Dunia Keperawatan: Jurnal Keperawatan dan Kesehatan @JDK 2025
DOI: 10.20527/dk.v13i1.800 eISSN: 2541–5980; pISSN: 2337-8212
Received July 2024, Accepted March 2025

The Relationship Between Family Satisfaction and Adolescents' Mental Health, Stress, and Depression

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ABSTRACT
The family plays a crucial role in supporting the physical and psychosocial development of adolescents. This study employed a quantitative correlational approach to examine the relationship between family satisfaction and adolescents' mental health status, stress, and depression. The research involved 205 adolescents aged 12–18 years in Ruteng, Manggarai, East Nusa Tenggara (NTT). Data were collected through questionnaires distributed to participants via Google Forms. The results showed significant relationships between family satisfaction and mental health status (p-value: 0.00), stress (p-value: 0.000), and depression (p-value: 0.000). The findings suggest that adolescents who experience family satisfaction tend to have better mental health. These results emphasize the vital role of the family in preventing mental health issues—especially stress and depression—among adolescents.

Keywords: Adolescents, Depression, Family Satisfaction, Mental Health Status, Stress

Cite this as: Eka AR., Bebok CFM., Iwa KR., and Natul FK. (2025). The Relationship Between Family Satisfaction and Adolescents' Mental Health, Stress, and Depression. Dunia Keperawatan; 13(1): 122-128. DOI: 10.20527/dk.v13i1.800

INTRODUCTION

The family is a crucial part of an individual's life, particularly during the developmental stages from infancy through adolescence. Parental affection plays a significant role in shaping a child's self-concept and supporting their mental health. According to the World Health Organization, 1 in 7 adolescents aged 10–19 years experiences mental health issues, including anxiety, stress, depression, and suicidal thoughts (1). Therefore, identifying the factors that influence mental health is essential for early detection and intervention in adolescent mental health problems.

Adolescence is a vulnerable period, as teenagers are naturally curious and often inclined to experiment with risky or negative behaviors (2). Previous studies have identified various factors influencing mental health issues among adolescents, including family dynamics, peer relationships, negative coping mechanisms, low self-concept, excessive social media use, and social challenges (2–4). Among these, the family plays a particularly significant role, especially during adolescence, when teenagers face numerous emotional and social transitions and depend on their families for guidance and support.

The family serves as the primary source of affection and emotional security. Research has shown that family satisfaction plays a critical role in determining whether adolescents experience mental health problems (4). Adolescents' satisfaction with their families significantly affects the risk of developing depression, anxiety, and stress (2). This is especially important because an adolescent's self-concept—

formed during this crucial stage—has long-term implications for their mental well-being. Both parents contribute uniquely: mothers help build self-confidence, while fathers play a role in emotional regulation and behavior management. However, there remains a lack of research specifically addressing the family's role in promoting adolescent mental health.

In Indonesia, the mental health statistics among adolescents are alarming. According to the United Nations Children's Fund (UNICEF), 1 in 7 Indonesian adolescents aged 10–19 experiences mental health problems such as stress, anxiety, depression, and behavioral disorders (5). These challenges are also prevalent among adolescents in East Nusa Tenggara (NTT), yet there is limited research examining these issues and the influence of family dynamics in this region. This study aims to explore how family characteristics impact the mental health status of adolescents.

METHODS

This study employed a quantitative cross-sectional research method to examine the relationship between family satisfaction and adolescents' mental health status, depression levels, and stress levels. A cross-sectional design is well-suited for exploring associations between factors that contribute to a particular issue (6).

The study population consisted of adolescents in Ruteng, Manggarai, Flores, East Nusa Tenggara (NTT). The sample was selected using purposive sampling, with inclusion criteria being adolescents aged 12–18 years who were willing to participate. A total of 205 respondents completed the questionnaire via Google Forms between March and April 2024.

Four research instruments were used in this study: the Family Satisfaction Scale, the Mental Health Continuum-Short Form (MHC-SF), the Kutcher Adolescent Depression Scale – 11 Item (KADS-11), and the Perceived Stress Scale for Children aged 12–18 (PSS-C). Data analysis was conducted using descriptive statistics and the non-parametric Kendall Tau-B test to assess the relationships and correlations between family satisfaction and adolescents' mental health status, depression, and stress levels.

This study received ethical approval from the Ethics Commission of Universitas Katolik Indonesia Santu Paulus Ruteng (Approval No. 21/USP/R01/K/03/2024).

RESULTS AND DISCUSSION

The study involved 205 adolescents aged 12–18 years. Table 1 presents the respondents' demographic data, including gender, age, education level, family satisfaction, mental health status, depression level, and stress level. The data show that the majority of respondents were female (66.8%), aged 16–18 years (72.7%), and high school students (67.8%). In terms of family satisfaction, most respondents reported being satisfied (66.8%). Regarding mental health status, the majority had a positive mental health status (61.5%), while most experienced mild depression (61%) and moderate stress (29.7%).

The relationship between family satisfaction and mental health status is shown in Table 2. The results indicate a significant relationship between family satisfaction and mental health status (p-value: 0.000). Furthermore, the Kendall Tau-b correlation coefficient of 0.585 suggests a strong and significant association.

Table 1. Respondent Demoghraphic Data (n = 205)

Characteristic	f	%
Age (Years)		
12-13	10	4.9
14-15	46	22.4
16-18	149	72.7
Gender		
Male	68	33.2
Female	137	66.8
Education		
Elementary School	7	3.5
Junior High School	59	28.7
Senior High School	139	67.8
Family Satisfaction		
Dissatisfied	18	8.8
Less Satisfied	50	24.4
Satisfied	137	66.8
Mental Health Status		
Negative	11	5.4
Moderate	68	33.1
Positive	126	61.5
Depression Levels		
Mild	125	61
Moderate	63	30.7
Severe	17	8.3
Stress Level		
Low	124	60.5
Moderate	61	29.7
High	20	9.8

The relationship between family satisfaction and depression levels is also presented in Table 3. The findings show a significant relationship between family satisfaction and depression levels (p-value: 0.000). Additionally, the Kendall Tau-b correlation coefficient of 0.549 indicates a strong and significant association between the two variables.

The relationship between family satisfaction and stress levels is shown in Table 4. The results reveal a significant relationship between family satisfaction and stress levels (p-value: 0.000). Moreover, the Kendall Tau-b correlation coefficient of 0.391 suggests a moderately strong and significant relationship between the two variables.

The study revealed that the majority of respondents were female (66.8%), aged 16–18 years (72.7%), and high school students (67.8%). Adolescents aged 16–18 fall into the late adolescence stage, a period often characterized by a growing preference for external influences such as peer groups over family (7,8). However, family satisfaction—such as feeling content and supported within the family environment—remains particularly important at this stage, especially for adolescent girls. Previous research has shown that adolescent girls are more vulnerable to mental health problems compared to boys (9). Moreover, studies have found that the family plays a significant role in shaping the mental health of adolescent girls (7,9). A positive family environment—marked by close relationships, mutual acceptance, and emotional support—is associated with better mental health outcomes among adolescent girls (10).

This study examined the relationship between family satisfaction and mental health status, depression, and stress levels in adolescents. The results demonstrated a strong and significant relationship between family satisfaction and adolescents' mental health status (p-value: 0.000; Kendall's tau-b: 0.585). Family satisfaction refers to the sense of satisfaction and happiness an individual feels within their family life. Research has shown that adolescents who feel satisfied with their family environment tend to have better mental health. Additionally, studies suggest that adolescents who report high satisfaction with their family relationships are also more likely to perform well academically (11–13).

Table 2. The Relationship Between Family Satisfaction and Mental Health Status

Family Satisfaction	Mental Health Status				P-value	Kendall's tau-b
	Negative	Moderate	Positive	Total		
Dissatisfied	6	11	1	18	0,000	0.585**
Less Satisfied	5	31	5	51		
Satisfied	0	26	110	136		
Total	11	68	126	205		

Table 3. The Relationship Between Family Sastisfaction and Depression Levels

Family Satisfaction	Depression Levels				P-value	Kendall's tau-b
	Severe	Moderate	Mild	Total		
Dissatisfied	10	6	1	18	0,000	0.549**
Less Satisfied	7	27	17	51		
Satisfied	0	30	106	136		
Total	17	63	125	205		

Table 4. The Relationship Between Family Satisfaction and Stress Levels

Family Satisfaction	Stress Levels				P-value	Kendall's tau-b
	High	Moderate	Low	Total		
Dissatisfied	5	12	1	18	0,000	0.391**
Less Satisfied	12	23	15	50		
Satisfied	3	26	108	137		
Total	20	61	124	205		

The study was conducted in Ruteng, Flores, East Nusa Tenggara (NTT), a small town in eastern Indonesia. Families in this region are generally harmonious, with a low divorce rate, which may explain why 66.8% of adolescents reported satisfaction with their family life. Therefore, to improve adolescent mental health, it is essential to promote family satisfaction as a key factor in enhancing mental well-being.

The findings also showed a strong and significant relationship between family satisfaction and depression levels among adolescents (p-value: 0.000; Kendall's tau-b: 0.549). Family satisfaction includes satisfaction with parental relationships and the perception that family members fulfill the emotional and practical needs of adolescents. Previous research has established a strong connection between family dynamics and the prevalence of depression in adolescents. Teenagers raised in loving, supportive environments tend to experience lower levels of depression, while those from unsupportive or conflict-ridden households are more likely to experience higher levels (14). Major depression poses a serious threat to adolescents, particularly because it is a leading factor contributing to suicidal ideation in this age group (15,16). Studies have consistently shown a strong link between depression and suicide (17). As such, family dynamics are a key determinant of adolescent depression, and promoting family satisfaction is crucial for its prevention.

This study also found a moderately strong and significant relationship between family satisfaction and stress levels among adolescents. Previous research has similarly identified a

connection between family conditions and stress in teenagers (4,18). Stress levels tend to be significantly higher among adolescents whose parents frequently argue, use authoritarian parenting styles, or live in low socio-economic conditions (19–21). In addition, difficulties within peer groups have also been shown to contribute significantly to adolescent stress (8). Chronic stress during adolescence can have long-term negative consequences, especially because it affects both the physical and psychosocial well-being of teenagers. Adolescents experiencing high levels of stress often face sleep disturbances, difficulty concentrating, and even digestive problems, all of which can interfere with their learning and daily activities. Therefore, the role of the family is vital in helping adolescents manage and reduce stress.

Nurses play a key role in providing health education to adolescents in the community, particularly by emphasizing the importance of healthy family dynamics. This education should also target parents, starting as early as pregnancy, to highlight the significance of ensuring that children grow up feeling satisfied within their family environment. This includes satisfaction with family satisfaction, the fulfillment of basic needs, and consistent emotional support. Educating parents about the importance of family satisfaction may help reduce the risk of mental health problems in adolescents.

LIMITATIONS

This study used a cross-sectional design, which limits the ability to determine causality between family satisfaction and adolescent mental health outcomes. Additionally, the use of self-reported questionnaires may be subject to response bias. The findings are also limited to adolescents in Ruteng, Flores, and may not be generalizable to other populations.

RESEARCH ETHIC

This study adhered to ethical principles, including informed consent, anonymity, and mutual confidentiality. Ethical clearance was obtained from the Ethics Committee of Catholic University of Santu Paulus (Approval No. 21/USP/R01/K/03/2024).

CONFLICT OF INTEREST

All authors declare that there is no conflict of interest related to this study.

ACKNOWLEDGEMENT

The authors would like to thank the adolescents who participated in this study, as well as the schools and community members in Ruteng, Flores, for their support. Special thanks to the Ethics Commission of Catholic University of Santu Paulus Ruteng Indonesia for granting ethical approval.

CONCLUSION

The results of this study revealed that adolescents who are satisfied with their family relationships—characterized by affection and attention—tend to have better mental health status. Therefore, families play a crucial role in preventing mental health problems, particularly stress and depression among adolescents. When providing health education to new parents, nurses should emphasize the importance of adolescent satisfaction with family dynamics, especially in the context of mental health prevention.

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