



# Parental Love and Well-Being of Young Adults: the Mediating Role of Optimism

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## Abstract

No previous studies have so far explicitly investigated the dynamic of parental love and children's well-being in relation to optimism. The present study tested whether parental love had an impact on children's well-being through optimism. To test the prediction, we administered a questionnaire package comprising the adult versions (short forms) of the Parental Acceptance-Rejection Questionnaire for Fathers and Mothers, (2) Life Orientation Test-Revised, (3) Satisfaction with Life Scale, (4) Positive and Negative Affect Schedule, and (5) the Mental Health Continuum-Short Form and a Personal Information Form to a convenience sample of 300 students of Dhaka University. Participants' mean age was 21.8 years and was between the ages of 18 through 25 years. Independent sample *t*-tests revealed significant gender differences in most of the key variables in the study. Results of Pearson product-moment correlations showed that the men who perceived their mothers and fathers as more loving (accepting) were more optimistic and mentally healthy compared to other groups. Similarly, the women who perceived their mothers (but not fathers) as more loving were optimistic and mentally healthy compared to others groups. Results of simultaneous multiple regression analysis revealed that maternal love affected the well-being of both men and women partially through optimism. Unlike maternal love, paternal love affected the well-being of only men.

**Keywords** Parental love · Optimism · Well-being · Positive and negative affect · Life satisfaction

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## Introduction

The parental acceptance-rejection theory (PART Theory) of Rohner, also known as a socialization and lifespan development theory, tries to explain and forecast the antecedents, correlates, and repercussions of parental acceptance and rejection worldwide. (Rohner, 1986; Rohner & Rohner, 1980). Parental acceptance and rejection together constitute two different dimensions of warmth relationships between individuals. This theory postulates that an individual's perception about own relationships, specifically the warmth or lack of warmth relationships, influences psychological and behavioral functioning (Deveci Şirin, 2019). This affection and warmth range from a lot to none, where one side started with parental acceptance and the other side ended with parental rejection (Rohner, 2000). Parental acceptance is characterized by parents who care about their children's well-being and provide them with comfort, support, love, care, and affection. On the contrary, parental rejection is the opposite of acceptance (Rohner & Lansford, 2017).

Even though there are many crucial parts of the parent–child interaction, research has consistently demonstrated that accepting reactions from parents and primary caregivers is an essential element of achieving children's healthy social and emotional development. Each pattern of parental behavior has an impact on children's personality development as well as their quality of life (Hussain & Munaf, 2012), and it is the most important determinant of subjective well-being in childhood and adolescence (Diener & Diener, 2008). Children's remembered parental acceptance/rejection influenced their psychological, behavioral, and social functioning (Tillman & Juntunen, 2013) as well as their psychological adjustment/maladjustment (Fotti et al., 2006; Khaleque et al., 2013, 2016; Rohner, 2008; Rohner et al., 1996; Veneziano & Rohner, 1998) during childhood, adolescence, and adulthood.

According to a number of studies, parental rejection gives undeserving feeling of affection to a child that leads to low self-esteem, depressive feelings, a negative worldview, behavior issues, criminality, substance misuse, suspiciousness, and self-doubt (e.g., Baker & Hoerger, 2012; Khaleque & Rohner, 2002; Kim, 2013; Rohner, 2004; Rohner & Khaleque, 2005). Furthermore, parental rejection is also linked to adulthood anxiety (Sartaş Atalar & Gençöz, 2015) and psychological adaption (Türkdoan, 2017). On the contrary, parental acceptance is related with higher self-esteem, social competence, and lower rates of depression and behavioral problems (Kerns et al., 1996; Rohner & Britner, 2002). The contemporary focus on remembered parental acceptance/rejection created the growing academic interest in the concept of well-being, which is viewed as the absence of psychopathology (Ryff & Singer, 1998).

Although empirical research on well-being began in the 1960s (Campbell et al., 1976) but it has grown in popularity in recent decades as researchers have become more aware of the various streams of inquiry (Keyes et al., 2002). According to Ryff and colleagues (Ryff et al., 2004) and others (Ryan & Deci, 2001; Waterman et al., 2008), well-being is a broad concept that has been conceptualized as

subjective (hedonic) well-being and psychological (eudaimonic) well-being. Subjective well-being is an evaluation of life in terms of satisfaction and a balance of positive and negative affect; whereas, psychological well-being is concerned with the realization of human potential and implies a sense of participation in life's existential issues.

Recent researches have suggested that remembered parental acceptance/rejection has a significant contribution to the well-being of individual (e.g., Cai et al., 2013; Khaleque, 2002). More specifically, several researchers (e.g., An & Cooney, 2006; Huppert et al., 2011; Yamawaki et al., 2011) evidenced that there is a significant relationship between perceived parenting characteristic or perceived parental acceptance-rejection and psychological well-being of adolescent, adult, and midlife individual. Widespread research has also identified a significant contribution of parenting behaviors to adolescent subjective well-being (Cacioppo et al., 2013; Rasmi et al., 2012; Saha et al., 2010).

Researchers also examined the predictors and correlates of subjective well-being (Galinha & Pais-Ribeiro, 2011; Ürüvar et al., 2012) and psychological well-being (Hasnain et al., 2014). For example, Acun-Kapikiran et al. (2014), reported that parental attitude was determined to be the positive predictor of life satisfaction, whereas Kazarian et al., (2010), showed the positive correlation between parental warmth and subjective happiness in college students. Along with these, among the predictors of well-being, only hope in males and happiness in female individually contributed 63% and 53% significant variance respectively to their psychological well-being (Hasnain, et al., 2014). More specifically, a lots of researchers (e.g., Chang & Sanna, 2001; Diener et al., 2003; Eid & Diener, 2004; Ferguson & Goodwin, 2010; Leung et al., 2005; Liu et al., 2018; Ürüvar et al., 2012) reported optimism as a significant predictor of psychological or subjective well-being, that is well-being as a whole and optimism has a positive relation with emotional/psychological well-being (Matthews & Cook, 2009).

Parental love is regarded to be the source of optimism. In other words, parental love contributes to the development of an optimistic attitude, which eventually becomes a personality attribute. As a result, it is referred to as dispositional optimism. According to Carver and Scheier (2001), dispositional optimism is the generalized expectation that one's personal life outcome will be positive. Researchers (e.g., Hjelle et al., 1996) also found that in the middle childhood period, reported parental warmth/acceptance was positively connected with dispositional optimism but aggression/hostility, neglect/indifference, and undifferentiated rejection were correlated negatively with dispositional optimism. Previous studies have also suggested that parental activities may have a direct or indirect impact on adolescent developmental outcomes via internal resources. For example, internal resources such as self-efficacy, gratitude, optimism, self-esteem, hope, and resilience have been discovered as psychological strengths that promote teenage well-being (Khan, 2013; Sivis-Cetinkaya, 2013).

At present, psychologists have given considerable attention to the well-being research. There are considerable research evidences that early family experience like maternal and paternal acceptance has a significant impact on the well-being of people (Khaleque, 2013). Although there is evidence of engagement in problematic behavior

of adolescents who perceive their parents to be rejecting and who experience low levels of emotional support from their parents (Barnow et al., 2002; Ge et al., 1996). From the perspective of current situation of Bangladesh (i.e., terrorism, delinquency, and drug dependence), it is necessary to evaluate the well-being of young adults and the role of parental acceptance/rejection on the well-being of these group of people. Moreover, it may be that parental attitude affects well-being through internal resource like optimism. Therefore, the specific research objectives of the present study were to (1) explore whether maternal acceptance, paternal acceptance, optimism, and well-being are associated with one another; (2) explore whether maternal acceptance, paternal acceptance, and optimism can predict well-being; and (3) explore whether parental acceptance affects well-being of young adults through optimism. Based on previous study findings, the specific hypotheses were formulated before conducting the present research as (1) maternal acceptance, paternal acceptance, optimism, and well-being will positively be associated with one another; (2) maternal acceptance, paternal acceptance, and optimism will jointly predict well-being; and (3) parental acceptance will affect well-being of young adults through optimism.

## Method

### Participants

The present study consisted of 300 young adults studying at University of Dhaka. Among them 150 (50%) were female and 150 (50%) were male. The participants were selected conveniently from the University of Dhaka. Their ages ranged from 18 through 25 with a mean age being 21.80 years ( $SD=1.81$ ). The participants were from lower class to upper class family background with most of the participants were from middle class (86.7%) family background. Their parental education level varied from primary through tertiary level. Maternal education varied from elementary through postgraduate levels. For example, 19.3% mothers had only elementary level education, 18.7% under secondary level, 24% of them secondary level, 16.7% higher secondary level, 10% graduate level, 3% had postgraduate level education, and 8.3% were illiterate. Similarly, paternal education varied from elementary through tertiary levels, such as 6% of them had only elementary level education, 19.3% under secondary level, 14% of them secondary level, 12.7% higher secondary level, 21.1% graduate level, 14% had postgraduate level education, and 5% were illiterate. About 89% of the respondents' mothers were engaged in homemaking and other 11 percent were in different professions. About 45.7% of the respondents' fathers were in service industries and in business (31.3%), and 23% were in agriculture.

### Measures

All the participants in this research responded to the following six self-report questionnaires along with the demographic form. All questionnaires were translated in Bangla language. The six measures and a demographic form include:

1. Adult Parental Acceptance-Rejection Questionnaire: Father (Adult PARQ: Mothers and Fathers) Short-Form.
2. Life Orientation Test- Revised (LOT-R).
3. Satisfaction with Life Scale (SWLS).
4. The Positive and Negative Affect Schedule (PANAS).
5. The Mental Health Continuum-Short Form (MHCSF).
6. Personal Information Form (PIF).

Here, SWLS and PANAS were used to measure subjective wellbeing and MHCSF was used to measure psychological wellbeing of the participants.

**The Adult Version (Short Form) of the Parental Acceptance and Rejection Questionnaire for Mothers and for Fathers (Adult PARQ: Mothers and Fathers)** The Bangla versions (Jasmine et al., 2007) of the Adult PARQ: Mothers and Fathers (Rohner, 2005) to be used to assess respondent's perceptions about their maternal and paternal acceptance and rejection. The mother and father versions of the Adult PARQ short form are self-report measures consisting of 24 items designed to assess adult's perceptions of maternal and paternal acceptance, respectively. The two versions of the scale for mother and father are virtually identical. Both the questionnaires measure adult's perceptions of maternal and paternal warmth/affection, hostility/aggression, indifference/neglect, and undifferentiated rejection. The sum of the four PARQ scales constitutes a measure of overall perceived maternal and paternal acceptance-rejection. The score ranges from a low of 24 to a high of 96. The midpoint of the PARQ is 60. Score at or above the scale midpoint indicates more parental rejection than acceptance and below the midpoint indicates more parental acceptance than rejection. The PARQ has been used in over 2000 studies worldwide and is known to have high reliability and validity for use in cross-cultural research (Khaleque & Rohner, 2002; Rohner, 2005). The Cronbach alpha for the portion of the study was 0.91 for both the Adult PARQ Mother and Father versions.

**Life Orientation Test-Revised (LOT-R)** The Bangla translated version (Uddin & Nahar, 2015) of the Life Orientation Test- Revised, which was originally developed by Scheier et al. (1994), was used to measure optimism. LOT-R is a revised version of the original LOT (Scheier & Carver, 1992). It is a self-report instrument containing 10 items for assessing individual differences in generalized optimism versus pessimism. Of the 10 items, 3 items (1, 4, and 10) measure optimism, 3 items (3, 7, and 9) measure pessimism and are reverse coded items, and 4 items (2, 5, 6, and 8) serve as fillers and they are not scored to obtain an overall score. Respondents rate each item on a 5-point Likert-type scale where "0 = strongly disagree," "1 = disagree," "2 = neutral," "3 = agree," and "4 = strongly agree." The possible score ranges from a low of 0 to a high of 24. The midpoint of the LOT-R is 12. Score at or above 12 reflects more dispositional optimism and below it reflects more pessimism. The Cronbach alpha for the portion of the study was 0.53.

**Satisfaction with Life Scale (SWLS)** The Bangla translated version (Uddin & Nahar, 2016a, 2016b) of the Satisfaction with Life Scale (SWLS), which was originally developed by Diener et al. (1985), was used to measure life satisfaction. The scale consists of 5 items. Participants indicate their level of agreement with the self-referencing statements on a 7-point scale, ranging from “1” (strongly disagree) to “7” (strongly agree). The psychometric properties of this scale have repeatedly been studied and have been shown to be a valid and reliable measure (Pavot & Diener, 1993). The possible scale score ranges from a low of 5 to a high of 35. The midpoint of this scale is 20. Individuals on the SWLS can be classified as extremely dissatisfied (5–9), dissatisfied (10–14), slightly dissatisfied (15–19), neutral (20), slightly satisfied (21–25), satisfied (26–30), and extremely satisfied (31–35). The scale has high internal consistency and temporal reliability (Yoon et al., 2008). The Cronbach alpha for the portion of the study was 0.80.

**The Positive and Negative Affect Schedule (PANAS)** The Bangla translated version (Uddin & Nahar, 2016a, 2016b) of Positive and Negative Affect Schedule (PANAS), which was developed by Watson et al. (1988), was used to measure positive and negative affective state. The scale consists of 20 items, where 10 items measure positive affect (1, 3, 5, 9, 10, 12, 14, 16, 17, and 19) and 10 items measure negative affect (2, 4, 6, 7, 8, 11, 13, 15, 18, and 20). Participants rated each item using a 5-point Likert type scale, from 1 (very slightly or not at all) to 5 (extremely). Positive affect score can range from 10 to 50, with higher scores representing higher levels of positive affect. In contrast, negative affect score can range from 10 to 50, with lower scores representing lower levels of negative affect. The scales are shown to have highly internally consistent, largely uncorrelated, and stable at appropriate levels over a 2-month time period (Watson et al., 1988). In the current study, alpha for the positive and negative affect subscales were 0.82 and 0.84, respectively.

**The Mental Health Continuum-Short Form (MHCSF)** The Bangla translated version (Uddin & Nahar, 2016a, 2016b) of the adult Mental Health Continuum-Short Form (MHC-SF), which was originally developed by Keyes et al. (2008), was used to measure eudaimonic well-being. Participants rated this 14-item measure on a 6-point Likert type scale, from “0” (never), “1” (once or twice a month), “2” (about once a week), “3” (two or three times a week), “4” (almost every day), to “5” (every day). The MHC-SF comprised three subscales: emotional well-being (3 items; from 1 to 3), psychological well-being (6 items; from 4 to 9), and social well-being (5 items; from 10 to 14). All the three subscales demonstrated sound psychometric properties with alpha of 0.83, 0.83, and 0.74, respectively (Lamers et al., 2011). In this study, coefficient alpha for the three subscales were 0.86, 0.76, and 0.84 for emotional, psychological, and social well-being, respectively.

**The Personal Information Form (PIF)** The PIF will elicit demographic, personal, and social information about respondent’s gender, age, grade in university, academic achievement, number of siblings, birth order, family size, parental education,

parental occupation, family socioeconomic status, religious affiliation, types of family, etc.

## Procedures

This study was conducted in the Bangladesh following the Declaration of Helsinki and verbal consent was taken from each participants. At the beginning of study, LOT-R, SWLS, PANAS, and MHC-SF were translated into Bangla and then administered for a pilot study on 24 participants (12 males and 12 females). Pilot testing data were calculated for reliability statistics. All the measures showed good alpha value (e.g., SWLS = 0.79, MHC-SF = 0.87 with low correlation of item 13, PA = 0.85, and NA = 0.81) except LOT-R (0.39 with negative correlation of item 3 and low correlation of item 7). Then, the negative item and item with low correlation was revised and administered for final data acquisition. For taking consent at the beginning, each participant was briefed about the general purpose of the study and assured that their responses would be kept confidential and used only for research purposes. Participants were given a general instruction verbally, and were asked to read carefully the standard instructions of how to respond before going through the items of the scale. Also, further clarifications were done whenever they faced any problems to understand the items. After completion of all items they were asked to provide general demographic information (e.g., age, gender, marital status, socioeconomic status, education, etc.). It took 30 min on an average to complete the task. Thus, the survey was administered and data were collected over a 6-week period from all the participants.

## Data Processing and Analysis

Each participant's responses were scored according to the scoring principle of parental acceptance-rejection questionnaire, life orientation test-revised, life satisfaction scale, positive and negative affect schedule, mental health continuum-short form. Then, obtained data were analyzed through SPSS software. In order to test the reliability of the translated measures, Cronbach  $\alpha$  was calculated. For main analysis, at first independent sample, "t" test was carried out to examine the difference between male and female. Then, simple correlation was calculated to examine the relationships among parental acceptance, optimism, and well-being for male and female separately. In order to test the joint effect of parental acceptance and optimism on well-being, data were analyzed using multiple regressions, using parental acceptance and optimism as predictor variables, and well-being as criterion variable. Finally, in order to test for the mediating effect of optimism in the relationship between parental (maternal and paternal) acceptance and well-being, data were further processes using hierarchical multiple regression.

## Results

In order to test gender difference in maternal acceptance, paternal acceptance, optimism, and well-being, independent sample *t* tests were done. Results of *t* tests as shown in Table 1 reveal significant gender difference in most of the major variables of this study (i.e., maternal acceptance, paternal acceptance, optimism, life satisfaction, positive affectivity, emotional well-being, and psychological well-being) except negative affectivity and psychological well-being. Further inspection of Table 1 shows that both male and female perceive their parents as loving although male perceives their mother (female:  $M=37.93$ ,  $SD=11.88$ ; male:  $M=43.69$ ,  $SD=12.22$ ) and father (female:  $M=35.96$ ,  $SD=10.13$ ; male:  $M=46.35$ ,  $SD=12.28$ ) more loving than female. Likewise, female reported themselves as more optimistic (female:  $M=16.14$ ,  $SD=3.63$ ; male:  $M=14.27$ ,  $SD=3.94$ ), and more satisfied with life (female:  $M=23.26$ ,  $SD=6.70$ ; male:  $M=20.86$ ,  $SD=6.77$ ) than male. On the other hand, male reported more positive affect (female:  $M=27.38$ ,  $SD=6.94$ ; male:  $M=29.03$ ,  $SD=6.89$ ) than female. Because of significant gender difference in most of the major variables, all further analyses were performed separately for the male and female.

In order to achieve the first objective, Pearson product moment correlation was computed. Results of analyses presented in Table 2 show that the more accepting the male perceive their mother ( $r=-0.38$ ,  $p<0.01$ ) and father ( $r=-0.36$ ,  $p<0.01$ ) to be the more they were optimistic. But, the more accepting the female perceive their mother ( $r=-0.26$ ,  $p<0.01$ ), not father, to be the more they were optimistic. Again, the more accepting the male perceive their parents to be, the more their well-being and the more accepting the female perceive their mother to be, the more their well-being. Results also show that the more the male and female perceive themselves as optimistic the more their well-being.

**Table 1** Independent sample *t* tests for the significance of the difference between female and male in maternal acceptance, paternal acceptance, optimism, and well-being

Variables	Female ( <i>n</i> =150)		Male ( <i>n</i> =150)		<i>t</i>
	Mean	SD	Mean	SD	
Maternal acceptance	37.93	11.88	43.69	12.22	-4.14***
Paternal acceptance	35.96	10.13	46.35	12.28	-7.99***
Optimism	16.14	3.63	14.27	3.94	4.27***
Life satisfaction	23.46	6.70	20.86	6.77	3.34***
Positive affectivity	27.38	6.94	29.03	6.89	-2.06*
Negative affectivity	20.49	8.27	20.77	7.08	-0.31
Emotional well-being	9.07	3.90	8.11	4.00	2.12*
Social well-being	14.19	7.26	15.98	6.96	-2.18*
Psychological well-being	17.63	6.79	16.33	6.71	1.66

\*\*\* $p<0.001$  (two-tailed)

\* $p<0.05$  (two-tailed).



**Table 2** Zero-order correlations between maternal acceptance, paternal acceptance, optimism, and well-being

	1	2	3	4	5	6	7	8	9
1. Maternal acceptance	–	0.63**	–0.38**	–0.47**	–0.28*	0.38**	–0.50**	–0.28**	–0.54**
2. Paternal acceptance	0.46**	–	–0.36**	–0.48**	–0.21**	0.32**	–0.40**	–0.24**	–0.41**
3. Optimism	–0.26**	–0.10	–	0.47**	0.32**	–0.28**	0.39**	0.22**	0.45**
4. Life satisfaction	–0.37**	–0.36**	0.41**	–	0.29**	–0.19*	0.56**	0.42**	0.44**
5. Positive affectivity	–0.16	–0.14	0.38**	0.44**	–	–0.19*	0.44**	0.45**	0.58**
6. Negative affectivity	0.32**	0.13	–0.16	–0.34**	–0.27**	–	–0.35**	–0.03	–0.30**
7. Emotional well-being	–0.20*	–0.15	0.30**	0.53**	0.47**	–0.39**	–	0.49**	0.65**
8. Social well-being	–0.10	–0.05	0.20*	0.27**	0.39**	–0.18*	0.43**	–	0.65**
9. Psychological well-being	–0.12	–0.12	0.30**	0.53**	0.45**	–0.21*	0.54**	0.58**	–

Correlations above the diagonal pertain to men and correlations below the diagonal pertain to women

\* $p < 0.05$  (two-tailed)

\*\* $p < 0.01$  (two-tailed)

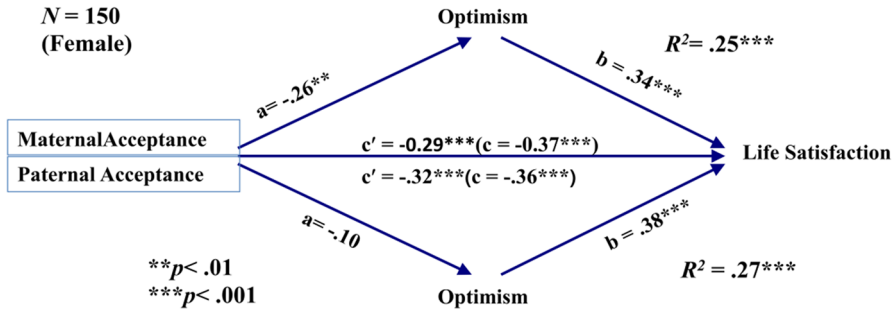
In order to achieve the second objective, multiple regression analysis was done using maternal acceptance, paternal acceptance, and optimism as predictor variables and well-being (i.e., life satisfaction, positive affectivity, negative affectivity, emotional well-being, social well-being, and psychological well-being) as outcome variable. Results presented in Table 3 shows that maternal acceptance, paternal acceptance, and optimism can jointly explain approximately 36%, 13%, 17%, 30%, 10%, and 36% of the variance in male's life satisfaction, positive affectivity, negative affectivity, emotional well-being, social well-being, and psychological well-being respectively. Results also show that maternal acceptance, paternal acceptance, and optimism can jointly explain approximately 29%, 16%, 11%, 11%, and 10% of the variance in female's life satisfaction, positive affectivity, negative affectivity, emotional well-being, and psychological well-being, respectively. These results also indicate that though all the predictors can jointly predict both male's and female's well-being, they strongly predict male's well-being rather than female's well-being.

To explore whether dispositional optimism of young adults mediates the relation between perceived maternal and paternal acceptance and well-being (life satisfaction, positive negative affect, social well-being, emotional well-being, social well-being, and psychological well-being) for both male and female, we regressed respondents' well-being on their remembered maternal and paternal acceptance in childhood and dispositional optimism separately for female and male. The results showed significant mediating effect of optimism on life satisfaction, positive affectivity, negative affectivity, emotional well-being, and psychological well-being of male. There is also significant mediating effect of optimism on life satisfaction, and emotional well-being of female. To test the significant mediation effect of optimism, we applied Sobel test, which confirms the significant partial indirect effect of optimism on overall well-being of male and female. Optimism has significant full mediation effect only in the relationship between maternal acceptance and emotional well-being of female and between paternal acceptance and positive affectivity of male.

Independent effects of maternal acceptance ( $\beta = -0.37$ ,  $p < 0.001$ ) and paternal acceptance ( $\beta = -0.36$ ,  $p < 0.001$ ) on life satisfaction of female are shown in Fig. 1. Figure 1 shows that when optimism was included in the regression analysis,

**Table 3** Multiple regression coefficients of maternal acceptance, paternal acceptance, and optimism on well-being of young adults

Well-being variables	Women = 150				Men = 150			
	<i>R</i>	<i>R</i> <sup>2</sup>	<i>F</i> (3, 146)	<i>p</i>	<i>R</i>	<i>R</i> <sup>2</sup>	<i>F</i> (3, 146)	<i>p</i>
Life satisfaction	0.54	0.29	20.18	0.001	0.60	0.36	26.99	0.001
Positive affectivity	0.39	0.16	8.91	0.001	0.36	0.13	7.43	0.001
Negative affectivity	0.33	0.11	5.89	0.001	0.42	0.17	10.22	0.001
Emotional well-being	0.33	0.11	6.13	0.001	0.55	0.30	21.55	0.001
Social well-being	0.21	0.04	2.15	0.09	0.31	0.10	5.27	0.01
Psychological well-being	0.31	0.10	5.14	0.01	0.60	0.36	27.54	0.001



**Fig. 1** Path diagram showing mediating effect of optimism in the relation between parental acceptance and life satisfaction for female. Path coefficients are standardized regression coefficients (betas)

maternal acceptance and optimism can jointly explain 25% of the variance in women's life satisfaction and paternal acceptance and optimism can jointly explain 27% of the variance in women's life satisfaction.

Figure 2 also shows that maternal acceptance and optimism ( $R^2 = 0.32$ ,  $p < 0.001$ ) can significantly explain 32% of the variance in men's life satisfaction and paternal acceptance and optimism ( $R^2 = 0.33$ ,  $p < 0.001$ ) can significantly explain 33% of the variance in men's life satisfaction.

Figure 3 shows that maternal acceptance and optimism ( $R^2 = 0.15$ ,  $p < .001$ ) and paternal acceptance and optimism ( $R^2 = 0.15$ ,  $p < .001$ ) each can explain 15% of the variance in women's positive affectivity. There is no mediation effect of optimism in the relationship between parental acceptance and positive affectivity for female.

Figure 4 shows that maternal acceptance and optimism ( $R^2 = 0.13$ ,  $p < 0.001$ ) and paternal acceptance and optimism ( $R^2 = 0.11$ ,  $p < 0.001$ ) can significantly explain 13% and 11% of the variance in men's positive affectivity.

Results presented in Fig. 5 show that maternal acceptance ( $\beta = 0.32$ ,  $p < 0.001$ ) but not paternal acceptance has significant independent effect on negative affectivity of female. When optimism was included in regression analysis, the independent effect of maternal acceptance reduces to  $\beta = 0.30$ ,  $p < 0.001$  though Sobel test did not signify this partial mediation effect of optimism in the relationship between maternal acceptance and negative affectivity of female. The results also show that maternal acceptance and optimism can significantly explain 11% of the variance in women's negative affectivity.

Figure 6 shows 18% of the variance in men's negative affectivity can be significantly explained by maternal acceptance and optimism, and 14% variance in men's negative affectivity can be explained by paternal acceptance and optimism. Figure 7 shows that maternal acceptance and optimism can significantly explain 11% of the variance in female's emotional well-being.

Figure 8 indicates that 30% and 23% of the variance in men's emotional well-being can be significantly explained by optimism and maternal acceptance and optimism and paternal acceptance, respectively. Since there is no significant independent effect of parental acceptance on social well-being of female (see Fig. 9). But Fig. 10 shows that both maternal ( $\beta = -0.28$ ,  $p < 0.01$ ) and paternal ( $\beta = -0.25$ ,  $p < 0.01$ ) acceptance has

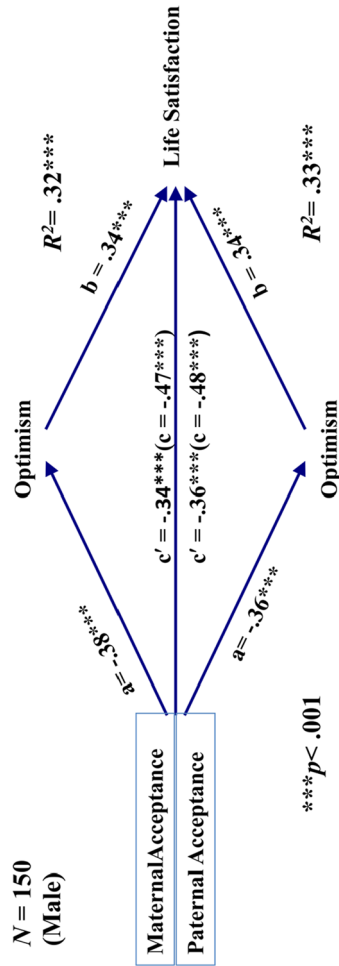
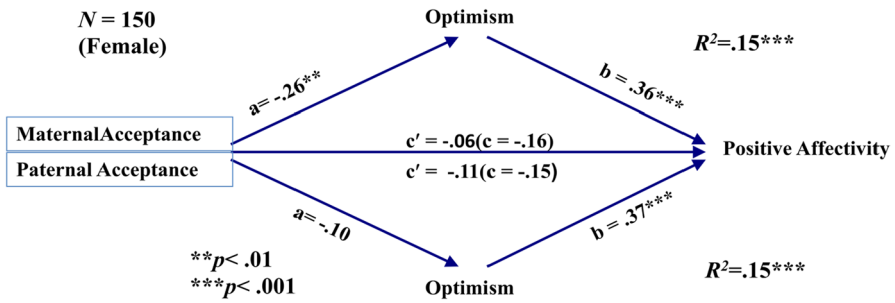
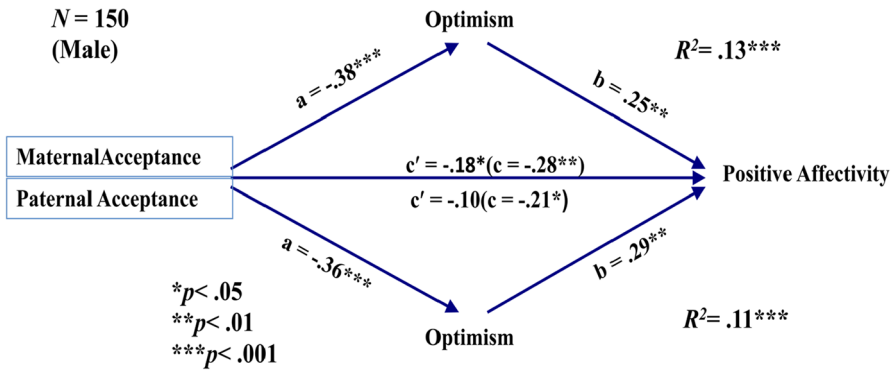


Fig. 2 Path diagram showing mediating effect of optimism in the relation between parental acceptance and life satisfaction for male



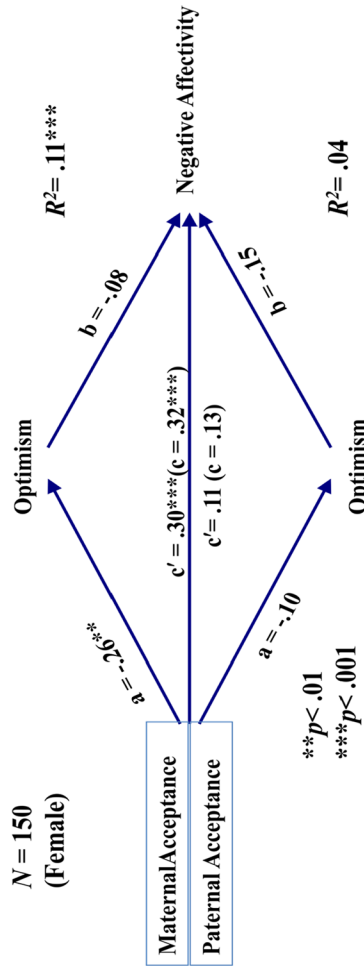
**Fig. 3** Path diagram showing mediating effect of optimism in the relation between parental acceptance and positive affectivity for female



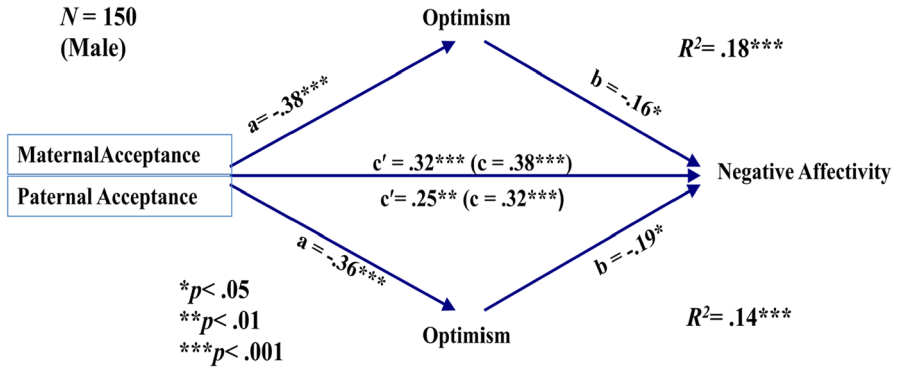
**Fig. 4** Path diagram showing mediating effect of optimism in the relation between parental acceptance and positive affectivity for male

significant independent effect on male’s social well-being. There is partial mediating effect of optimism, though Sobel test does not support the significance.

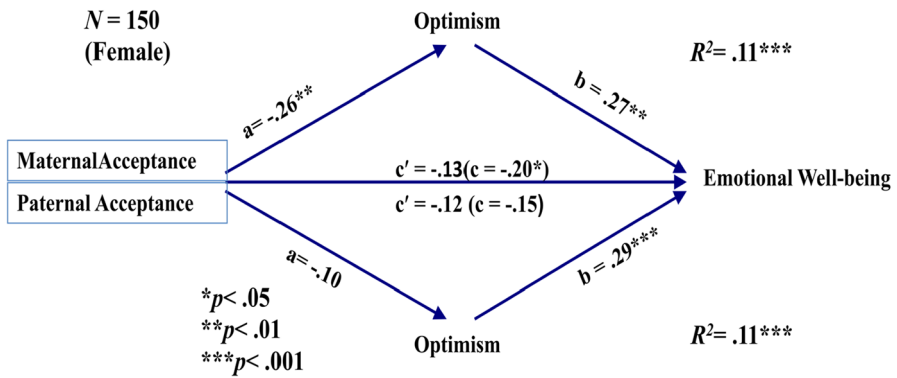
Figure 11 shows that neither maternal nor paternal acceptance has significant independent effect on psychological well-being of female. Therefore, optimism has no mediating effect in the relationship between parental acceptance and psychological well-being for female. But for male (Fig. 12) both maternal ( $\beta = -0.54, p < 0.001$ ) and paternal ( $\beta = -0.41, p < 0.001$ ) acceptance has significant independent effect on psychological well-being. Optimism has partial mediation effect and can explain 36% and 27% variance in the relationship between parental acceptance and psychological well-being for male.



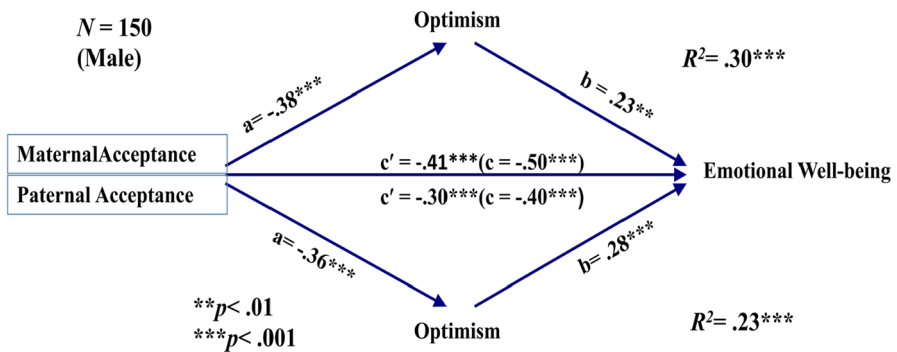
**Fig. 5** Path diagram showing mediating effect of optimism in the relation between parental acceptance and negative affectivity for female



**Fig. 6** Path diagram showing mediating effect of optimism in the relation between parental acceptance and negative affectivity for male



**Fig. 7** Path diagram showing mediating effect of optimism in the relation between maternal and paternal acceptance and emotional well-being of female



**Fig. 8** Path diagram showing mediating effect of optimism in the relation between maternal and paternal acceptance and emotional well-being of male

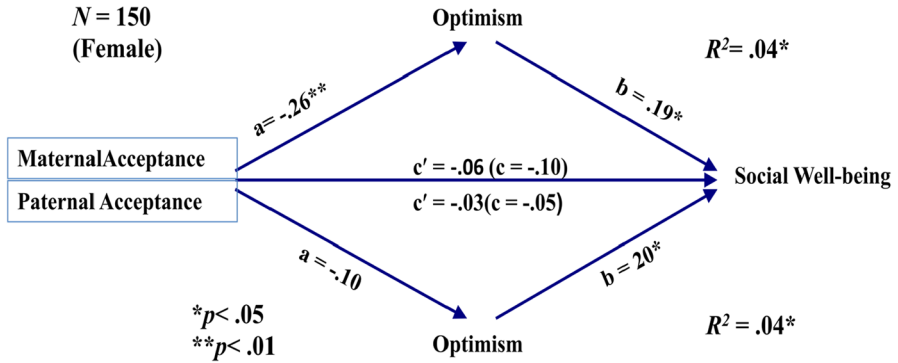


Fig. 9 Path diagram showing mediating effect of optimism in the relation between maternal and paternal acceptance and social well-being of female

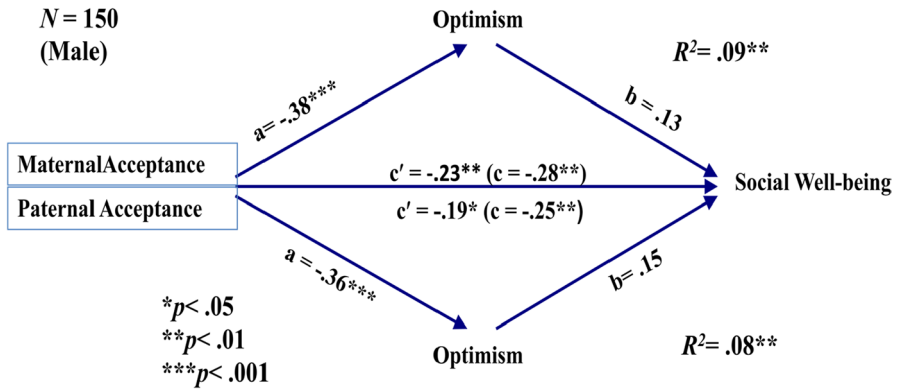


Fig. 10 Path diagram showing mediating effect of optimism in the relation between maternal and paternal acceptance and social well-being of male

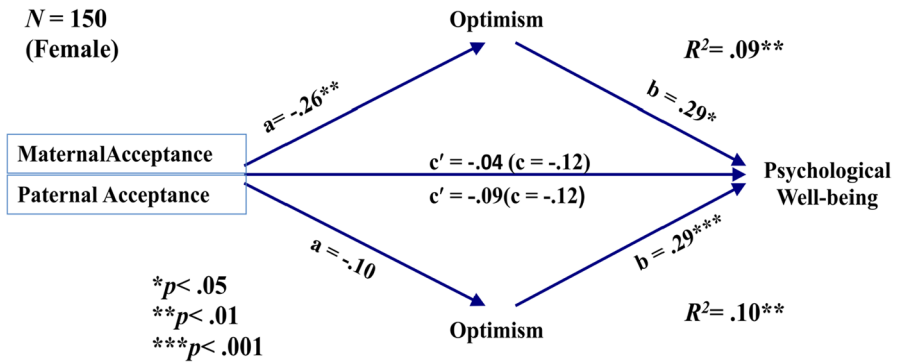
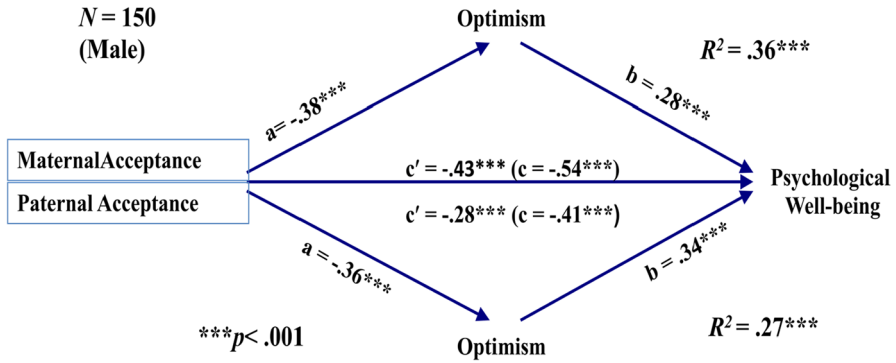


Fig. 11 Path diagram showing mediating effect of optimism in the relation between maternal and paternal acceptance and psychological well-being of female





**Fig. 12** Path diagram showing mediating effect of optimism in the relation between maternal and paternal acceptance and psychological well-being of male

## Discussion

The current study was designed to achieve three objectives. The first objective was to explore the relationships between maternal acceptance, paternal acceptance, optimism, and well-being (life satisfaction, positive negative affect, emotional, social, and psychological well-being). Results of the study revealed that parental acceptance is significantly correlated with male and female optimism and well-being. Findings of the present study suggested maternal acceptance has significant positive correlation with optimism among male and female but paternal acceptance is only positively related with male optimism not in female to become more optimistic. Besides this, current study revealed that maternal acceptance is more strongly associated with wellbeing of male compared to female, although previous study found that paternal care was more strongly associated with well-being than maternal care (Stafford et al., 2016). In the cultural context of Bangladesh, male and female children are not treated equally. Most of the parents have a desire for a male child and female are neglected in almost all areas of their life that starts from family (Hossain, Mani, & Islam, 2015). Father and mother both parents give more importance to their male child and father shows extra attention, love and care for male. This extra love and care make them more optimistic that has direct effect on overall well-being of a male. Results also showed that the more the men and women perceive themselves as optimistic the more they develop well-being. These findings are consistent with that of a few other studies which showed that optimism, maternal acceptance, paternal acceptance, and well-being were positively correlated with one another (Chang, 2002; Hjelle et al., 1996; Huppert et al., 2011). Thus, findings of this research confirmed the first hypothesis.

The second objective was to explore whether maternal acceptance, paternal acceptance, and optimism can jointly predict well-being. Results showed that these variables can significantly predict well-being of both male and female. Perceived maternal and paternal acceptance has a pivotal role in the development of well-being of an individual compared to perceived maternal and paternal

rejection. Parental acceptance gives a feeling of trust, security and control over the life and boost up the overall satisfaction of life. Besides, it promotes competence and personal, social and psychological well-being (Prasad, & Kumari-Sinha, 2017). Individual with high optimism experience their life with more positive way and are satisfied with their life that are the component of subjective well-being. In addition, optimism is a significant predictor of well-being that motivates individuals to build a positive aspect of life. These findings are also supported by the previous studies (Cacioppo et al., 2013; Ferguson, & Goodwin, 2010; Khaleque, 2002; Rasmi et al., 2012). Studies suggest that parental acceptance or rejection plays significant role in psychological well-being of young adults (Khan, 2011) and well-being has direct relationship with maternal acceptance and rejection (Prasad & Kumari-Sinha, 2017).

The third objective of the present study was to explore whether optimism mediates the relation between parental acceptance and well-being of young adults. The main findings of the current study support the mediating role of optimism between parental acceptance and well-being. This finding suggests that parental acceptance works in connection with dispositional optimism and should not be interpreted as a unique contributing factor of well-being.

In the present study, two different significant findings were revealed against the third objective. First, results show that optimism partially mediates the relationship between maternal acceptance and well-being for both male and female. This finding was supported by previous research which found that optimism plays a unique mediating role in developing subjective well-being (Liu, Cheng, Hsu, Chen, Liu, & Yu, 2018). These findings are very similar with the attachment theory of Bowlby (1969, 1988). While some studies have suggested that secure attachment with parents, especially with mothers, were significantly related to the well-being of children (Graham, 2006) and also secure attachment would appear to lie at the very foundation of an optimism in everyday life (Bennett, 2015).

Second, optimism has partial mediating effect in the relationship between paternal acceptance and well-being only for male. These findings are in partial agreement with the growing body of research. For example, cross-cultural research shows that perceived paternal acceptance often has as great and sometimes greater impact on child and adult development than perceived maternal acceptance (Parmar, & Rohner, 2005, 2008; Veneziano, 2003). Evidence also found that paternal love and care was more strongly associated with well-being of adult than maternal care (Stafford et al., 2016). Flouri and Buchanan (2003) reported that both father and mother's involvements were related to offspring's happiness but father's involvement proved to be a significant contributor to the well-being of adolescents. They also found no discriminatory impacts of parental love on sons and daughter which is not supported by the present study. Rohner and Khaleque (2005) reported that paternal acceptance provides a child with the feelings of belongingness, security, and confidence that help it adjust psychologically at different stage of life. But they found no gender difference in case of paternal love. Our present study shows that father's love helps to create optimism in male but not in female. So, optimism has different mediating effect in the relation between paternal acceptance and well-being for male and female which is partly supported by a study of Imam and Shaik (2005). However,

previous study showed that the mediating effect of optimism did not differ between male and female (Ho, Cheung, & Cheung, 2010).

Apart from that, the family systems in the majority of Asian countries are patriarchal (Chakraborty, & Kim, 2010; Chung et al., 2007). In a patriarchal society, like Bangladesh, the father is perceived as having more power and prestige than the mother (Chowdhury, 2004; Chowdhury, & Bairagi, 1990; Uddin et al., 2014). Not only in Asia, but also in Western countries, fathers favor sons over daughters (Francis, 2016). As a result, it's plausible that paternal acceptance fosters optimism in males, and which in turn mediates the association between paternal acceptance and the well-being of the young adults.

According to the findings of this study, paternal and maternal affection differs for male and female children. The parental acceptance boosts the overall well-being of younger adults through the mediating effect of optimism that confirmed the existing hypothesis of the present research. In Bangladesh, there is a considerable gender difference in how children perceive parental love and how they develop optimism, implying that parental love varies from child to child when it comes to creating optimism.

### Limitations and suggestions

The present study has several limitations. First, this study used a cross-sectional approach rather than a longitudinal approach. As a result, it is uncertain whether the perception of parental acceptance-rejection would change with the growing age when they become parents themselves. It is likely that the perceptions of attachment relationships and their effects on well-being differed since they were young adults. Second, exclusively subjective questionnaires were used to collect data. Third, the memories of childhood experiences are only used to provide information regarding early attachment relationships. Fourth, the sample was drawn from a single university, which limits the scope of generalization to the entire population.

### Implications

Despite the limitations mentioned above, the findings of this study can be useful in a variety of ways. The current study adds to our understanding of how parental acceptance and rejection affects the well-being of young adults. Researchers and practitioners who are interested in study the impact of early childhood attachment bonds on people's well-being later in life may find these data interesting. Differences in the effects of maternal and paternal love are also significant results that reflect our society. That is to say, fathers instill optimism in males but not in females, implying that fathers continue to expect and inspire male children in contemporary society. On the other hand, mothers' love appears equal for both male and female children. Although the scenario is changing, these findings would help to take further steps to remove gender differences from Bangladeshi culture.

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