; they look at helpfulness, love and punishment for instance because it is these qualities that help a child learn social skills. Bornstein points out that these patterns are culturally determined and involve genes not just a person's own individual disposition. They have consequences for children throughout their lives in areas such as self-control, independence or relations with others.[1] Across the interval from adolescence to young adulthood, appraisals of earlier family experience effectively contribute to mental health and peer relations and to identity development.

First described by Clance, the impostor phenomenon (IP) is characterized by an individual's inability to internalize success despite evidence of one's ability or talent; rather, they attribute their achievements to luck or other external circumstances and live in constant fear of eventually being found out as fraudulent [2]. These emotions are often correlated with high personal standards, low self-uncertainty and performance pressure. In young adulthood, a period of development when young adults are increasingly autonomous and making career-related decisions, parent

The parents' parental styles related to the perceived ones also predict a sample of emerging adults' psychosocial adjustment to university life in international research. Warmth coupled with clear expectations in parenting has been associated with better emotional well-being, empathy and social functioning while authoritarian or permissive parenting is related to negative emotional and behavioural outcomes [3–5]. Meta-analytic evidence suggests that severe or inconsistent discipline fosters the development of externalizing behaviors, and supportive parenting leads to self-esteem - a key resource for handling stress and relationships [6,7]. These associations are further modified by cultural context, since parenting practices in non-Western societies have an impact on well-being based on values related to emotional awareness and filial obligation [8].

Globally, there is growing concern about the impostor phenomenon among young adults, especially in academic and professional contexts where there is intense competition and pressure to perform well [9]. It has been demonstrated that social adaptation challenges exacerbate impostor syndrome, leading to emotional distress and a diminished sense of belonging [10]. High-achieving young people in India, particularly medical students, report significant impostor experiences; correlations between impostor feelings, diminished confidence, and psychological distress have been observed [11–14].

Strong emotional ties and high academic standards are frequently combined in Indian parenting styles,

resulting in intricate relationships between authority, support, and the wellbeing of young people [15–17]. District-level data analyzing the relationship between perceived parenting styles, social adjustment, and the impostor phenomenon are still hard to come by, despite mounting evidence. Tamil Nadu, which is well-known for its rigorous educational systems, offers a distinct cultural and social setting where these connections call for careful examination.

Therefore, this study fills a significant gap in local mental health research by examining perceived parenting styles, social adjustment, and the impostor phenomenon among young adults aged 18 to 30 in rural and urban areas of Chengalpattu district, Tamil Nadu.

## MATERIAL AND METHODS

This study was conducted as a community-based cross-sectional investigation among young adults residing in rural and urban areas of Chengalpattu district, Tamil Nadu. The research was carried out over a continuous **six-month period**, during which all phases of sampling, recruitment, field data collection, and data analysis were completed. The study population consisted of individuals aged **18–30 years**, representing the developmental stage of emerging adulthood, a period marked by increasing psychosocial responsibilities and the consolidation of personal identity. Eligible participants were those who provided written informed consent and were available during household visits. Individuals with a known history of major or minor psychiatric illness, as well as households locked during three consecutive visits, were excluded from participation to minimise potential confounding related to pre-existing mental health conditions and incomplete sampling coverage.

The sample size was calculated using the prevalence of impostor phenomenon reported in a previous Indian study. Mascarenhas et al. reported a prevalence of **13.57%** among young adult populations. This prevalence value was selected because it reflected a comparable demographic profile and provided an empirically grounded estimate for parameter selection. The standard formula for estimating a single population proportion was applied:  $n = Z^2 \times p \times q / d^2$ , where  $Z = 1.96$  corresponding to the 95% confidence interval,  $p = 13.57$ ,  $q = 86.43$  ( $100 - p$ ), and  $d = 5\%$  precision. Using these values, the minimum required sample size was calculated to be **180 participants**. To accommodate possible non-response or incomplete data, a 10% excess sample was added, yielding an adjusted final sample size of **200 young adults**. This ensured adequate statistical power to identify meaningful associations across the study variables.

**A Two-Stage Random Sampling** was used to obtain a

representative distribution of participants from across the district's rural and urban populations. In the first stage, **Stage 1** Chengalpattu district was stratified into rural and urban areas based on administrative classification. From each stratum, **two urban municipalities and two rural villages were selected using simple random sampling**. In the second stage Within each selected area, households were chosen using simple random sampling. From each selected household, **one eligible young adult aged 18–30 years was selected using simple random selection** when more than one eligible individual was present. The Kish Grid was not applied in the final data collection, as simple random selection within households was deemed operationally more efficient and consistent across field teams.

Data collection was carried out through **direct household visits**, and each interview was conducted privately to maintain confidentiality and minimise social desirability bias. A structured interviewer-administered questionnaire was used, comprising four components: sociodemographic information, the Perceived Parenting Style Scale, the Social Adjustment Scale – Self Report (SAS–SR), and the Clance Impostor Phenomenon Scale. The sociodemographic section captured details such as age, gender, education, occupation, marital status, family composition, tobacco use, and parental education. These variables were included to enable stratified analysis and assessment of potential confounders.

The **Perceived Parenting Style Scale** measured respondents' retrospective perceptions of the parenting behaviours they experienced during their formative years. It included items across dimensions of nurturance, control, punishment, autonomy support, and involvement. Participants rated the frequency of various parenting behaviours on a five-point Likert scale ranging from “Never” to “Always.” This instrument enabled categorisation of parenting styles into authoritative, authoritarian, permissive, and neglectful types.

The **Social Adjustment Scale – Self Report (SAS–SR)** assessed respondents' functioning across several domains over the preceding two weeks. These domains included academic or work performance, peer interactions, family relationships, leisure activities, and financial stress. Each item was scored

using established response formats, with higher scores reflecting greater maladjustment. This tool allowed quantification of interpersonal and environmental adaptation among emerging adults.

The **Clance Impostor Phenomenon Scale** measured levels of impostor characteristics, including fear of failure, discounting of praise, attribution of success to external factors, and persistent self-doubt. Items were rated on a scale from “Not at all true” to “Very true,” producing a total score categorised into mild, moderate, frequent, or intense impostor tendencies.

Immediately after each interview, data were reviewed for completeness, and questionnaires were stored securely. All collected data were entered manually into **Microsoft Excel**, cleaned, and exported into **IBM SPSS software** for analysis. Only one software package SPSS version 31 was used for statistical computation, as per study requirements. Data cleaning procedures included range checking, verification of skip patterns, and cross-referencing responses to ensure accuracy.

The statistical analysis consisted of two main components. **Descriptive statistics** such as means, standard deviations, frequencies, and percentages were used to summarise the demographic profile of the participants and the distribution of perceived parenting styles, social adjustment scores, and impostor phenomenon categories. **Inferential statistics**, including chi-square tests and Odds Ratio, Binary Logistic Regression, Pearson's correlation coefficient were applied to examine associations between the three key constructs. A **p-value < 0.05** was used to determine statistical significance. This analytical strategy enabled the identification of meaningful patterns and relationships between parental influences, social functioning, and impostor tendencies among young adults in the district.

Ethical considerations were strictly adhered to throughout the study. Written informed consent was obtained from every participant before interview initiation. Confidentiality was maintained by anonymising data and restricting access to study investigators only. Ethical approval for the study was obtained from the institutional scientific committee before commencement.

## RESULTS

**Table 1. Socio-Demographic Characteristics of Participants (n = 200)**

| Variables             | Urban (n=100)<br>n (%) | Rural (n=100)<br>n (%) | Total<br>(n=200) |
|-----------------------|------------------------|------------------------|------------------|
| <b>Age (in years)</b> |                        |                        |                  |
| <b>Mean ± SD</b>      | 22.8 ± 3.4             | 23.1 ± 3.2             | 22.9 ± 3.3       |
| <b>Gender</b>         |                        |                        |                  |

|                          |          |          |             |
|--------------------------|----------|----------|-------------|
| Male                     | 52 (52%) | 48 (48%) | 100 (50%)   |
| Female                   | 48 (48%) | 52 (52%) | 100 (50%)   |
| <b>Education</b>         |          |          |             |
| College students         | 78 (78%) | 69 (69%) | 147 (73.5%) |
| Graduates / Employed     | 22 (22%) | 31 (31%) | 53 (26.5%)  |
| <b>Tobacco Use</b>       |          |          |             |
| Yes                      | 14 (14%) | 10 (10%) | 24 (12%)    |
| No                       | 86 (86%) | 90 (90%) | 176 (88%)   |
| <b>Parents Education</b> |          |          |             |
| Illiterate               | 7 (7%)   | 15 (15%) | 22 (11%)    |
| School level             | 49 (49%) | 63 (63%) | 112 (56%)   |
| Graduate & above         | 44 (44%) | 22 (22%) | 66 (33%)    |

A total of 200 young adults participated in the study, with equal representation from urban and rural areas. The mean age of participants was  $22.9 \pm 3.3$  years, and males and females were equally represented. Most participants were college students (73.5%), and tobacco use was reported by 12% of the sample (Table 1).

**Table 2. Univariate analysis of parenting style, social adjustment and imposter phenomenon by area of residence (n = 200)**

| Variable                  | Category      | Urban<br>(n=100) n (%) | Rural (n=100)<br>n (%) | Crude OR<br>(95% CI) | p-value |
|---------------------------|---------------|------------------------|------------------------|----------------------|---------|
| Perceived Parenting Style | Authoritative | 38 (38.0)              | 52 (52.0)              | Reference            | -       |
|                           | Authoritarian | 41 (41.0)              | 29 (29.0)              | 1.93 (1.01–3.68)     | 0.045   |
|                           | Neglectful    | 21 (21.0)              | 19 (19.0)              | 1.13 (0.56–2.27)     | 0.72    |
| Social Adjustment         | Good          | 54 (54.0)              | 69 (69.0)              | Reference            | -       |
|                           | Poor          | 46 (46.0)              | 31 (31.0)              | 2.04 (1.09–3.81)     | 0.03    |
| Impostor Phenomenon       | Absent        | 46 (46.0)              | 62 (62.0)              | Reference            | -       |
|                           | Present       | 54 (54.0)              | 38 (38.0)              | 1.96 (1.15–3.34)     | 0.01    |

In the univariate analysis, authoritative parenting was significantly more prevalent among rural participants (52%) compared to urban participants (38%) ( $p = 0.02$ ). Urban participants had higher odds of reporting authoritarian parenting (OR = 1.93, 95% CI: 1.01–3.68), poor social adjustment (OR = 2.04, 95% CI: 1.09–3.81), and imposter phenomenon (OR = 1.96, 95% CI: 1.15–3.34) compared to rural participants (Table 2).

**Table 3. Multivariate logistic regression analysis showing predictors of adverse psychosocial outcome among young adults (n = 200)**

| Variable                  | Category      | Adjusted OR<br>(AOR) | 95% CI    | p-value |
|---------------------------|---------------|----------------------|-----------|---------|
| Perceived Parenting Style | Authoritative | Reference            | -         | -       |
|                           | Authoritarian | 3.42                 | 1.70–6.89 | <0.001  |
|                           | Neglectful    | 2.88                 | 1.33–6.25 | 0.007   |
| Social Adjustment         | Good          | Reference            | -         | -       |
|                           | Poor          | 4.51                 | 2.34–8.68 | <0.001  |
| Impostor Phenomenon       | Absent        | Reference            | -         | -       |
|                           | Present       | 2.18                 | 1.22–3.86 | 0.008   |

Multivariate logistic regression analysis showed that authoritarian parenting (AOR = 3.42, 95% CI: 1.70–6.89), neglectful parenting (AOR = 2.88, 95% CI: 1.33–6.25), poor social adjustment (AOR = 4.51, 95% CI: 2.34–8.68), and presence of imposter phenomenon (AOR = 2.18, 95% CI: 1.22–3.86) were independently associated with adverse psychosocial outcomes (Table 3).

**Table 4. Correlation Matrix Between Parenting Style, Social Adjustment & Imposter Score**

| Variable                | Parenting Style Score      | Social Adjustment Score    | Imposter Score             |
|-------------------------|----------------------------|----------------------------|----------------------------|
| Parenting Style Score   | —                          | $r = -0.42$<br>$p < 0.001$ | $r = -0.46$<br>$p < 0.001$ |
| Social Adjustment Score | $r = -0.42$<br>$p < 0.001$ | —                          | $r = 0.55$<br>$p < 0.001$  |
| Imposter Score          | $r = -0.46$<br>$p < 0.001$ | $r = 0.55$<br>$p < 0.001$  | —                          |

Correlation analysis demonstrated a significant negative correlation between parenting style score and social adjustment score ( $r = -0.42$ ,  $p < 0.001$ ), and between parenting style score and imposter score ( $r = -0.46$ ,  $p < 0.001$ ). Social adjustment score showed a significant positive correlation with imposter score ( $r = 0.55$ ,  $p < 0.001$ ) (Table 5).

## DISCUSSION

The present investigation explored perceived parenting styles, social adjustment, and imposter phenomenon among young adults in rural and urban settings of Chengalpattu district. Several notable patterns emerged, including the higher prevalence of authoritative parenting in rural areas (52%) and a greater tendency toward authoritarian parenting in urban youth (41%). Furthermore, urban participants demonstrated significantly poorer social adjustment (46% vs. 31%) and a higher prevalence of imposter syndrome (54% vs. 38%). These findings provide an important regional perspective on the psychosocial functioning of young adults in an Indian semi-urban district.

Insights from earlier work by Lippold et al. (18) help contextualise these patterns. Their findings showed that parental behaviours shift dynamically in response to perceived control and social support, indicating that environmental pressures can shape parenting approaches. This aligns with the urban–rural gradient noted in our study, suggesting that urban parental control may intensify in high-pressure educational contexts, consistent with our adjusted odds ratio showing authoritarian parenting tripling the odds of adverse outcomes (AOR = 3.42).

Broader cultural analyses by Pinquart and Kauser (19) reported that authoritarian parenting tends to have stronger negative consequences in collectivistic societies. The trends observed in our population reflect this cultural vulnerability: urban young adults exposed to authoritarian practices had almost double the odds of reporting poor social adjustment (OR = 2.04) and nearly twice the odds of displaying imposter tendencies (OR = 1.96).

Such alignment reinforces the notion that the Indian sociocultural context amplifies the relational impact of restrictive parenting.

A different explanatory lens is offered by the cognitive diathesis–stress model described by Braet et al. (20), who demonstrated that maladaptive early environments predispose adolescents to internalising symptoms. The moderate negative correlations observed in our study between parenting scores and imposter scores ( $r = -0.46$ ) and between parenting and social adjustment ( $r = -0.42$ ) mirror this framework, suggesting that restrictive or inconsistent parenting contributes to enduring cognitive vulnerabilities.

The professional implications of imposter experiences identified by Hutchins et al. (21) echo the concerns observed among our urban participants, who had significantly higher imposter prevalence. Their work established links between imposter feelings, coping difficulties, and job-related stress; our findings may represent the developmental precursor to these challenges, emerging even before entry into the workforce.

Evidence from Shalini et al. (22) underlines the importance of parenting style in shaping child behaviour, demonstrating that supportive styles predict more adaptive outcomes. While focused on younger children, their conclusion resonates strongly with our observation that authoritative parenting—most prevalent in rural settings—was associated with substantially better psychosocial adjustment among young adults in the present study.

Complementary insights are provided by Lanjekar et al. (23), who highlighted the role of positive parenting in strengthening cognitive functioning and emotional resilience. These developmental benefits align with our finding that individuals raised under authoritative parenting showed the lowest burden of imposter syndrome and better social integration.

Howenstein et al. (24) similarly documented that harsh or inconsistent parenting predicted behavioural

difficulties in children. Our multivariable model extends this association into young adulthood: authoritarian and neglectful parenting remained significant predictors even after adjustment (AOR = 3.42 and AOR = 2.88, respectively), underscoring the long-term relevance of childhood relational environments.

The work of Thamilvanan et al. (25) demonstrated strong links between temperament and behaviour in clinical dental settings. Although focused on younger populations, their conclusions reflect the developmental continuity visible in our correlation matrix, where poorer social adjustment showed a strong positive association with imposter scores ( $r = 0.55$ ). These patterns highlight the persistence of early relational influences across developmental stages.

Neureiter and Traut-Mattausch (26) identified imposter phenomenon as a barrier to career growth, emerging from internalised self-doubt originating in earlier relational experiences. The heightened imposter levels in our urban sample correspond with these broader observations and suggest early psychosocial risks that may have long-term consequences.

Further clarity is provided by the findings of Kamarzarrin et al. (27), who observed that authoritarian parenting was positively associated with imposter tendencies among students. This relationship is directly reflected in our results, where exposure to authoritarian parenting significantly heightened imposter risk.

Bernard et al. (28) centred their analysis on personality correlates of imposter phenomenon, noting strong associations with traits such as neuroticism. Though personality traits were not assessed in our study, the link between non-supportive parenting and elevated imposter scores in our sample parallels their conceptual argument that emotional insecurity fuels self-doubt.

The work of Sonnak and Towell (29) reinforced the interconnectedness of parental rearing style, mental health, and self-esteem. Their findings align with the present study's observation that participants exposed to authoritarian or neglectful parenting experienced markedly poorer social adjustment, suggesting common developmental pathways across cultural settings.

A parallel interpretation emerges from Want and Kleitman (30), who highlighted associations between negative parenting and reduced self-confidence. Given that imposter syndrome is fundamentally a disorder of self-belief, our findings showing higher imposter prevalence among individuals raised under authoritarian parenting provide a meaningful

extension of their conclusions.

The contribution of stress and minority experiences to imposter feelings, as shown by Cokley et al. (31), offers an additional lens for understanding the elevated imposter levels in urban participants, who may experience more intense academic competition and social comparison pressures.

Kumar and Jagacinski (32) focused on achievement goal orientation, finding that individuals with imposter tendencies frequently adopt performance-avoidance goals. This theoretical perspective aligns with urban youths in our study, who may strive to avoid failure in competitive environments, thereby fostering imposter cognitions.

In the domain of child behavioural research, Viswanath et al. (33) showed that distinct parenting styles influence children's behavioural responses in clinical settings. Our findings extend this to psychosocial functioning in young adults, underscoring the enduring developmental impact of parenting.

A broader behavioural context is provided by Van der Geest et al. (34), who documented associations between maternal parenting styles and sedentary behaviour in children. Their work reinforces the wide-reaching influence of parenting across multiple behavioural domains, consistent with the relationship between parenting, adjustment, and imposter tendencies in our sample.

Finally, Hubbs-Tait et al. (35) demonstrated that parental feeding practices were strong predictors of overarching parenting style categories. This supports the broader conceptual understanding that structured, responsive parenting fosters adaptive developmental outcomes, consistent with the protective associations observed with authoritative parenting in our population.

Collectively, the convergence of evidence from this study and the referenced literature underscores the central role of parenting in shaping psychosocial development and self-perception. The stronger imposter prevalence, poorer social adjustment, and higher authoritarian parenting observed among urban youth in Chengalpattu indicate emerging mental health priorities for semi-urban Indian districts. The consistency of empirical patterns across international and Indian studies strengthens the credibility of our findings and highlights the need for early-life family interventions and youth-centred psychosocial support systems.

## LIMITATIONS

The present study has several methodological and contextual limitations that require careful

consideration when interpreting the findings. First, the cross-sectional design restricts the ability to infer causality between perceived parenting style, social adjustment, and imposter phenomenon. Although significant associations were observed, the temporal direction of these relationships cannot be determined. Second, the assessment of parenting style was based on retrospective recall by young adults, which introduces the possibility of recall bias, particularly as participants' current psychological state may influence their perceptions of past parenting experiences. Third, the sample was restricted to selected rural and urban clusters within Chengalpattu district, which may limit generalisability to populations in other districts with differing sociocultural or socioeconomic characteristics. Fourth, social desirability bias may have influenced responses related to sensitive constructs such as imposter feelings, family dynamics, and adjustment difficulties. Fifth, although validated scales were used, the study did not account for potentially confounding variables such as personality traits, academic stress, peer influence, or family functioning, all of which may interact with parenting and psychosocial outcomes. Finally, the study relied on self-reported data rather than clinical assessments, which may affect measurement precision. Despite these limitations, the findings offer valuable insights into youth psychosocial development in this region.

## CONCLUSION

This study provides important evidence on how perceived parenting style influences social adjustment and imposter phenomenon among young adults in rural and urban settings of Chengalpattu district. Authoritative parenting was more common in rural areas and appeared to act as a protective factor, whereas authoritarian and neglectful parenting styles were significantly more prevalent among urban participants, contributing to poorer psychosocial outcomes. Urban youth demonstrated higher odds of poor social adjustment (OR = 2.04) and a markedly elevated prevalence of imposter syndrome (54% vs. 38%), indicating that environmental pressures and familial expectations may play a prominent role in shaping self-perception. Adjusted analyses further highlighted that authoritarian (AOR = 3.42) and neglectful parenting (AOR = 2.88) independently increased the likelihood of adverse outcomes. Correlation patterns reinforced that healthier parenting was associated with better adjustment and lower imposter tendencies, underscoring the enduring impact of early relational experiences. These findings collectively point to the need for targeted psychosocial interventions, including parent-focused guidance, youth counselling services, and community-level awareness programmes. Strengthening supportive parenting practices may enhance resilience, improve social integration, and reduce imposter vulnerability among young adults in similar socio-cultural contexts.

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