

# Perceived Parental Bonding, Emotional Intelligence (EQ) and Spiritual Well-Being of Seminarians in the Diocese of Surabaya

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## ABSTRACT---

### Background

This study aims to investigate the relationships of perceived parental bonding, emotional intelligence (EQ) and spiritual well-being of seminarians in the diocese of Surabaya, Indonesia, and also to examine the impact of the perceived parental bonding to the emotional intelligence (EQ) and spiritual well-being of the seminarians.

### Methods

One hundred and thirty four (134) male seminarians from the three seminaries in the diocese of Surabaya were the respondents of this study. Three questionnaires – Parental Bonding Instrument (PBI) of G. Parker, Hillary Tupling, and L. Brown, the Baron Emotional Intelligence (Baron-EQ:S), and the Spiritual Well-being Scale (SWBS) of Paloutzian and Ellison were administered to the respondents.

### Results

The results reveal that parental bonding is significantly correlated to emotional intelligence (EQ) and spiritual well-being. But, emotional intelligence (EQ) is not significantly correlated to spiritual well-being. Further, the results reveal that 7.6% of the total variance of the respondents' emotional intelligence (EQ) are significantly affected by the perceived maternal overprotection, and 3.7% of the total variance of the respondents' emotional intelligence are significantly affected by the perceived paternal overprotection. Meanwhile, 5.9 % of the respondents' total variance of spiritual well-being are significantly affected by the perceived maternal care.

### Conclusion

Perceived parental bonding significantly correlates and affects both the emotional intelligence (EQ) and spiritual well-being.

**Keywords----** Perceived Parental Bonding, Emotional Intelligence (EQ), Spiritual Well-being.

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## 1. BACKGROUND

“Object Relations Theory” was the first theory on parental (parent-children) relationship. Freud was the first one who developed this theory before it was further developed by the other major psychological theorists, such as Klein, Fairbrain, Winnicott, Kernberg, and Kohut. According to Freud, the infant-mother relationship is unique and established unalterably for a whole lifetime as the prototype of later relationships (Thompson, Ross, A., 2008).

Object relation refers to the emotional bond between the self and another person or object. According to this theory, family formation is the result of innate drives to form and maintain relationships. These fundamental drives are strongly mediated by the way individuals interpret their earliest primary relationships. Then, the interpretation of the relationship between infant and primary figures (particularly the mother) becomes the foundation for later relationships with others (Retrieved from <http://www.treasury.govt.nz/publications/research-policypublications/research-policy/wp/2004/0402/15.htm>).

The development of the concept of perceived parental bonding was influenced by the Parental Attachment Theory of John Bowlby. Bowlby describes the attachment theory as a relationship or bond that one person feels for another person even when the other is not present (Pickard and Nelson-Becker, 2011). He first articulated the attachment theory in 1969 to explain the reason and the process of how infants become emotionally attached to their mother or other primary caregivers. Infants, according to him, build “internal working model of self” (i.e. lovable or unlovable) and others (i.e. reliable, trustworthy) which leads to later interpersonal bonding (Gladstone and Parker, 2005). Rejecting and

ambivalent care-giving will lead infants to a sense of insecurity which may bring about deviations in their personality development.

In the Attachment Theory, he postulates the concept of “separation anxiety” that results from removing infants from their caregivers and “the negative long-term effects of insecure early relationship”. He posits that the loss of a mother figure may be able to generate difficulty in later relationships, self-understanding, and even risk for psychopathological responses. Further, Bowlby argues that a warm and continuous relationship with caregiver in adaptive manner will result in psychological health and well-being throughout life (Thompson, Ross, A., 2008).

Bowlby further explains that if parent responds to a child by being emotionally available, providing comfort, perceptive and responsive, the child will develop a stronger and healthier sense of attachment which is transferred to later relationships. Otherwise, the attachment-building response will be muted if the parent is emotionally unavailable, imperceptive and frightening (Pickard et al., 2011).

Furhermore, he posits that a person’s view of self as capable and worthy, as well as a view of others as caring and trustworthy are instigated by caregivers who respond appropriately to the child’s need for security. He describes that the competency of an individual to interact with the world and his/her efficacy in work is associated with the perception of self as valuable and self-sufficient. Therefore, the perception of others as responsive, trustworthy, and caring is important in social competence for a child to interact with peers (Kenny, Griffiths, and Grossman, 2005).

Further research on parental attachment by Mary Ainsworth (1972, 1973) found that the attachment behavior is primarily characterized by proximity seeking, the secure base effect, and separation protest. She identifies three styles of attachment behavior: a) secure attachment (developmental health) which is marked by seeking proximity to/finding comfort from a carer after distress; b) anxious-resistant attachment which is characterized by ambivalence, clinging behavior by the child, and c) anxious-avoidant attachment which is consistent with the child’s self-reliant and self-contained behavior (Miner, 2009).

Perceived parental bonding itself, according to Gordon Parker (1979), can be described as children’s perception of parent-child relationship in terms of parent’s attitudes and behavior toward their children. The parent’s attitudes and behavior towards their children establish the parent-child relationship. Therefore, perceived parental bonding does not merely refer to the characteristics of the parents or parenting style (e.g. psychological and cultural influences), nor just the characteristics of the child (e.g. individual differences in attachment behavior). Perceived parental bonding is broadly influenced by both. It is also influenced by the reciprocal, dynamic and evolving relationship between the child and the parent (Gladstone & Parker, 2005).

The theory of perceived parental bonding was first proposed by Gordon Parker, Hilary Tupling, and L.B. Brown as a basis for the perceived parental bonding Instrument (PBI). This instrument was designed to measure the attitudes and behavior of parents (parental characteristic) which are perceived by the children during the first 16 years of life. In this theory, it is believed that what is perceived is likely to influence significantly the development of the children. Thus, it represents an overall view of parent-child bonding during these years of development (Daire, Turk, Johnson, & Domingues, 2012).

Numerous studies have revealed that perceived parental bonding is associated with various types of psychopathological problems. A study done by Handa and his colleagues from the University of Nagoya, Japan, discovered the relationship between the low level of perceived parental bonding, low level of education, and woman’s prolonged depression (Handa, Ito, Tsuda, Ogawa, Osawa, 2009). Female patients with low perceived paternal care marked by “affectionless control” and with low level of education, have a higher risk of prolonged depression than females who receive “optimal parenting”.

Meites, Ingram and Siegle (2011) investigated the relationship between the factors of perceived parental bonding and the specific aspects of depression and anxiety. The research reveals that adequate bonding in terms of care and overprotection is assumed as a psychological foundation for healthy functioning in adulthood. On the other hand, disrupted perceived parental bonding, which is defined as lower levels of care (rejection and neglect) and overprotection (controlling and intrusive behavior) has been linked with the psychopathological development of depression and anxiety.

Further research done by Bahreini and his colleagues points out the impact of perceived parental bonding on depression and self-esteem in adolescence. The result of the research shows that the interactive combination of low care and high overprotection has a significant relationship with depression and low self-esteem in female adolescents. It also reveals that in either boys or girls with parental low care, depression and low self-esteem are more common (Bahreini, Akaberian, Godsbin, Yazdankhah, & Mohamaddi, 2011).

The year before that, a research on the relation between perceived parental bonding and self-esteem had already been done by Yamawaki, Nelson, and Omori (2010), using structural equation modelling procedures. They found out that self-esteem fully mediated the relation of perceived parental bonding and general mental health. This research was also able to demonstrate the mechanism of how perceived parental bonding influences adults' psychological well-being.

Daire and his colleagues (2012) examined the effect of perceived parental bonding on adolescent substance abused. Their study reveals two findings; first, the levels of perceived care were higher in children raised by single mothers or remarried mothers. Second, there was a significant relationship between higher levels of care and the earlier onset of alcohol use. These findings mean that the adolescents from divorced parents enjoy more independence, power, and responsibility in decision making than those from united families. This might be because the parental relationships established by the single and remarried mothers are less hierarchical and more permissive for their adolescents to experience various behavior (Daire, Turk, Johnson, & Domingues, 2012)

Siomos and his friends, in the same year, investigated the impact of perceived parental bonding on the internet addiction of adolescent students. They found out that the mother's and father's care correlate with lower scores, while overprotection correlates with higher scores in the addiction measures. Internet addiction has increased in this population where there are no preventive attempts and this increase was parallel to an increase in internet availability. The three online activities most associated with internet addiction were watching online pornography, online gambling and online gaming (Siomos, Evaggelia, & Lamprou, 2012).

Another research by Raudino and his colleagues looked at the relationship of perceived parental bonding and adjustment problem. They found out that the quality of parent-child relationships in adolescence is modestly but also pervasively related to later psychosocial functioning in adulthood. The findings also suggested that the substantial amount of the association is explained by social and contextual factors that were correlated with adolescent reports of parent-child relationships, such as family socio-demography, family functioning, exposure to child abuse, and child characteristics (Raudino, Ferguson, Horword, 2013).

Cella and her colleague from the Department of Psychology, Second University of Naples, Caserta, Italy, investigated the relationship between perceived parental bonding and self-concept as well as the effect of both variables on eating disturbances vulnerability, utilizing a testing-mediation model. The result of the research reveals that there is a link between perceived parental bonding (marked by low perceived paternal care and by maternal overprotection) and eating disturbance such as the drive for thinness. The link between them was found very significant and perfectly mediated by adolescent's self-concept. The research also shows that the impact of self-concept on the drive for thinness was moderated by body mass index and gender of the participants, but not by their age (Cella, Lannaccone, Lotrufo, 2013).

Another study attempted to find out the correlation between perceived parental bonding and symptoms of paranoia and depression with a testing-mediation model done by Valiente and his friends from different universities in Madrid, Spain. The result of the research points out, that lack of parental care and negative self-evaluations about the self is associated with the symptoms of depression. It was also found that parental overprotection and negative evaluations about others are associated with paranoid symptoms. Furthermore, negative evaluation about the self and negative evaluations about others fully mediated the correlation between parental overprotection and paranoia. While the negative evaluations about the self, partially mediated the relationship between the lack of parental care and depression. With these findings, the research suggests that different patterns of parental systems contribute to the different dysfunctional schemas which can lead to either paranoia or depression (Valiente, Romero, Hervas, Spinosa 2014)

In association with Emotional intelligence, a research done by Asghary and Besharat (2011) reveals that all dimensions of parenting are positively associated with emotional intelligence and its components. A perceived warmth and autonomy support, especially of the mother, can predict the changes of emotional intelligence. Thus, based on the findings of this research, it can be said that perceived warmth plays a key role in emotional intelligence growth.

Further research on the correlation between perceived parental bonding and emotional intelligence was done by Abdullahi, Abu Thallib, Motalebi (2013). They were able to show how the perceived parental bonding correlates to Emotional intelligence. Their study reveals that there is correlation between affectionate constraint and optimal parenting with high scores of Emotional intelligence. On the contrary, no association exists between affectionless control and neglectful parenting with high scores of Emotional intelligence. Other findings show that affectionate constraint parenting is a powerful predictor of high scores for emotional intelligence, and neglectful parenting is a predictor of lower scores on emotional intelligence in adolescents

A study to find out the relationship between the early experiences with caregivers and attachment to God was done by Beck and his colleagues. The result of the study shows that there is a correlation between early experience with

caregivers and religious experiences. Perceived parental bonding was found associated with attachment to God in adolescent students (Beck, Mc. Donald, Allison, Norsworthy, 2005).

Regarding seminarians' attachment, a research done by Duane F. Reinert (2005) revealed that attachment to mother was a key variable related to seminarians' sense of themselves and the quality of their attachment to God. It can be used to predict the seminarians' level of self-esteem and the quality of their relationship with God. An individual style of early attachment with mother may influence the later spiritual experiences in relationship with God.

Further study to figure out the relationship between parental attachment of seminarians and attachment to God, as well as the correlation between the attachment to God with the spiritual well-being done by Limke and Mayfield (2011). This research aimed to examine the independent contribution of attachment to father and attachment to mother on the attachment to God, and, also, to understand the association between attachment to God and spiritual well-being as well. The finding of this research shows that attachment to father predicted attachment to God, and attachment to God predicted the spiritual well-being on both religious and existential well-being.

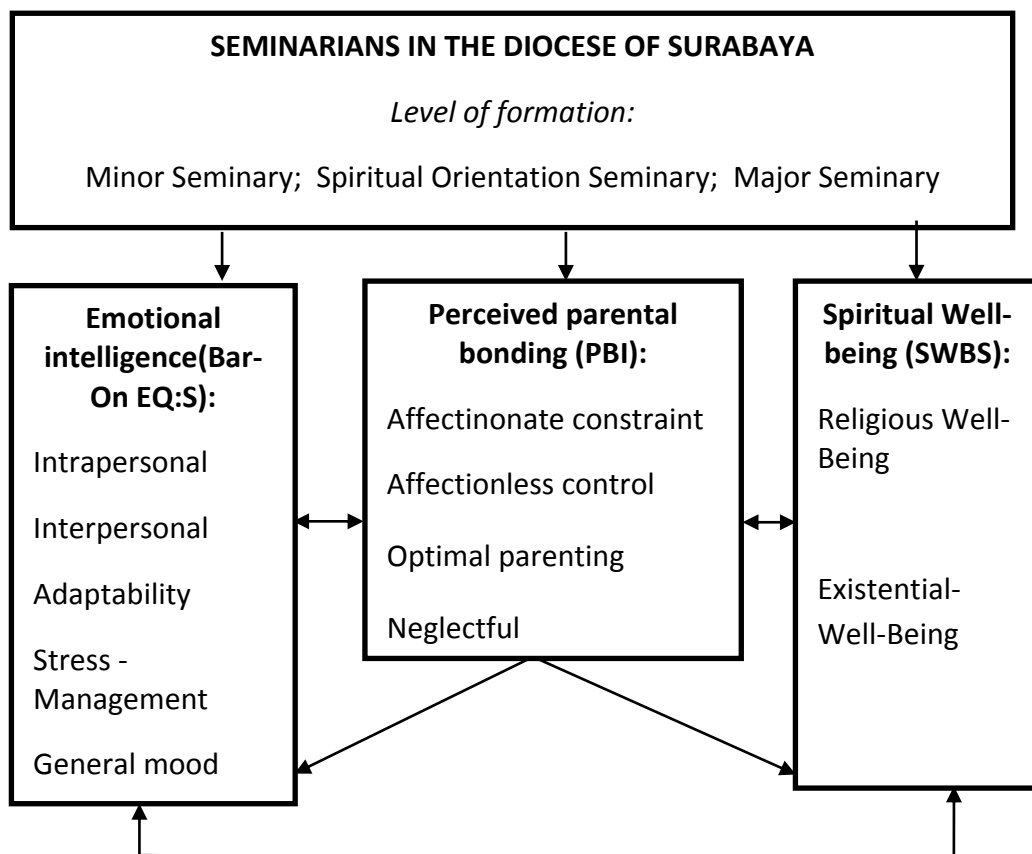
Considering this review we designed the research structure as shown in *figure 1* and propose two hypotheses:

**Hypothesis one:** There is no significant relationship between the scores of the respondents when grouped according to the following variables:

- 1.1 Perceived parental bonding with father and emotional intelligence
- 1.2 Perceived parental bonding with mother and emotional intelligence
- 1.3 Perceived parental bonding with father and spiritual well-being
- 1.4 Perceived parental bonding with mother and spiritual well-being
- 1.5 Emotional intelligence and Spiritual Well-being

**Hypothesis two:** Perceived parental bonding does not have significant impacts to emotional intelligence (EQ) and spiritual well-being.

**Figure 1**



## 2. METHODS

### 2.1 Respondent

We tested the hypotheses by surveying one hundred and seventy nine (134) male seminarians from the three seminaries in the diocese of Surabaya, Indonesia. Among the respondents, 85 of the respondents or 64 % are from the Minor Seminary (ages ranging from 15-21 years old), 15 or 11 % of the respondents are from the Spiritual Orientation Seminary (ages ranging from 19 to 22 years old), and 34 or 25 % of the respondents are from the Major Seminary (ages ranging from 20 to 30 years old). Participation is voluntary. Three questionnaires – Parental Bonding Instrument (PBI) of G. Parker, Hillary Tupling, and L. Brown, Baron Emotional Intelligence (BarOn-EQ:S) and the Spiritual Well-being Scale (SWBS) of Paloutzian and Ellison were administered to the respondents.

### 2.2 Measures

#### 1. Perceived parental bonding Instrument (PBI) of G. Parker, Hillary Tupling, and L. Brown.

This instrument was used to measure perceived parent-child relationship of the seminarians in the diocese of Surabaya during their first 16 years of life. It has proved to be stable over a 20-year period with low impact of mood and life experiences on the stability in the perception of perceived parental bonding. Up to now, the PBI is considered as the most consistent measure to check the parental bond either in clinical or non-clinical setting (Terra et al. 2009).

The PBI is a 25 item questionnaire (12 care items and 13 overprotection items) to measure a retrospective behavior and attitudes of parents reported by the seminarians. These reports represent two factors of parenting: care and overprotection. The care factor measures the extent of affection and warmth of the parent-child relationship, whereas the overprotection factor measures the extent of controlling and overprotective behavior of the parent. This measure is to be completed for both fathers and mothers separately.

Regarding the norms, initially PBI was studied with 65 medical students, 43 psychiatric nurses, 13 technical college students, and 29 parents of school children. Mean scores were 24.9 for care subscale and 13.3 for overprotection subscale. A sample of 410 patients attending three general practitioners revealed care means of 26.9 for women and 23.8 for men, and overprotection means of 13.3 for women and 12.5 for men. Respondent were roughly equivalent in terms of sex.

Regarding reliability and validity, the original data for the PBI were generated from 150 subjects (students and nurses) and 500 general practice attendees. Split-half reliability was .88 for the care scale and .74 for the overprotection scale; valid measures of the four domains of adult PBI. Since then, numerous studies have been done with different populations attesting the psychometric properties of the PBI.

Based on many studies, the PBI has been found to have good reliability and validity. The scores of the PBI have been proven to be independent of respondents' sex, social class, age, and education. The PBI provides also not just a perceived parenting, but a valid assessment of actual parenting (Gladstone & Parker, 2005). The scores of PBI have shown consistency over testing periods. Many published researches over a 25 year period have shown that the PBI has an internal consistency and test-retest reliability. The perceived parental bonding scale is classified into four possibilities of parent-child relationships:

- a) high care and high overprotection (affectionate constraint);
- b) high overprotection and low care (affectionless control);
- c) high care and low overprotection (optimal parenting); and
- d) low care and low overprotection (neglectful parenting)

Assignment to high or low categories are based on the following cut-off scores:

- a. For mothers, a *care* score of 27.0 and a *overprotection* score of 13.5
- b. For fathers, a *care* score of 24.0 and a *overprotection* score of 12.5

#### 2. Baron Emotional Intelligence (BarOn-EQ:S)

Bar-On EQ-i:S, a short version of Bar-On emotional intelligence inventory (Bar-On EQ-i), is a self-report instrument designed to measure emotionally intelligent behavior of individuals ages 16 and older. This instrument was based on the Bar-On model of emotional intelligence Inventory (EQ-i: Bar-On, 1997), the most widely used to measure emotionally intelligent behavior for adult respondents.

Bar-On EQ-i:S has a number of important features: a large normative sample (N exceeds 3,150 respondents), gender and age specific norms, multidimensional scales that assess core features of emotionally intelligent behavior, a general mood scale that is very important for interpreting the overall potential for emotionally intelligent behavior, a positive impression scale for identifying individuals who may be giving an exaggerated positive impression of themselves, an inconsistency index which is useful for detecting an inconsistent response style, excellent reliability and validity (Bar-On, 2002).

This instrument consists of 51 items distributed across eight scales that are inconsistency index, positive impression scale, Total EQ, Intrapersonal EQ, Interpersonal EQ, Stress Management EQ, Adaptability EQ, and General Mood EQ. Two of these are validity indicators; Inconsistency index (that identifies random or careless responding) and positive impression (that indicates the exaggerated impression of the respondents). These are reliable and valid measures of the five domains of adults' emotional intelligence (EQ) with a reliability coefficient range from .76 to .93.



Bar-On EQ-i:S is suitable for adults of all ages, and can be used in educational settings, such as high school, technical school, college school, and university. This instrument uses a five-point Likert-style response format in which the respondents are asked to rate each statement based on their experience. Higher scores indicate the higher emotionally intelligent behavior, positive mood and positive impression.

Regarding the interpretation of the Baron Emotional intelligence, higher Baron EQ:S standard scores suggests higher levels of emotional intelligence and lower standard scores indicate a lower potential for emotionally intelligent behavior. Standard scores allow the best administrator to compare on one scale directly with scores on another. This comparison is only possible if the raw scores are transformed to standard scores.

Standard scores of the Baron Q-i:s has a mean of 100 and a standard deviation of 15. The standard scores used in this instrument are linear standard scores. Linear standard scores do not transform the actual distributions of the variables in any way. While each variable has been transformed to have a mean of 100 and standard deviation of 15. And, the distributions of scale scores do not change. Variables that are not normally distributed in the raw data will continue to be non-normally distributed after the transformation.

High standard scores (130+) reflect atypically well-developed emotional and social capacity, very high standard scores (120-129) reflect an extremely well-developed emotional and social capacity, high scores (110-119) reflect a well-developed emotional and social capacity, average scores (90-109) suggest adequate emotional and social capacity, low scores (80-89) suggest underdeveloped emotional and social capacity, with room of improvement, very low scores (70-79) represent extremely underdeveloped emotional and social capacity, with considerable room for improvement, and markedly low scores (under 70) reflect a typically impaired emotional and social capacity, with extensive room for improvement.

### **3. Spiritual Well-Being of Paloutzian and Ellison**

The spiritual well-being scale was developed by Craig W. Ellison and Raymond E. Paloutzian. This instrument is used to measure a person's quality of life or a subjective state of well-being which is usually understood by people in two senses - a religious sense and an existential sense. These two reflect the people's usage of the word "spirituality" which refers to their relationship with their God (or the spiritual being) and to their sense of satisfaction with life or purpose in life (Paloutzian & Ellison, 2009)

This instrument is non-sectarian (non-religious meaning of spirituality) and is composed of two subscales: Religious Well-Being Scale (RWBS) and Existential Well-Being Scale (EWBS). The total scores of SWBS provides an overall measure of one's SWB, the RWB subscale measures one's well-being in the religious sense, while the EWB subscale measures one's sense of life purpose and life satisfaction.

The SWBS, RWBS, and EWBS have good reliability. Test-retest of RWBS' reliability coefficient across four studies with 1-10 weeks between testing are .96, .99, .96, and .88. While for the EWBS' coefficients are .86, .98, and .73. Total SWBS' coefficients are .93, .99, and .82. The index of internal consistency (coefficient alpha) shows high reliability as well. Across seven samples, the internal consistency range from .82 to .94 (RWB), .7 to .86 (EWB), and .89 to .94 (SWB).

The SWBS is a 20-item questionnaire with each item answered on the six point likert scale. The gradation of the scale ranges from strongly agree, moderately agree, agree, moderately disagree and strongly disagree. Ten of the assessments are used to measure religious well-being (RWB), and another ten questions to measure existential well-being (EWB). Half of the items are negatively worded to control any possible response bias.

Regarding the norms, various studies have been done to yield baseline data for various samples. Samples on which these data are based include pastors, seminary students, church samples from different denominations, college students, nursing students, counseling patients, medical patients, and caregivers of terminally ill (Paloutzian & Ellison, 2009).

With regard to validity, the SWBS has good validity as is evident from the content of the items. It has also shown that SWBS is a good general indicator of well-being and sensitive to the lack of well-being. SWBS was proven to have a positive correlation with positive self-concept, sense of purpose in life, physical health, and emotional adjustment and negatively correlated with ill in health, emotional adjustment, and lack of purpose in life (Ellison, 1983).

As for the interpretation of the scores, spiritual well-being score is a measure of perceived overall well-being. Each item is scored from 1 to 6, with higher number representing greater well-being. The SWBS consists of two types of wording questionnaire, the positively worded items and the negatively worded items. The total scores for positively and negatively worded items is the total scores of spiritual well-being (SWB). A low score represents a low sense of overall spiritual well-being, a moderate score represents a moderate level of spiritual well-being, and a higher score represents a high sense of spiritual well-being.

Religious well-being scores, which reflects the relation with God, are obtained by adding the scores of the odd numbered items. The low scores reflect a sense of unsatisfactory relationships with God, moderate scores reflect a moderate sense of religious well-being, and high scores reflect a positive view of one's relationship with God.

While the existential well-being, which reflects the individual's level of life satisfaction and life purpose is obtained by adding the scores of the even numbered items. Low scores suggest low satisfaction with one's life and possible lack of clarity about one's purpose in life, moderate scores suggest moderate levels of life satisfaction and purpose, and high scores suggest high levels of life satisfaction with one's life and clear sense of purpose.

### 3. RESULT

#### Descriptive Analysis

##### a. Perceived parental bonding with father

The respondents' perceived paternal care (Pcare) and perceived paternal overprotection (POP)

Level of Formation	Pcare		POP		Interpretation
	Mean	SD	Mean	SD	
Minor Seminary	25.22	6.038	12.07	5.565	Affectionate constraint
Spiritual Orientation Sem.	26.33	6.914	9.53	3.925	Optimal parenting
Major Seminary	26.62	6.401	9.71	3.555	Optimal parenting

Cut-off scores for father: a care score of 24.0 and an overprotection score of 12.5

The mean score of the respondents' perceived paternal care from the Minor Seminary is 25.22 (high) and the mean score for the perceived paternal overprotection is 12.07 (high). These indicate that for the respondents in the Minor Seminary, the average perceived parental bonding with father is *affectionate constraint*. This is due to the fact that the seminarians in the Minor Seminary are still adolescents. The fathers of the seminarians in the Minor Seminary are likely worried about their sons' ability to live separately from their families because they are still young.

For the respondents in the Spiritual Orientation Seminary, the mean score for the perceived paternal care is 26.33 (high), and the mean score for the perceived paternal overprotection is 9.53 (low). These indicate that the average of the respondents' perceived parental bonding with their father is *optimal parenting*.

For the respondents in the Major Seminary, the mean score for the perceived paternal care is 26.62 (high), and the mean score for the perceived paternal overprotection is 9.71 (low). These indicate that the average of the respondents' perceived parental bonding with their father is *optimal parenting*.

It can be concluded that the average of the respondents' perceived parental bonding with their fathers in the Minor Seminary is *affectionate constraint*. While in the Spiritual Orientation Seminary and the Major Seminary, the average of the perceived parental bonding with their fathers is *optimal parenting*.

##### b. Perceived parental bonding with mother

The respondents' perceived maternal care (Mcare) and perceived maternal overprotection (MOP)

Levels of Formation	Mcare		MOP		Perceived Maternal bonding
	Mean	SD	Mean	SD	
Minor Seminary	28.55	5.245	16.33	4.975	Affectionate constraint
Spiritual Orientation Sem.	31.6	3.089	10.2	2.077	Optimal parenting
Major Seminary	31.88	2.409	10.24	2.606	Optimal parenting

Cut-off scores for mother: a care score of 27.0 and an overprotection score of 13.5

For the respondents in the Minor Seminary, the mean score of the perceived maternal care is 28.55 (high), and the mean score of the perceived maternal overprotection is 16.33 (high). These indicate that the average perceived parental bonding with the mothers of the respondents in the Minor Seminary is *affectionate constraint*.

Meanwhile, for the Spiritual Orientation Seminary, the respondents' average perceived parental bonding with their mothers is *optimal parenting*. The mean score of the perceived maternal care is 31.6 (high) and the mean score of

the perceived maternal overprotection is 10.2 (low). For the Major Seminary, the average of the respondents' perceived parental bonding with their mothers is *optimal parenting*. The mean score of the perceived maternal care is 31.88 (high) and the mean score of the perceived maternal overprotection is 10.24 (low).

Furthermore, when the mean scores of the perceived parental bonding with their mothers were compared with the perceived parental bonding with their fathers, the mean scores of the respondents' perceived parental bonding with the mothers are much higher than the mean scores of the respondents' parental bonding with the fathers, both for maternal care and maternal overprotection.

**c. Emotional Intelligence (EQ)**

*The respondents in emotional intelligence (EQ) when grouped according to levels of formation*

<i>Level of formation</i>	<i>Mean</i>	<i>SD</i>	<i>Interpretation</i>
<b>Minor Seminary</b>	30.42	3.351	<b>Average</b>
<b>Spiritual Orientation</b>			
<b>Seminary</b>	33.67	2.293	<b>Average</b>
<b>Major Seminary</b>	33.76	3.173	<b>Average</b>

The mean scores of the respondents' level of emotional intelligence (EQ) from the three levels of formation are average, with the highest mean score obtained by the respondents in the Major Seminary (33.76), followed by the mean score of the respondents in the Spiritual Orientation Seminary (33.67), and the lowest score obtained by the respondents in the Minor Seminary (30.42).

**d. Spiritual Well-Being**

*The respondents' spiritual well-being when grouped according to the levels of formation*

<i>Level of formation</i>	<i>Mean</i>	<i>SD</i>	<i>Interpretation</i>
<b>Minor Seminary</b>	94.119.956		<b>Moderate</b>
<b>Spiritual Orientation Sem.</b>	98.88.231		<b>Moderate</b>
<b>Major Seminary</b>	94.067.631		<b>Moderate</b>

*Ranges of scores; 20-40= low, 41-99= moderate, 100-120= high*

The mean scores of the respondents' spiritual well-being from the three levels of formation are moderate, with the highest mean score obtained by the respondents in the Spiritual Orientation Seminary (98.8), followed by the mean score of the respondents in the Minor Seminary (94.11) and the lowest is the mean score of the respondents in the Major Seminary (94.06).

**Hypotheses verification**

This study aims to investigate the relationships of perceived parental bonding, emotional intelligence (EQ) and spiritual well-being of seminarians in the diocese of Surabaya, Indonesia, and also to examine the impact of the perceived parental bonding to the emotional intelligence (EQ) and spiritual well-being of the seminarians.



**The relationship between perceived parental bonding, emotional intelligence (EQ), and spiritual well-being**

**1. Perceived parental bonding with father and emotional intelligence (EQ)**

**a. Perceived paternal care and emotional intelligence (EQ)**

Perceived paternal care	Intra personal	Inter personal	Stress Management	Adaptability	General Mood	Total EQ
<i>r</i>	-.092	.017	.116	.078	.090	<b>.023</b>
<i>p</i> -value	.291	.850	.180	.373	.303	<b>.795</b>

Note: N = 134 ;  $P < .05$

The correlation coefficient between the mean scores of the respondents' perceived paternal care and their levels of emotional intelligence (EQ) is .023 with a p-value .795 which is greater than the level of significance  $\alpha = .05$ . There is no significant correlation between the respondents' perceived paternal care and their emotional intelligence (EQ).

**b. Perceived paternal overprotection and emotional intelligence (EQ)**

Perceived Overprotection	Intra personal	Inter personal	Stress Management	Adaptability	General Mood	Total EQ
<i>r</i>	-.144	-.133	-.177*	-.134	-.167	<b>-.193*</b>
<i>p</i> -value	.096	.125	.040	.122	.055	<b>.025</b>

Note: N = 134;  $P < .05$

The correlation coefficient between the mean scores of the respondents' perceived paternal overprotection and their levels of emotional intelligence is -.193 with a p-value .025 which is less than the level of significance,  $\alpha = .05$ . There is a significant negative correlation between the respondents' perceived paternal overprotection and emotional intelligence (EQ), also with one of the components of emotional intelligence (EQ), which is the stress management. Therefore, the hypothesis which states that there is no correlation between perceived parental bonding with father and emotional intelligence (EQ) is rejected.

**2. Perceived parental bonding with mother and emotional intelligence (EQ)**

**a. Perceived maternal care and emotional intelligence (EQ)**

Perceived Maternal care	Intra personal	Inter personal	Stress Management	Adaptability	General Mood	Total EQ
<i>r</i>	.178*	.135	.274**	.139	.217*	<b>.072</b>
<i>p</i> -value	.039	.119	.001	.110	.012	<b>.409</b>

Note: N = 134 ;  $P < .05$

The correlation coefficient between the mean scores of the respondents' perceived maternal care and their levels of emotional intelligence (EQ) is .072 with a p-value .409 which is greater than the level of significance  $\alpha = .05$ . There is no significant correlation between the respondents' perceived maternal care and their overall emotional intelligence (EQ).

But, there is a significant positive correlation between perceived maternal care and the intrapersonalsubscale, a very significant positive correlation between the perceived maternal care and stress managementsubscale, and there is a significant positive correlation between perceived maternal care and general moodsubscale.

**b. Perceived maternal overprotection and emotional intelligence (EQ)**

Perceived maternal Overprotection	Intra personal	Inter personal	Stress Management	Adaptability	General Mood	Total EQ
<i>r</i>	-.143	-.291**	-.469**	-.299**	-.396**	-.275**
<i>p</i> -value	.100	.001	.000	.000	.000	.001

Note: N = 134 ;  $P < .05$

The correlation coefficient between the mean scores of the respondents' perceived maternal overprotection and their levels of emotional intelligence (EQ) is - .275 with a p-value .001 which is less than the level of significance,  $\alpha = .05$ . There is a very significant negative correlation between the respondents' perceived maternal overprotection and their emotional intelligence (EQ).

There are very significant negative correlations between maternal overprotection and almost all subscales of emotional intelligence (EQ). The perceived maternal overprotection is not correlated only with the intrapersonal subscale. Therefore, the hypothesis which states that there is no correlation between perceived parental bonding with mother and emotional intelligence is *rejected*.

**3. Perceived parental bonding with father and spiritual well-being**

**a. Perceived parental care and spiritual well-being.**

	<i>r</i>	P-value	Decision	Interpretation
<i>Pcare and SWB</i>	.065	.456	Accept Ho	Not significant

Note: N = 134;  
 $P < .05$

The correlation coefficient between the mean scores of the respondents' perceived paternal care and their levels of spiritual well-being is .065, with a p-value of .456. Since the p-value is greater than the level of significance  $\alpha = .05$ , there is no significant correlation between the respondents' perceived paternal care and their spiritual well-being.

**b. Perceived paternal overprotection and spiritual well-being**

	<i>r</i>	P-value	Decision	Interpretation
<i>POP and SWB</i>	-.035	.685	Accept ho	Not significant

Note: N = 134  $P < .05$

The correlation coefficient between the mean scores of the respondents' perceived paternal overprotection and their levels of spiritual well-being is -.035, with a p-value of .685. Since the p-value is greater than the level of significance  $\alpha = .05$ , it can be concluded that there is no significant correlation between the respondents' perceived paternal overprotection and the respondents' spiritual well-being. Therefore, the hypothesis which states that there is no significant correlation between parental bonding with the father and spiritual well-being is *accepted*.

#### 4. Perceived parental bonding with mother and spiritual well-being

##### a. Perceived maternal care and spiritual well-being

<i>Mcare and SWB</i>	<b>r</b>	<b>P-value</b>	<b>Decision</b>	<b>Interpretation</b>
	<b>.242**</b>	<b>.005</b>	<b>Reject Ho</b>	<b>Significant</b>

Note: N = 134  
P < .05

The correlation coefficient between the mean scores of the respondents' perceived maternal care and the respondents' levels of spiritual well-being is .242 with a p-value of .005. It can be concluded that there is a very significant positive correlation between the respondents' perceived maternal care and the respondents' levels of spiritual well-being. Therefore, the hypothesis which states that there is no significant correlation between the respondents' perceived parental bonding with mother and spiritual well-being is *rejected*.

##### b. Perceived maternal overprotection and spiritual well-being

<i>MOP and SWB</i>	<b>r</b>	<b>P-value</b>	<b>Decision</b>	<b>Interpretation</b>
	<b>-.084</b>	<b>.335</b>	<b>Accept Ho</b>	<b>Not significant</b>

Note: N = 134  
P < .05

The correlation coefficient between the mean scores of the respondents' perceived maternal overprotection and their levels of spiritual well-being is -.084, with a p-value of .335. Since the p-value is greater than the level of significance  $\alpha = .05$ , it can be concluded that there is no significant correlation between the respondents' perceived maternal overprotection and their levels of spiritual well-being.

#### 5. Emotional intelligence (EQ) and spiritual well-being (SWB)

<i>EQ and SWB</i>	<b>r</b>	<b>P-value</b>	<b>Decision</b>	<b>Interpretation</b>
	<b>.054</b>	<b>.534</b>	<b>Accept Ho</b>	<b>Not significant</b>

Note: N = 134  
P < .05

The correlation coefficient between the mean scores of the respondents' levels of emotional intelligence (EQ) and their levels of spiritual well-being is .054 with a p-value .534 which is greater than the level of significance  $\alpha = .05$ . There is no significant correlation between the respondents' level of emotional intelligence (EQ) and their level of spiritual well-being (SWB). Therefore, the hypothesis which states that there is no significant correlation emotional intelligence (EQ) and spiritual well-being is *accepted*.

**The impact of the perceived parental bonding to the emotional intelligence (EQ) and spiritual well-being of the seminarians.**

This section presents only the impact of the perceived parental bonding with father and perceived parental bonding with mother which have a significant correlation to the emotional intelligence (EQ) and spiritual well-being.

**1. Perceived paternal overprotection to emotional intelligence (EQ)**

*The Impact of perceived paternal overprotection to the emotional intelligence (EQ)*

	<i>r<sup>2</sup></i>	<i>p-value</i>	<i>Interpretation</i>
<b>Paternal overprotection</b>	<b>.037</b>	<b>.025</b>	<b>Significantly affected</b>

Note: N = 134  
P < .05

The  $r^2 = 0.037$  indicates that 3.7% of the total variance of the respondents' levels of emotional intelligence are significantly affected by the respondents' perceived paternal overprotection (p-value = .025).

**2. Perceived maternal overprotection to emotional intelligence (EQ)**

*The Impact of perceived maternal overprotection to emotional intelligence (EQ)*

	<i>r<sup>2</sup></i>	<i>p-value</i>	<i>Interpretation</i>
<b>Maternal overprotection</b>	<b>.076</b>	<b>.001</b>	<b>Significantly affected</b>

Note: N = 134  
P < .05

The  $r^2 = .076$  tells us that 7.6 % of the total variance of the respondents' levels of emotional intelligence are significantly affected by the respondents' perceived maternal overprotection (p-value = .026). Based on this result, mothers of the seminarians should not be too overprotective of their sons, because it significantly affects their sons' emotional and social lives.

**3. Perceived maternal care to spiritual well-being**

*The Impact of Perceived maternal care to spiritual well-being*

	<i>r<sup>2</sup></i>	<i>p-value</i>	<i>Interpretation</i>
<b>Maternal Care</b>	<b>0.059</b>	<b>.005</b>	<b>Significantly affected</b>

Note: N = 134  
P < .05

The  $r^2 = 0.059$  indicates that 5.9% of the total variance of the respondents' levels of spiritual well-being are significantly affected by the respondents' perceived maternal care (p-value = .005).

**4. DISCUSSION**

**1. Perceived paternal overprotection and emotional intelligence (EQ)**

There is a significant negative correlation between the respondents' perceived paternal overprotection and emotional intelligence (EQ), also with one of the components of emotional intelligence (EQ), which is the stress management. This finding substantiates the previous research which found that overprotection (controlling and intrusive behavior) linked with the psychopathological development of a person (Meites, Ingram and Siegle, 2011).

Regarding its correlation with stress management, this substantiates the finding of the previous research with non-seminarian respondents which found that there is a significant correlation between high overprotection with depression. The lower level of stress management can be seen as the main cause of the depression state of an individual (Bahreini, Akaberian, Godsbin, Yazdankhah, & Mohamaddi, 2011).

## **2. Perceived maternal care and emotional intelligence (EQ)**

There is no significant correlation between perceived maternal care and overall emotional intelligence (EQ). But, there are a significant positive correlation between perceived maternal care and the intrapersonal subscale, a very significant positive correlation between the perceived maternal care and stress management subscale, and there is a significant positive correlation between perceived maternal care and general mood subscale. These results substantiate the attachment theory which says that a warm and continuous relationship with caregivers (particularly the mothers) in adaptive manner will result in psychological health and well-being throughout life (Thompson, Ross, A., 2008).

## **2. Perceived maternal overprotection and emotional intelligence (EQ)**

There is a very significant negative correlation between the respondents' perceived maternal overprotection and their emotional intelligence (EQ). The statistical analysis also reveals that there are very significant negative correlations between maternal overprotection and almost all subscales of emotional intelligence (EQ). The perceived maternal overprotection is not correlated only with the intrapersonal subscale.

This reaffirms the previous research with non-seminarian respondents which found that parental overprotection (controlling and intrusive behavior) linked with the psychopathological development of many psychological disorders, such as depression and anxiety (Meites, Ingram and Siegle, 2011). This also substantiates another research which states that insecure relationship with the mother may be able to generate difficulty in later relationships, self-understanding, and even risk for psychopathological responses (Thompson, Ross, A., 2008).

## **3. Perceived maternal care and spiritual well-being**

There is a very significant positive correlation between the respondents' perceived maternal care and the respondents' levels of spiritual well-being. This finding substantiates the previous research on parental attachment with respondents seminarians which revealed that the attachment to mother was a key variable related to seminarians' sense of themselves and the quality of their attachment to God (Duane F. Reinert, 2005).

## **4. Emotional intelligence (EQ) and spiritual well-being (SWB)**

There is no significant correlation between the respondents' emotional intelligence (EQ) and their spiritual well-being (SWB). It can be understood because both have the different scope of a person's life. Emotional intelligence refers to the abilities, competencies, and skills related to understanding oneself and others (Bar-On, 2002). Meanwhile, the spiritual well-being refers more on the sense of satisfaction with life or purposes in life.

The spiritual well-being refers to how a person gives meaning to his/her relationship with others/with the environment, and with God (Mark, Christina, and Bruce (Ed.), 2012). Both variables actually have correlation, but not significant so that the high emotional intelligence (EQ) does not automatically or necessarily related to/determine the high level of spiritual well-being of a person.

## **5. The impact of perceived paternal overprotection to emotional intelligence (EQ)**

The  $r^2 = 0.037$  indicates that 3.7% of the total variance of the respondents' levels of emotional intelligence are significantly affected by the respondents' perceived paternal overprotection (p-value = 0.25). Based on this result, fathers of the seminarians should not be too overprotective of their sons because it would significantly affect their emotional and social lives.

## **6. The impact of perceived maternal overprotection to emotional intelligence (EQ)**

The  $r^2 = 0.076$  tells us that 7.6 % of the total variance of the respondents' levels of emotional intelligence are significantly affected by the respondents' perceived maternal overprotection (p-value = .026). Based on this result, mothers of the seminarians should not be too overprotective of their sons, because it significantly affects their sons' emotional and social lives.

## **7. The impact of perceived maternal care to spiritual well-being**

The  $r^2 = 0.059$  indicates that 5.9% of the total variance of the respondents' levels of spiritual well-being are significantly affected by the respondents' perceived maternal care (p-value = .005). It reaffirms the previous interpretation that attachment to mother was a key variable related to seminarians' sense of themselves and the quality of their attachment to God (Reinert, 2005).



## 5. CONCLUSION

Perceived parental bonding significantly correlates and affects both the emotional intelligence (EQ) and spiritual well-being of the seminarians. Parents of the seminarians should be encouraged to proportionally and positively partake in the formation process of their sons by establishing good parental relationship with them. They need to be given a psycho-education on the importance of good parental relationship to the formation of their sons, and how to establish it. On the other hand, the seminarians need to be more aware of the significance of their perceived parental bonding in relation to their formation. There is a great need to integrate the human, intellectual, pastoral, and spiritual formation programs in the three seminaries of the diocese of Surabaya, and to pay more attention to the human formation as the basis for the other formation programs.

## 6. COMPETING INTERESTS AND AUTHOR' S CONTRIBUTION

All authors declare that they have no conflicts of interest.

SC conceptualized and designed the study, collected and interpreted the data, and drafted the manuscript. AJ corrected the analyzed data and modified the manuscript.

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