



**Parental involvement in safeguarding adolescent mental health: the
importance of personality awareness**

Ariz Taufiqurrahman*, Salami Mahmud✉, Fatmawati Fadli***, Syatria
Adymas Pranajaya******

**Postgraduate Student, Universitas Islam Negeri Ar-Raniry Banda Aceh, Indonesia
Email: ariztaufiq1998@gmail.com*

***Universitas Islam Negeri Ar-Raniry Banda Aceh, Indonesia
Email: salami.mahmud@ar-raniry.ac.id*

****School of Psychology, Washington Singer Laboratories, University of Exeter,
United Kingdom
Email: ff316@exeter.ac.uk*

*****Universitas Islam Negeri Sultan Aji Muhammad Idris Samarinda, Indonesia
Email: syatria.adymas@uinsi.ac.id*

ABSTRACT

Adolescents (ages 10–19) face rising mental health challenges globally, including high rates of depression and anxiety. Research suggests that active parental involvement significantly improves adolescents psychological outcomes. For example, a recent meta-analysis found that treatments involving parents yielded better results than youth-only interventions. At the same time, stable personality traits influence adolescents' vulnerability to mental health problems. High neuroticism predicts more depressive symptoms, whereas extraversion and conscientiousness often predict fewer depressive symptoms. However, the role of personality awareness—parents' understanding of their adolescents' individual personality profile—has been underexplored. This conceptual study employs a comprehensive literature review approach to explore the interrelated roles of parental engagement and sensitivity to adolescent personality in collaboratively supporting, promoting, and safeguarding the mental health and psychological well-being of adolescents. We find that (1) parental emotional support and authoritative parenting serve as protective factors; (2) many Indonesian youths report experiencing depression and desiring greater parental understanding; (3) personality-tailored support (e.g., recognizing a shy adolescent's need for gentle communication) could improve outcomes; and (4) integrated programs involving parents in psychoeducation are recommended. These findings suggest that systematically training parents to recognize,

✉ Corresponding author:

Email Address: salami.mahmud@ar-raniry.ac.id

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understand, and respect their adolescents' unique personalities significantly enhances the overall effectiveness and benefits of parental involvement. Concretely, community and school initiatives should include parent-focused components on adolescent personality and mental health. An empathetic parenting approach, based on knowledge of each adolescent's unique personality, can be a key element and important strategy for promoting adolescent well-being.

Keywords: Parental Involvement; Adolescent Mental Health; Personality Traits; Personality Awareness.

ABSTRAK

Remaja (usia 10–19 tahun) menghadapi peningkatan tantangan kesehatan mental secara global, termasuk tingginya angka depresi dan kecemasan. Penelitian menunjukkan bahwa keterlibatan aktif orang tua secara signifikan meningkatkan keberfungsian psikologis remaja. Misalnya, sebuah meta-analisis terbaru menemukan bahwa pengobatan yang melibatkan orang tua memberikan hasil yang lebih baik dibandingkan dengan intervensi yang hanya melibatkan remaja saja. Pada saat yang sama, sifat kepribadian yang stabil memengaruhi kerentanan remaja terhadap masalah kesehatan mental. Neurotisme yang tinggi memprediksi gejala depresi yang lebih banyak, sedangkan ekstrovert dan conscientiousness seringkali memprediksi gejala depresi yang lebih sedikit. Namun, peran kesadaran orang tua terhadap kepribadian individu remaja mereka masih kurang diteliti. Studi konseptual ini menggunakan pendekatan tinjauan literatur yang komprehensif untuk mengeksplorasi peran yang saling terkait antara keterlibatan orang tua dan kepekaan terhadap kepribadian remaja dalam mendukung, mempromosikan, dan menjaga kesehatan mental dan kesejahteraan psikologis remaja secara kolaboratif. Studi ini menemukan bahwa (1) dukungan emosional orang tua dan pola asuh otoritatif berperan sebagai faktor perlindungan; (2) banyak remaja di Indonesia melaporkan mengalami depresi dan menginginkan pemahaman yang lebih besar dari orang tua; (3) dukungan yang disesuaikan dengan kepribadian (misalnya, mengenali kebutuhan komunikasi lembut pada remaja yang pemalu) dapat meningkatkan hasil; dan (4) program terintegrasi yang melibatkan orang tua dalam psikoedukasi sangat direkomendasikan. Temuan ini menunjukkan bahwa pelatihan orang tua secara sistematis untuk mengenali, memahami, dan menghormati kepribadian unik anak remaja mereka secara signifikan meningkatkan efektivitas dan manfaat keterlibatan orang tua secara keseluruhan. Secara konkrit, inisiatif komunitas dan sekolah sebaiknya memasukkan komponen yang berfokus pada orang tua mengenai kepribadian dan kesehatan mental remaja. Pendekatan pengasuhan yang bermuansa empati, yang didasarkan pada pengetahuan tentang kepribadian setiap remaja, dapat menjadi unsur kunci dan strategi penting untuk mempromosikan kesejahteraan remaja.

Kata Kunci: Keterlibatan Orang Tua; Kesehatan Mental Remaja; Ciri-ciri Kepribadian; Kesadaran Diri.

1. INTRODUCTION

Adolescence is a critical developmental stage marked by rapidly changing biological, emotional, cognitive, and social factors that significantly influence behavior, identity formation, and interpersonal relationships (Crosnoe & Johnson, 2011; de Carvalho et al., 2025; Hazen et al., 2008; Rosenblum & Lewis, 2006). Hormonal shifts, evolving brain structures, and increased sensitivity to environmental stimuli contribute to heightened emotional reactivity and vulnerability (Moore & Depue, 2016; Spear, 2009). It is during this transitional period that mental health disorders—such as anxiety, depression, and mood dysregulation—frequently begin to emerge.

These conditions may be triggered or exacerbated by academic pressures, peer influence, family dynamics, and social media exposure (Repetti et al., 2002). Therefore, adolescence represents a pivotal window for early identification, prevention, and intervention to support long-term psychological well-being and resilience (Soleimanpour et al., 2017). Studies worldwide indicate that roughly one-third of adolescents experience depressive symptoms at some point (Yani et al., 2025).

In Indonesia specifically, recent research shows alarmingly high rates of adolescent distress. For example, a survey found that about 29.1% of Indonesian youths have experienced depression, and 7.3% reported significant psychological distress (Yani et al., 2025). Such high prevalence is concerning, given that poor adolescent mental health predicts adverse outcomes—such as suicide risk and substance use—later in life (Fazel & Betancourt, 2018). Despite these trends, many low- and middle-income countries, including Indonesia, have insufficient resources for adolescent mental health care (Mubasyiroh et al., 2024). The global burden of youth mental illness underscores the urgent need to identify protective factors.

Families and parenting clearly shape adolescent well-being. Theory and evidence—such as family systems and attachment models—emphasize that positive family relationships and supportive parenting protect adolescents from mental disorders (Aprilyani et al., 2023; Ni et al., 2024). In contrast, parental conflict or neglect tends to worsen youth psychological health (Peng et al., 2021). An extensive meta-analysis found that interventions involving parents lead to significantly greater improvements in adolescent psychopathology than adolescent-only treatments (Pine et al., 2024). Similarly, a large cross-national study reported that higher levels of parental involvement are associated with a markedly lower likelihood of adolescent psychological distress (Tian et al., 2021).

In Indonesia, adolescents themselves express a strong and persistent need for meaningful parental engagement in their everyday lives (Parker & Nilan, 2013; Sallquist et al., 2010). Qualitative research has shown that young people are not merely seeking supervision or control, but rather open, two-way communication and genuine emotional understanding from their parents. Many adolescents have voiced their hopes for the implementation of mental health programs that deliberately include parents, to strengthen emotional bonds and improve the overall quality of the parent-child relationship (Afandi et al., 2022; Yani et al., 2025).

These insights reflect a broader awareness among Indonesian youth of the crucial role parents play in shaping their mental health outcomes. Thus, the current body of literature strongly supports the view that when parents are actively engaged, emotionally supportive, and sensitive to the unique developmental needs of adolescents, the psychological well-being and resilience of young people are significantly enhanced.

However, a gap remains. Most studies focus on parental actions (e.g., warmth, discipline style) without considering how parents' awareness of their adolescent's individual personality might influence the effectiveness of those actions. Adolescents vary widely in traits such as temperament, sensitivity, and coping style, which shape how they respond to stress and support. For example, high neuroticism in youth is strongly linked to depression, whereas traits like extraversion and conscientiousness tend to buffer against stress (Fu et al., 2024).

Yet it is rarely examined whether parents who understand these personality differences can tailor their involvement to better meet their adolescent's needs. In other words, does "personality awareness" on the part of parents enhance the protective effects of their involvement? This conceptual study seeks to address that question.

This paper presents a comprehensive literature review on parental involvement and adolescent personality factors in the context of mental health. We begin by surveying theoretical frameworks related to parenting styles and adolescent personality development. Next, we examine empirical findings on parental engagement in adolescent mental health—including studies from Indonesia—as well as research on how personality traits relate to adolescent well-being (Fu et al., 2024). Finally, we integrate these strands to explore the potential synergistic role of parental personality awareness in safeguarding adolescent mental health. In doing so, we highlight gaps in the current research and propose directions for policy and future study.

2. LITERATURE REVIEW

2.1. Parental Involvement in Adolescent Mental Health

Family systems and attachment theories assert that the quality of parent–child relationships critically influence adolescent well-being (Matheba, 2025; Roman et al., 2025). Warm, affectionate parenting tends to foster resilience, whereas hostile or inconsistent parenting increases vulnerability to depression and anxiety. Consistent with this, Peng et al., (2021) report that positive parenting dimensions—such as emotional warmth—are associated with higher adolescent self-esteem and better mental health, while negative styles—such as rejection or overcontrol—are linked to youth psychological problems.

Numerous studies have confirmed that authoritative parenting (characterized by high warmth and reasonable control) is associated with the lowest rates of adolescent mental disorders, whereas neglectful or coercive styles predict higher risk. In Indonesia, cultural factors (e.g., collectivism) also shape parenting norms, but cross-cultural evidence suggests that the core benefits of responsive parenting on adolescent outcomes remain robust (Mubasyiroh et al., 2024).

Empirical evidence shows that parental involvement can substantially improve adolescent mental health outcomes. Pine et al., (2024) meta-analysed clinical trials and found that interventions actively involving parents led to significantly greater reductions in adolescent symptoms compared to adolescent-only treatments. The effect was especially strong for externalizing problems (e.g., conduct issues), but was also meaningful overall. In a global survey, Tian et al., (2021) found that adolescents who reported higher parental involvement—such as parents checking homework or knowing their friends—had significantly lower odds of feeling anxious, depressed, or lonely.

Similar patterns hold in Asia. For instance, community-based studies in Indonesia have found that adolescents whose parents are engaged in both their academic and emotional lives

are less likely to experience psychological distress (Martohoenis & Schouler-Ocak, 2023, as cited in Yani et al., 2025).

Moreover, qualitative research with Indonesian adolescents indicates that adolescents view parental understanding and open communication as key sources of support. Many express feelings “hurt” by harsh parenting and report improved well-being when parents listen empathetically (Spytska, 2024). In sum, both quantitative and qualitative literature agree that parental presence, guidance, and emotional support serve as powerful protective factors for adolescent mental health.

2.2. Personality Traits and Adolescent Mental Health

Personality psychology offers insight into why some adolescents may be more resilient or vulnerable than others. The Five-Factor Model (Big Five) identifies broad traits—extraversion, neuroticism, conscientiousness, agreeableness, and openness—that are relatively stable by late adolescence (Karababa, 2025). These traits systematically influence how adolescents perceive stress and interact with others. For example, high neuroticism (a tendency toward anxiety and negative emotions) is a strong predictor of adolescent depression and anxiety, whereas high extraversion and conscientiousness are associated with fewer internalizing problems. Fu et al., (2024) found that neuroticism was positively correlated with depressive symptoms, while extraversion, openness, agreeableness, and conscientiousness all showed negative correlations with depression severity.

Similarly, other studies have documented that adolescents high in neuroticism report more loneliness and self-doubt, whereas agreeable and self-disciplined adolescents tend to report higher self-esteem and better coping (Budiasningrum et al., 2023; Fazel & Betancourt, 2018). This body of work implies that personality traits function as either risk or protective factors. For example, an introverted, sensitive adolescent might suffer more from social isolation, while a confident, outgoing adolescent may be more likely to seek help and social support.

In developmental terms, adolescence is a period of ongoing personality formation. Levels of conscientiousness, agreeableness, and openness tend to increase with age, and individual differences become more pronounced (Mazza et al., 2025). However, the relative rank-ordering of traits remains largely stable. Therefore, understanding a adolescent personality profile—such as whether they are naturally anxious or easy-going—can help predict their likely areas of vulnerability.

What remains underexplored in the literature is how this knowledge could inform parenting practices. For example, if a parent knows their child is highly sensitive or introverted, they might intentionally foster a calmer home environment or prioritize one-on-one communication—strategies that could help prevent mental health challenges. Theoretically, such personality awareness could enhance the effectiveness of parental involvement by aligning support strategies with the adolescent’s unique psychological needs.

2.3. Integrating Parental Involvement and Personality Awareness

Although the research strands on parenting, personality, and adolescent health are well documented individually, few studies integrate them. Evidence suggests that the most robust support occurs when parents both engage actively and are attuned to their adolescent’s

personality characteristics. For instance, Yani et al., (2025) highlight Indonesian adolescents' call for parents to "understand us well" and to receive training in adolescent mental health. These youths believed that informed, empathetic parenting could make coping easier (Massazza et al., 2023). Likewise, effective parent-training programs in Western contexts increasingly include components on understanding adolescent development and temperament (Mwachofi et al., 2020).

In theory, a parent who is knowledgeable about individual personality differences would consciously avoid applying a one-size-fits-all approach to parenting (Passmore et al., 2025). Instead, they would tailor their responses and strategies to suit the unique traits of each adolescent. For example, a conscientious and highly organized adolescent might thrive when parents provide structured support in setting realistic goals and offer reinforcement for task completion (Thompson, 2008).

In contrast, a highly anxious or emotionally sensitive adolescent may require a more nuanced approach—parents who can gently encourage independence, validate emotional experiences and offer consistent emotional reassurance while still monitoring on sources of stress (Henning, 2025). This individualized responsiveness allows for a more attuned and effective parenting style that nurtures adolescent development in a psychologically healthy and supportive environment.

However, empirical gaps persist. Systematic reviews of adolescent mental health interventions rarely disaggregate results by adolescent personality, and parenting-psychotherapy studies seldom report whether parent-training addressed adolescent temperament. However, indirect evidence suggests a potential synergy. For example, family-based therapies for adolescent anxiety often adapt according to the adolescent's coping style. Qualitative evidence from Indonesia implies that when parents learn about mental health—including personality factors—both parent and child experience a stronger connection (Yani et al., 2025).

Thus, this review argues that integrating personality awareness into parental involvement could fill an important gap. Culturally, Indonesian parents may hold beliefs about gender or behaviour that clash with a child's personality. Awareness of the adolescent's unique traits could help parents adjust their expectations and communication strategies. In sum, while authoritative parenting is known to benefit adolescents, its impact may be magnified when parents tailor their approach to the adolescent's personality.

3. METHOD

This study employed a literature review methodology to synthesize existing knowledge on parental involvement, adolescent personality, and adolescent mental health. The purpose of this review was conceptual integration and theory development rather than statistical aggregation of effect sizes. Therefore, although systematic search procedures were applied, this study did not adopt a full Preferred Reporting Items for Systematic Reviews and Meta-Analyses (PRISMA) framework.

PRISMA is primarily designed for highly standardized systematic reviews and meta-analyses that aim to exhaustively identify and statistically pool findings from narrowly defined intervention studies. In contrast, this review aimed to integrate theoretical perspectives, empirical findings, and contextual studies to develop a conceptual framework—personality-

aware parenting—across diverse research designs. Accordingly, a structured narrative-integrative approach was considered methodologically appropriate.

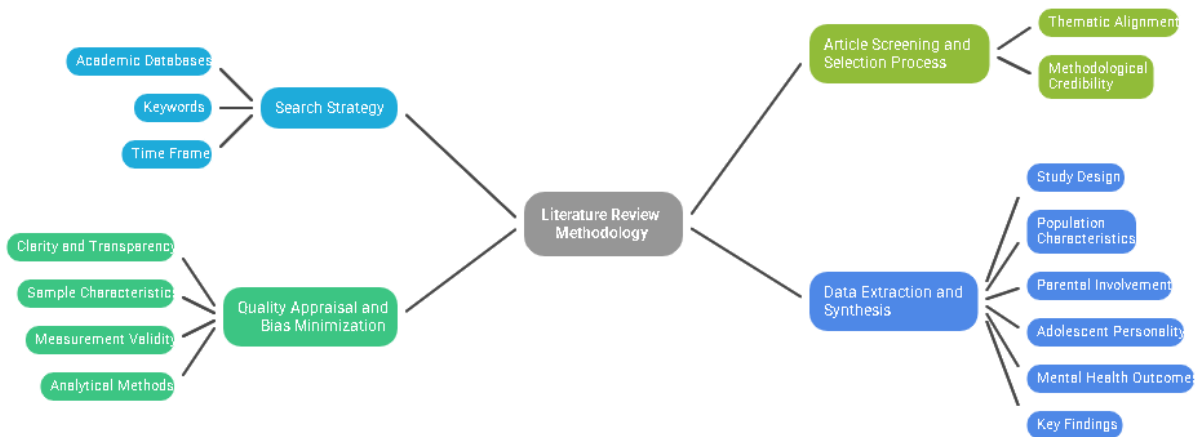


Figure 1. Literature Review Methodology (Source: Data Processing by Authors).

3.1. Search Strategy

We conducted a systematic search of academic databases (including Google Scholar, PubMed, PsycINFO, and Scopus) for publications from the last ten years (2014–2025). Keywords included combinations of “adolescent mental health”, “parental involvement”, “parenting style”, “personality traits”, and “teenagers”. Example search string: (parent* OR family) AND (adolescen*) AND (mental health OR depression OR anxiety) AND (personality OR temperament)). To enhance contextual sensitivity, the term “Indonesia” was included in secondary searches to capture region-specific studies.

3.2. Article Screening and Selection Process

A PRISMA flow diagram was not used in this study. However, article selection followed clearly defined multi-stage screening steps. This increased transparency and helped reduce bias.

Table 1.

Multi-stage screening steps.

Stage 1: Initial Identification	All retrieved records from database searches were compiled. Duplicate entries were removed manually.	
Stage 2: Title and Abstract Screening	Abstracts were screened for thematic relevance. To be retained, studies had to address adolescent mental health outcomes and include a discussion of either parenting behaviours, parental involvement, parenting styles, or adolescent personality factors.	
Stage 3: Full-Text Eligibility Assessment	Full texts were examined using predefined inclusion and exclusion criteria:	
	Inclusion Criteria	Exclusion Criteria
	a. Focus on adolescents aged approximately 10–19 years	a. Studies focused exclusively on children under age 10.

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| (consistent with definitions from the World Health Organization). | b. Editorials, opinion pieces, or non-empirical commentary. |
| b. Empirical, meta-analytic, systematic review, or high-quality qualitative research. | c. Articles lacking sufficient methodological clarity. |
| c. Explicit examination of parental involvement, parenting style, or adolescent personality traits. | |
| d. Reported mental health outcomes (e.g., depression, anxiety, distress, psychological well-being). | |
| e. Published in peer-reviewed journals. | |
| f. Accessible in English or Indonesian. | |
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Source: Data Processing by Authors.

This structured filtering ensured that selected studies were both thematically aligned and methodologically credible.

3.3. *Quality Appraisal and Bias Minimization*

To address possible selection bias, two researchers independently reviewed all candidate studies at each screening stage. They resolved any inclusion disagreements by discussion until reaching a consensus. Rather than applying a rigid numerical scoring system—which may be less suitable for heterogeneous designs—the review employed a methodological robustness assessment based on four core criteria:

- a. Clarity and transparency of research design,
- b. Adequacy of sample characteristics and size,
- c. Validity and reliability of measurement instruments,
- d. Appropriateness of statistical or analytical methods.

Studies demonstrating significant methodological weaknesses were excluded from the core conceptual synthesis. Importantly, studies were not selected based on whether they supported the proposed framework. Findings that presented inconsistent or contradictory results were retained and discussed to preserve analytical balance and reduce confirmation bias. The review aimed for conceptual saturation rather than selective confirmation.

3.4. *Data Extraction and Synthesis*

Data extracted from selected papers included:

- a. Study design,
- b. Population characteristics,
- c. Measures of parental involvement or parenting style,
- d. Measures of adolescent personality or temperament,
- e. Mental health outcomes,
- f. Key findings and theoretical implications.

Special attention was given to studies focusing on Indonesian adolescents to enhance cultural contextualization. Overall, our final sample included international meta-analyses (Pine et al., 2024; Tian et al., 2021), regional cross-sectional studies (Mubasyiroh et al., 2024), and qualitative interviews with Indonesian adolescents (Yani et al., 2025).

Given the diversity of study designs, a narrative synthesis approach was employed. Findings were organized thematically rather than statistically pooled. Evidence was categorized under major analytical domains such as:

- a. Parenting style influences,
- b. Benefits of parental involvement,
- c. Personality and mental health,
- d. Indonesian cultural context.

This thematic organization enabled cross-study comparison, identification of convergent patterns, recognition of methodological differences, and careful interpretation of divergent findings. While this review does not constitute a formal meta-analysis, it adheres to recognized best practices for structured literature reviews, including transparent search procedures, explicit inclusion criteria (Fazel & Betancourt, 2018), dual-review screening, and methodological quality assessment. The chosen approach was deemed most appropriate for developing an integrative conceptual framework linking parental involvement and personality awareness in adolescent mental health.

4. FINDINGS AND DISCUSSION

4.1. Active Parental Involvement Reduces Adolescent Distress

Across studies, higher levels of parental engagement consistently predicted better mental health outcomes in adolescents. For example, Tian et al., (2021) found that adolescents who reported frequent parental involvement—such as help with homework and interest in their emotional lives—were significantly less likely to experience symptoms of anxiety or depression. Similarly, Pine et al., (2024) demonstrated in a meta-analysis that psychological interventions for adolescents had larger effect sizes when parents were included, especially for externalizing problems.

Recent qualitative evidence also suggests that positive parenting practices supported by digital literacy play a crucial role in protecting children from the growing risks of cyber threats, as parents who actively guide their children’s internet use and collaborate with community organizations can strengthen family resilience and support adolescent well-being in an environment increasingly dominated by digital technology (Rosdiana et al., 2025).

In practice, this suggests that routine, empathetic communication and supportive parenting—rather than punitive or neglectful approaches—serve as protective factors. Evidence from qualitative research also shows that emotional support from parents plays a crucial role in maintaining children’s mental health, particularly among victims of bullying, where ongoing encouragement, guidance, and involvement from parents help children rebuild their self-confidence and develop psychological resilience (Saadah et al., 2023). Qualitative reports from Indonesian youths reinforce this, as many adolescents expressed feeling “hurt” by harsh parenting and emphasized that parental understanding was vital to their well-being (Tian et al., 2021).

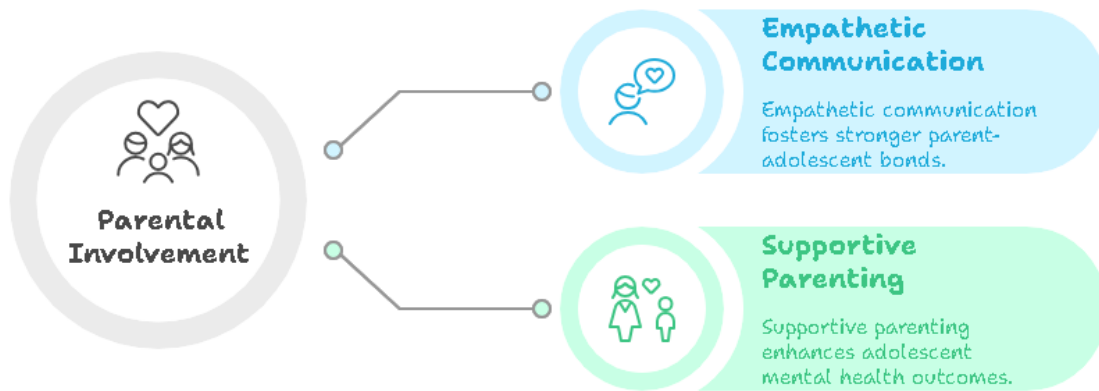


Figure 2. Dimensions of Parental Involvement (Source: Data Processing by Authors).

4.2. High Rates of Mental Health Challenges in Indonesian Adolescents

Indonesian adolescents appear to experience substantial psychological distress, underscoring the need for enhanced parental support. Yani et al., (2025) report that nearly one-third of surveyed Indonesian adolescents had experienced depressive symptoms in the past year, figures consistent with other regional studies. Notably, these Indonesian youths expressed a strong desire for parents to be more aware of and involved in mental health programs (Kuntoro et al., 2017).

This local evidence suggests that cultural stigma or a lack of parental awareness may leave many Indonesian adolescents underserved. It highlights a gap between adolescent needs and existing parental engagement: adolescents themselves have called for parent education about adolescent mental health, implying that increased parental involvement could alleviate some of their distress.



Figure 3. Bridging the Gap In Indonesian Adolescent Mental Health (Source: Data Processing by Authors).

4.3. Personality Traits Influence Adolescent Vulnerability

Individual personality differences systematically influence adolescent mental health. The literature indicates that certain traits predispose adolescents to poorer outcomes. In particular, neuroticism (emotional instability) shows a well-established positive association with adolescent depression and anxiety (Cummings et al., 2014). Conversely, traits such as extraversion, conscientiousness, and agreeableness tend to buffer against stress. For example, Fu et al., (2024) found that these traits correlated with lower depression scores in a large adolescent sample. These findings suggest that a adolescent's personality profile is a significant determinant of how they respond to life stressors and parental support.

For instance, a conscientious adolescent might cope well with parental guidance on study routines, whereas a neurotic adolescent may require additional emotional reassurance. Crucially, parents who recognize these traits differences can adapt their interactions—such as offering extra patience to a sensitive child—potentially improving mental health outcomes.

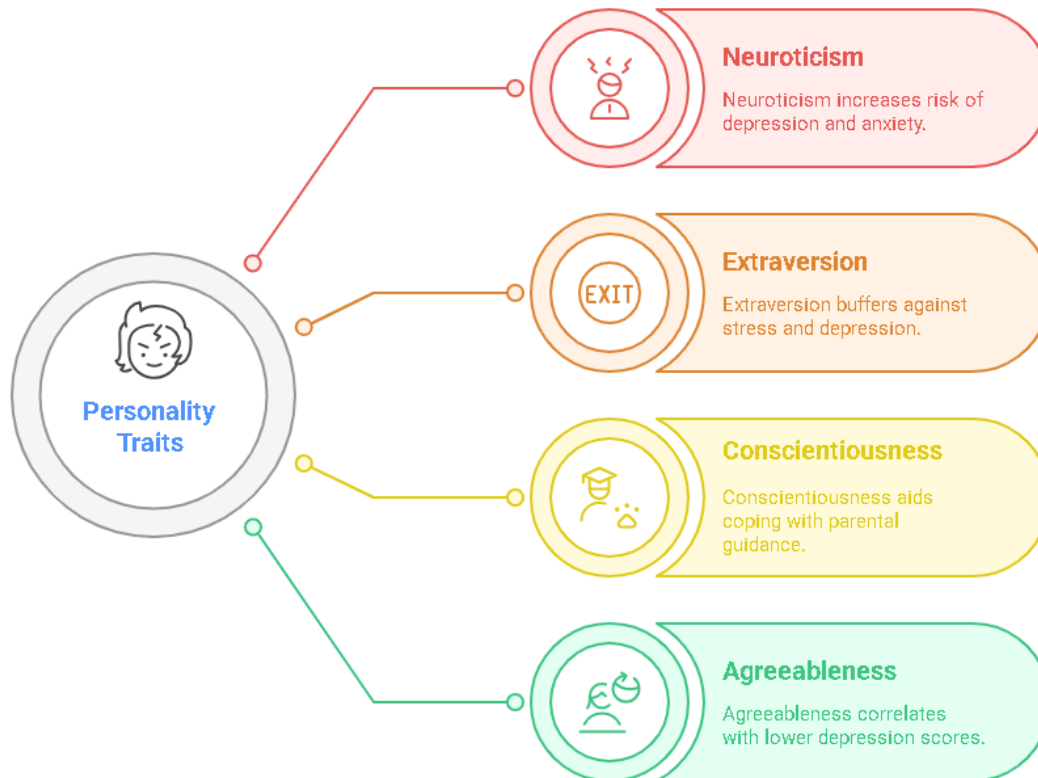


Figure 4. Personality's Impact on Adolescent Mental Health (Source: Data Processing by Authors).

4.4. Integrating Parental Involvement with Personality Awareness

Based on the above, programs that combine parental engagement with personality-tailored support appear most promising. For example, Yani et al., (2025) recommend that adolescent mental health programs include joint parent–adolescent sessions, enabling parents to learn about their adolescents' conditions and personalities. Evidence shows that involving parents in psychoeducation strengthens parent–child bonds and teaches supportive skills without stigmatizing the adolescent (Long & Moorhead, 2022).

A practical approach is to coach parents on recognizing common personality patterns—such as introverted versus extroverted tendencies—and adjusting their expectations accordingly. In other words, parental presence must be complemented by personality-specific literacy. When parents are both present and attuned—such as offering extra reassurance to anxious adolescents or encouraging autonomy in confident ones—they can more effectively mitigate risks.

This integrative perspective extends existing models: it aligns with family-systems theory, which emphasizes that adaptive parenting fosters adolescent resilience, and suggests new directions for intervention research, particularly in evaluating how parent training in personality awareness impacts adolescent mental health.

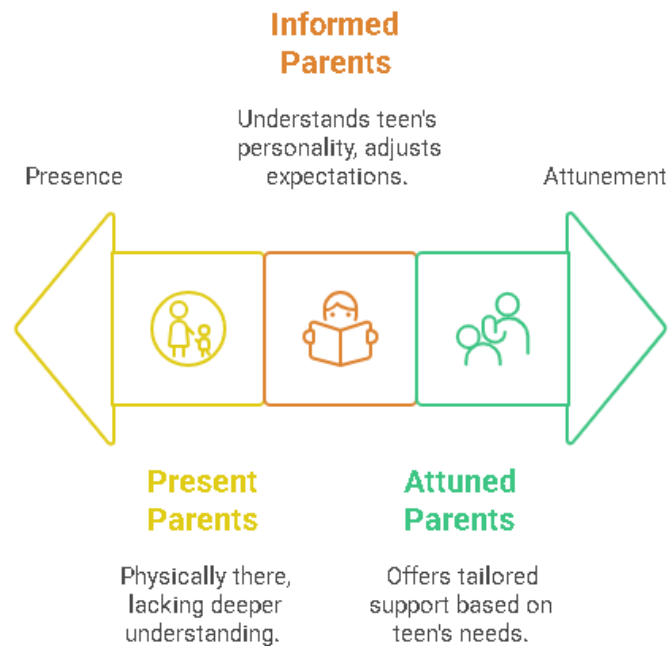


Figure 5. Parental Involvement (Source: Data Processing by Authors).

5. CONCLUSION

This review underscores the indispensable role of parental involvement in adolescent mental health and highlights a novel perspective: parents' awareness of their adolescent's personality can enhance this protective effect. Research consistently shows that adolescents thrive when parents are emotionally warm, authoritative, and actively engaged in their children's lives. We argue that parents who also understand their adolescents temperament can tailor their support more effectively. For example, knowing that a adolescent is highly sensitive (high in neuroticism) might prompt a parent to offer gentle encouragement and avoid criticism, while recognizing that a adolescent is outgoing could allow for more independence. In practice, this means parent-training and family programs should include content on adolescent personality development alongside general parenting skills.

The combined insights from the literature suggest several key points: first, active parental support is a consistent protective factor for adolescent mental health, as supported by global studies; second, Indonesian adolescents report a high need for such support and openness from parents; third, personality traits like neuroticism significantly influence adolescents' mental health trajectories. By synthesizing these threads, our review contributes a theoretical framework—personality-aware parenting—which helps explain variance in parental effectiveness and why some adolescents respond differently to similar parenting approaches.

The implications of this framework are both practical and research oriented. In terms of intervention, schools and community health programs should equip parents not only with general mental health literacy but also with tools to understand personality differences. For instance, workshops could include modules on typical adolescent personality profiles and coping styles, incorporating role-play exercises to practice adjusted communication strategies. This tailored approach may reduce stigma by framing challenges as temperament-related rather than “problems” and strengthen parent-child relationships. Policymakers should note that enhancing parental involvement through culturally appropriate education could amplify

existing initiatives (such as school counselling programs) by bridging home and school environments.

Finally, we recommend future research to empirically test the effects of personality-aware parenting. Longitudinal studies could examine whether parents trained to recognize personality factors observe better mental health outcomes in their adolescents. Diverse methods, including surveys and observational studies, could explore how parents naturally adapt to their children's personalities and which approaches prove most effective. Importantly, the Indonesian context requires attention: further studies should assess how cultural values related to familism, hierarchy, and communication shape both parenting practices and adolescent personality expression.

In conclusion, our review indicates that integrating personality awareness into parental involvement strategies offers a promising avenue for safeguarding adolescent mental health. A nuanced, empathetic parenting approach—grounded in knowledge of each adolescent's personality—may be a key ingredient in promoting the well-being of Indonesia's youth.

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