

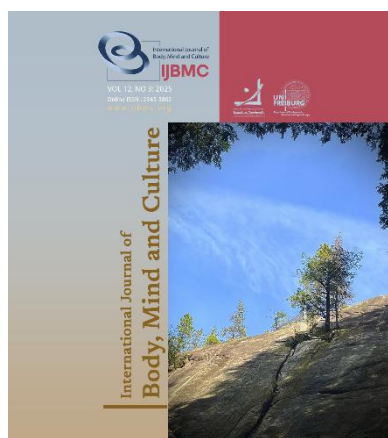
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1 Department of Counseling, Faculty of Humanities and Social Sciences, Science and Research Branch, Islamic Azad University, Tehran, Iran.

2 Department of Assessment and Measurement, Faculty of Psychology and Educational Sciences, Allameh Tabataba'i University, Tehran, Iran.

3 Department of Psychology and Education, Faculty of Humanities, Khatam University, Tehran, Iran.

Corresponding author email address:
a.khodabakhshid@khatam.ac.ir



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Introduction

Dysfunctional families have become a big problem in modern society. While there is no perfect family and people do not choose which family they belong to, the degree of disorganization and lack of cohesion in some

Living in an Insecure and Unstable Atmosphere: A Look at the Lived Experiences of Adolescents in Dysfunctional Families

Ava. Azaditalab¹, Mohammad Reza. Falsafinejad², Anahita. Khodabakhshi-Koolae^{3*}, Lelia. Kashani-Vahid¹

ABSTRACT

Objective: The present study sought to analyze the lived experiences of adolescents in dysfunctional families using a qualitative and descriptive phenomenological approach.

Methods and Materials: The participants were 15 adolescents who were selected using purposive sampling from among adolescents in dysfunctional families in Tehran in 2023. Data were collected through semi-structured interviews and analyzed using Colaizzi's seven-steps method.

Findings: Data analysis revealed 38 subthemes categorized into 7 main themes, including "the experience of instability and insecurity", "the experience of ignorance and abandonment", "the experience of failure", "harming others", "negative self-attributions", and "tendency to risky behaviors", "post-traumatic growth". These challenges can affect the adolescent's cognitive, emotional, and behavioral identity-seeking and contribute to the emergence of many problems.

Conclusion: Thus, professionals need to recognize these challenges and develop effective intervention solutions.

Keywords: lived experiences, adolescents, dysfunctional families, insecure atmosphere.

families is a cause for concern (Mphaphuli, 2023). Almost half of lifetime mental health problems begin at the age of 11-15 and almost three-quarters at the age of 18 (De Girolamo et al., 2012). According to the World Health Organization (WHO) (2021), one in six people is at the age of 10 to 19 years old, and one out of seven people in

this age group faces mental health challenges. Children of this age group are in a critical period of developing healthy habits that are essential for their mental health. Living in difficult situations at this critical age can compromise children's ability to develop mental health (World Health Organization, 2021a). Domestic violence is one of the environmental factors that may not physically affect the children in the family, but it has a direct effect on them. Children who witness violence in the home experience mental, emotional, and social challenges that make them susceptible to mental illness. These children are more likely to be victims of child abuse or violence as adults. The impact of domestic violence on children is likely to manifest in behavioral challenges, low school grades, criminal behavior, and antisocial behavior (Holt et al., 2008). WHO (2021) estimated that 1 billion children aged 2 to 17 years have experienced violence, mostly at home (World Health Organization, 2021b). Accordingly, such children are often referred to as silent victims of violence and abuse. Adolescence is a time of significant changes in physical characteristics, cognitive skills, and emotional and social processes, and these changes may encourage seeking identity as an essential component in the adolescent development period. Identity theorists have found that adolescent identity development involves understanding and reflecting on childhood events and understanding and defining who they are as they move toward adulthood and future changes (Kadhim, 2024; Mordas, 2024). If the adolescent passes this stage (passing from self-discovery to self-development) successfully, he/she will be able to successfully pass through all stages of life and will find purpose and meaning in life. However, in case of failure in shaping the identity at this stage, the adolescent will be alienated and will face problems in completing the tasks of the next stages and will suffer an identity crisis and confusion (Boor Boor et al., 2021; Branje et al., 2021). From early adolescence onwards, adolescents begin to question and discover their identity, that is, the person they are and want to be, the roles they want to play in adulthood, and their place in the community (Meeus et al., 2010). They become aware of their distinctiveness and uniqueness compared to others, coherence and similarity in domains, and consistency across time and situations (van Doeselaar et al., 2018). In addition to the normal levels of identity distress that typically characterize adolescence, some young people face

profound hardships and adversities, and these experiences appear to enhance identity for some but complicate or hinder it for others. However, a few studies have addressed these effects. As an important and small social unit, the family has many functions, such as meeting basic needs, sexual and emotional satisfaction, communication with the environment, gender role-playing, identity search, sense of belonging, and acculturation. However, family conflicts and problems can disrupt these functions (Branje et al., 2021; Meeus et al., 2010; Rezaei et al., 2020; van Doeselaar et al., 2018). People live in the family from childhood to adulthood, indicating that the family plays an essential role in the physical and mental health of its members, especially during children's development period. Children need care that fosters resilience, the ability to grow, modeling appropriate behavior, and coping resources. However, it is difficult to achieve these goals when children receive inadequate parental care (Behere et al., 2017). The family is the primary social unit that provides the foundation of social influence and cohesion. This underlying structure is made up of many aspects that play an important role in shaping individuals and their interactions in larger communities. Every aspect of a person's life is affected by the status of the family to which he/she belongs. Children's actions toward other people can be attributed to the people with whom they often communicate (Bautista, 2024). Divorce has become a common phenomenon in different societies and globally. In other words, many people in different communities are currently struggling with divorce and the number of divorces has increased significantly compared to the past, mostly due to social, cultural, economic, and individual factors (Mphaphuli, 2023). According to Nittle (2021), no parent is perfect, but the problems in dysfunctional families are ignored or denied (Nittle, 2023). Osman et al. (2024) highlighted the significance of family dynamics in the development of the mental health of people, especially in critical periods such as youth. Interactions between family members can have significant effects on people's mental health and affect their coping strategies and resilience (Ahmed Osman et al., 2024). Family dynamics include dysfunctional communication patterns, conflict resolution methods, and emotional expression that can lead to stress, anxiety, and depression in university students. These issues can negatively affect students' academic performance and

overall quality of life. An analysis of the relationship between dysfunctional family dynamics and mental health problems helps to identify the basic factors affecting students' well-being (Behere et al., 2017). It has been found that parental divorce, both separation and legal divorce, increases the risk of psychological distress, depression, and behavioral problems in children and adolescents (Seijo et al., 2016), making it an urgent public health challenge. Research in the field of psychological trauma has focused on adults, and less attention has been paid to the analysis of psychological trauma in children and adolescents (Christa, 2013; Taplin et al., 2014). Moreover, some factors such as drug or alcohol abuse, neglect, marital separation, and dependency cause the child to suffer daily. In addition, growing up in dysfunctional environments can cause deep emotional injuries in the most defenseless members, such as children, due to conflictual relations between family members (Bautista, 2024).

Accordingly, the present study aims to analyze the lived experiences of adolescents in dysfunctional families. Identifying the psychological challenges and experiences of adolescents contributes to predicting their behavioral and psychological problems and adopting effective strategies to cope with them. Furthermore, one of the contributions of the present study is the use of a qualitative and phenomenological approach to exploring the lived experiences of adolescents in dysfunctional families.

Methods and Materials

Study Design and Participants

The present study adopted a qualitative and descriptive phenomenological approach. Most qualitative studies are conducted based on the assumption that it is not possible to gain knowledge about human beings except by describing the human experience as it is described by the people experiencing it. The research population consisted of all adolescents living in Tehran in 2023. The number of participants in the study could not be predicted from the beginning and the sampling continued until the data reached the saturation point. Through regular assessment of the data and asking questions, the researcher decided that the data were saturated and stopped the sampling process (Morrow et al., 2015). Polkinghorne recommends

researchers interview 5 to 25 people who have all experienced a phenomenon (Polkinghorne, 2006). Since it was not possible to survey all the members of the research population and some members were not willing to attend the interviews, the participants were selected through purposive sampling from among the adolescents who volunteered to participate in the study. The number of participants was not specified at the beginning of the study and the sampling process continued until the data saturation point, i.e. where no new data or information were obtained or when the existing data were replicated with additional interviews. The criteria for entering the research were: 1- Teenagers, boys and girls between the ages of 11 and 18, who were studying. 2- Due to family problems, they were referred to counseling centers affiliated to the City Education Organization in Tehran. 3- Absence of physical and mental disabilities based on the student's health record. In order to observe the principle of maximum variation in sampling, the researchers took samples from all the participants with different socio-economic conditions and from different areas of Tehran city.

Instrument

The data collected through interviews and observations were analyzed. The content of the recorded interviews was transcribed on paper. Afterward, the transcribed texts were analyzed. The data were collected from 15 adolescents through semi-structured face-to-face interviews. Each interview was conducted individually for 30 to 40 minutes (820 minutes in total). The interviews were conducted with the agreement of relevant officials. The interviews were conducted in full compliance with ethical protocols (Gorard & Taylor, 2004). The main question asked in the interviews was: What experiences do adolescents have with their families and what do they know about their identity?

Data Analysis

In this qualitative study, the researchers employed bracketing to set aside their own beliefs and preconceived notions, thereby preventing any misrepresentation of the subject's intended meaning, perception, or experience. The credibility of the data was checked by reviewing the content of the interviews and

through peer checking. The audio files of the interviews were transcribed and reviewed word by word several times to get a general impression of their content. Data analysis was performed using Colaizzi's (1978) seven-step analysis method (Morrow et al. 2015). Afterward, the transcripts were read word by word and were divided into meaning units (words, sentences, or paragraphs) and were condensed, abstracted, coded, and labeled consequently. In the next step, the extracted codes were reviewed and placed in several categories and subcategories based on their similarities and differences. The coding procedure was checked by all members of the research team and any disagreements were resolved through discussions and further reviews. The data analysis was conducted simultaneously with

the data collection process and the data and extracted codes were compared regularly. The rigor of the data (Guba and Lincoln, 2001) was enhanced by assigning adequate time to data collection and analysis, prolonged engagement with the participants, immersion in the data, peer and member checking, literature review, registering the research protocol, exact data processing, and matching the data from the participants with other individuals with similar demographic characteristics.

Findings and Results

The participants in this study were 15 adolescents who lived in dysfunctional families. [Table 1](#) shows the participants' demographic characteristics:

Table 1

The participants' demographic characteristics

| Code | Gender | Age | Birth order | Mother's occupation | Father's occupation | Income level |
|------|--------|-----|--------------|---------------------|---------------------|--------------|
| 1 | Female | 17 | Single child | Hairdresser | Translator | Moderate |
| 2 | Male | 11 | First child | Housewife | Salesperson | High |
| 3 | Female | 18 | Second child | Housewife | Real estate agent | Moderate |
| 4 | Female | 12 | First child | Housewife | Company manager | High |
| 5 | Female | 17 | First child | Housewife | Deceased | High |
| 6 | Male | 16 | Second child | Nurse | Driver | Moderate |
| 7 | Female | 18 | First child | Housewife | Teacher | Moderate |
| 8 | Male | 18 | Second child | Teacher | Military officer | Moderate |
| 9 | Female | 17 | Single child | Psychologist | Salesperson | High |
| 10 | Female | 18 | Third child | Housewife | Driver | Low |
| 11 | Male | 13 | Single child | Employee | Businessman | Moderate |
| 12 | Female | 17 | Single child | Dentist | Businessman | High |
| 13 | Female | 17 | First child | Teacher | Computer operator | Moderate |
| 14 | Male | 12 | Single child | Housewife | Employee | Moderate |
| 15 | Female | 17 | First child | Hairdresser | Salesperson | High |

As stated earlier, this study examined the lived experiences and psychological challenges of adolescents living in dysfunctional families. Data analysis revealed 38 subthemes categorized into 7 main themes, including the experience of instability and insecurity, the experience of

ignorance and abandonment, the experience of failure, harming others, negative self-attributions, post-traumatic growth, and tendency to risky behaviors as detailed in [Table 2](#):

Table 2

The main themes and subthemes extracted from the interview with adolescents

| Subthemes | Main themes |
|-------------------------------------|--|
| Fear of fights and arguments | The experience of instability and insecurity |
| Fear of losing parents | |
| Conflicting feelings toward parents | |
| The absence of a safe person | |
| Mistrust in others | |
| Fear of revealing family problems | |
| Fear of engaging in a relationship | The experience of ignorance and abandonment |
| Lack of parental support | |
| Feeling lonely | |

| | |
|---|-----------------------------|
| Parents' preoccupation with their problems | |
| Physical absence of parents | |
| Being rejected by others | |
| Absence of family gatherings | The experience of failure |
| Need for fun and travel | |
| Feeling unhappy | |
| Aimlessness | |
| Despair about the future | |
| Experiencing depression | |
| Academic failure | |
| Doomed to failure | |
| Negligence of the school staff | Harming others |
| Pity of people around | |
| The interference of people around in life affairs | |
| Exploitation of adolescents | |
| Lack of self-worth | Negative self-attributions |
| Feeling like a burden | |
| Feeling guilty | |
| Blame oneself for problems | |
| Suicidal thoughts | Tendency to risky behaviors |
| Membership in bad friend groups | |
| Multiple dysfunctional relationships | |
| Alcohol and drug use | |
| Smoking | |
| Running away from home | |
| Engaging in an occupation | Post-traumatic growth |
| Cognitive maturity | |
| Financial and mental independence | |
| Support from people around | |
| Modeling the competent parent | |

The experience of instability and insecurity

The adolescents in this study reported that they experienced instability and insecurity throughout their lives, including fear of fights and arguments, fear of losing parents, conflicting feelings towards parents, lack of a safe person, mistrust in others, fear of exposing family problems, and fear of establishing a relationship. The experience of instability and insecurity adversely affects the whole life of adolescents and prevents them from advancing their goals in life:

"I'm afraid that there will be a fight right now" (Participant #12).

"I wanted to talk to someone, but there was no one" (Participant #6).

"I don't trust people; I think everyone only thinks about themselves" (Participant #13).

"I loved my father, but when I got older, I realized that he cheated on my mom. I hate him and I don't want to think that he is my father. I never want to see him again" (Participant #11).

The experience of ignorance and abandonment

The adolescents who lived in dysfunctional families reported that they always felt abandoned and neglected. They also complained about the lack of parental support, feeling alone, parents' preoccupation with their

problems, parents' physical absence, and rejection by others:

"It was as if I was left in my problems. At school, I couldn't get along with anyone" (Participant #10).

"My mom used to say that I would not become a doctor and that she didn't support me in any way" (Participant #8).

"I used to feel very lonely, and when I went to the doctor, I was suffering severe stress" (Participant #1).

"I don't see him so much that I want to have anything to say about him, and we only see each other at night" (Participant #3).

The experience of failure

Adolescents living in dysfunctional families have dreams that often turn into eternal regret. These adolescents have also other challenges such as the absence of family gatherings, the need for fun and travel, feeling unhappy, aimlessness, despair towards the future, and experiencing depression:

"I didn't remember any time when the whole family members gathered together. Sometimes my mom wasn't there, sometimes my dad was absent" (Participant #6).

"When our father died, our happiness ended. What good is the school for us? We have to go to work" (Participant #14).

"I don't seem to have any motivation; I wander around without anything to do" (Participant #3).

"I was very pessimistic about the future and I knew everything was over" (Participant #7).

Harmful others

Adolescents living in dysfunctional families have no sense of support and security and thus they are susceptible to harm from others including the neglect of the school staff, the pity of the people around, interference from the people in the adolescent's life, and exploitation of the adolescent:

"Ever since our school principal found out about my family problems, she picks on me and punishes me for anything wrong done by other students. So I would like to get rid of her as soon as possible" (Participant #12).

"The thing that makes me mad is the pity of the people around" (Participant #5).

"I don't trust other people because I feel they are taking advantage of me. They don't understand the value of the time I spend on them and they try to abuse me" (Participant #13).

Negative self-attributions

One of the sufferings that adolescents in dysfunctional families endure for many years is negative self-attributions. They often blame themselves for the circumstances and others also blame them. They also have other problems such as the lack of self-worth, the feeling of being redundant, feeling guilty, and blaming themselves for problems:

"I had a sense of worthlessness as if I was to be blamed for any problem" (Participant #7).

"I blamed myself and thought I was a burden in the family" (Participant #6).

"I blamed myself for everything really; every little thing, all the fights I had with my family, the arguments I had, and the things that bothered them" (Participant #1).

Tendency to engage in risky behaviors

The findings of the present study showed that adolescents who live in dysfunctional families often tend to engage in high-risk behaviors including suicidal thoughts, membership in bad friend groups, multiple dysfunctional relationships, alcohol and drug use, smoking, and running away from home:

"I can't think about not having my mother at all. If something happens to her, God forbid, I will kill myself" (Participant #11).

"That's why I used to go to the park a lot. I met new friends there, and I started to engage in doing wrong things. Sometimes I went home late at night and I drank and smoked cigarettes with my friends" (Participant #13).

"I didn't want to be at home at all. Every day I was thinking about running away from home" (Participant #10).

Post-traumatic growth

Most of the participants stated that after going through many sufferings they could open a window of hope for themselves by finding a job, cognitive maturity, financial and mental independence, receiving support from people around, and modeling a competent parent:

"What's the use of the school, we have to go to work" (Participant #11)

"These problems taught me to understand the value of the family. I have to choose the right person and the person I choose as my husband may one day be the father of my child, and to make sure that he is at least a good father rather than a good husband" (Participant #9).

"I want to have enough money to buy clothes and everything I wish" (Participant #3).

"My mother had always many problems in her life. My mother was always a very strong person in her life and I always followed her as a role model" (Participant #4).

Discussion and Conclusion

The findings from the present study suggested that living in a dysfunctional family can have many negative effects on various developmental aspects of adolescents and disrupt the adolescent's attempt to seek identity. One of the main challenges faced by such adolescents is the experience of instability and insecurity. Living in a dysfunctional family creates a turmoil of uncertainty and instability, as well as an unsafe environment for family members. Abuse and neglect affect the child's ability to trust the world, others, and himself/herself (Bautista, 2024). Conflict is an inevitable part of human relationships. However, dysfunctional families model negative ways of conflict management for children, leading to ineffective communication. In dysfunctional families, communication is replaced by yelling, screaming, arguments, and silence (Mphaphuli, 2023). The family affects the child's development and by providing a safe environment, and love for the child, it contributes to inducing the child's development such as

identity, values, norms, and acceptable ethics in the community. The family can also induce affection, social awareness, and trust (Heinrich, 2014). Protecting children from physical and psychological dangers, creating boundaries to ensure the safety of children in dealing with others, and ultimately increasing their various capacities are some parental roles (Siegenthaler et al., 2012). With the occurrence of confusion and mental illness in the parents, these roles are disturbed depending on the gender of the parent, and this problem affects the needs of the children and their fulfillment. In addition, due to the greater presence of the father in the community, his illness is also more visible and has more social consequences. However, as the mother fulfills the emotional needs of the children, her illness disrupts the family and creates an emotional gap in children (Rezaei et al., 2020; Van Santvoort et al., 2015). The children whose parents have been separated may feel that the family that was supposed to be their safe place and refuge has fallen apart. Children in families with severe parental conflicts feel that they are living in an unsafe and dysfunctional environment where their need for stability and security is not met. Divorce of parents can cause feelings of anger, frustration, and anxiety in adolescents. Parental divorce can also affect children's communication and interaction skills and disrupt interpersonal relationships. The tense family atmosphere and severe parental conflicts make adolescents feel stressed and confused. This can lead to damage to communication skills and establishing ineffective relationships with peers and others. Separation, especially early separation, may have negative consequences for youth and can lead to greater distress and vulnerability to peer pressure (Karhina et al., 2023). The adolescents in this study highlighted the experience of not being seen and being abandoned. Faced with parental addiction, children feel that they have lost their parents and are left alone. These feelings can lead to a decrease in the sense of belonging and identity in children. Such children may feel that they do not have a certain place in the family and are rejected from it. As a result, family disturbances can lead to the formation of feelings such as a sense of abandonment, isolation, and lack of belonging in children, negatively affecting the mental and social health of children. Children of parents with serious addiction and substance abuse problems face an accumulation of risk factors due

to biological, psychological, social, and environmental vulnerabilities (Tedgård et al., 2019; Wiig et al., 2017). Studies have shown that parents who use drugs have obvious deficiencies in their performance and role as parents. They have difficulty establishing functional parenting (Tedgård et al., 2019) and a sensitive and supportive relationship with their children (Seijo et al., 2016; Sheikh & Janoff-Bulman, 2010). Children from dysfunctional families may be ridiculed by their peers for their home situation. This increases the risk of their isolation. Growing up in dysfunctional families exposes children to emotional damage that can lead to mental illness. Growing up in a dysfunctional family can also have different negative effects depending on the specific type of dysfunction (Koolae et al., 2014). Divorce makes children not accepted, supported, and respected, which in this case causes emotional and behavioral problems (Taplin et al., 2014). The present study also showed that children living in dysfunctional families have many wishes and desires that cannot be fulfilled, leading the adolescents to frustration and isolation. In such dysfunctional and tense environments, adolescents often do not experience the feeling of security, peace, and intimacy in their relationship with their parents. This makes them unable to easily share their feelings and needs with their parents and get their emotional support. Moreover, constant conflicts between parents and the lack of empathy and mutual understanding cause children and adolescents to feel rejected, mistrusted, and disappointed by their parents. These negative experiences further weaken their relationship with their parents. However, some adolescents in these families, for example, after the separation of their parents, strengthen their relationship with the parent they live with, and this can be due to the need, to escape the feeling of loneliness. However, contrary to the findings of the present study, Thomas and Högnäs (2015) showed that family conflicts, including parental divorce, can affect the educational and occupational status of adolescents (Thomas & Högnäs, 2015). These studies have highlighted the negative aspects of academic and occupational identity. According to Bautista (2024), healthy families tend to return to their normal functioning after going through a life or family crisis. Conversely, in a dysfunctional family, problems are usually long-lasting because children do not have their previous needs met (Bautista, 2024). This issue causes the adolescent to see no hope for the future

life. In addition, severe parental conflicts create a dysfunctional atmosphere in the family, leading to mental and emotional distress for children and preventing them from concentrating on their studies. However, the data in the present study indicated that although the adolescents have negative attitudes towards school due to the conflicts they experience in the family and are very afraid of their future, due to the loneliness they experience, they found more opportunities to think about their academic and career talents and interests and defined their goals accordingly. The adolescents in dysfunctional families reported that they had fear and worry about the future. This is to argue that fear of the future is a special form of anxiety that is characterized by uncertainty, doubt, fear, and stress about frightening changes in the future (Koolae et al., 2014; Wang et al., 2020). People who struggle with fear of the future avoid any plans, are not aware of the humor and do not react to it. Both now and in the future, they feel dysfunctional and unable to deal with challenging situations and their emotional and mental indicators are extremely negative (AlShamlan et al., 2020). Parental addiction, as another destructive factor in the family, can cause instability and emotional insecurity in the child and, as a result, weaken their hope and motivation for the future. Such children may be disappointed and pessimistic about their future. The present study showed that the lack of parental support in dysfunctional families makes the situation more complicated. Such children are deprived of the support of others and are likely to be abused by them. Most of the participants in this study reported the harm caused to them by the people around them. Family disturbances such as parental divorce, parental conflicts, and parental addiction can significantly affect children's social pressure and social acceptance. These family problems often create social labels and negative biases towards these children and adolescents. Parental divorce, as an important family disturbance, can cause discrimination and negative social judgments toward children of divorce. People often see these children as dysfunctional, unstable, and problematic people, which makes them feel rejected and experience social pressure. The participants in this study also reported negative self-attributions and reported that they blamed themselves for their problems. Furthermore, exposure to conflicting behaviors of parents and low self-esteem are positively related to

psychological distress. Accordingly, it can be argued that since shame is rooted in people's childhood, the family plays an important role in forming this feeling. Thus, parents as the most effective members of the family play a vital role in shaping the feeling of shame and guilt in adolescence (Sheikh & Janoff-Bulman, 2010). The family climate plays a critical role in forming people's feelings and beliefs. In families where the prevailing atmosphere is mixed with criticism, blame, non-acceptance, and intolerance of mistakes, there is a high possibility that children will feel shame and guilt. This family atmosphere can instill in the children that they are dysfunctional, inefficient, and can be criticized. As a result, children may not consider themselves worthy of love and acceptance and feel worthless. Besides, parental divorce, conflicts, addictions, and disturbances in the family climate can lead to feelings of shame and guilt in children. These children may blame themselves for these behaviors and feel that they do not deserve the love and attention of their parents. Adolescents who grow up in such an environment often do not experience the feeling of security, stability, and acceptance. This makes them consider themselves dysfunctional, undesirable, and unacceptable, and have low self-esteem. The participants in the study also reported some forms of post-traumatic growth. Sometimes adolescents in dysfunctional families spend more time in their solitude to discover and express their interests because they have experienced high resilience against problems and think more about independence. The family climate, as the first and most important social and emotional environment of a child, plays a vital role in forming children's educational and career goals and aspirations. Therefore, the family climate, as the most important foundation of the child's early experiences, plays a significant role in the formation of their educational and career goals. However, in dysfunctional families, there is a possibility that the adolescent gains a higher strength to endure hardships due to experiencing difficulties and problems in the family, and such a tough environment is effective in their purposefulness and independence. The adolescents in this study pointed to their tendency to engage in high-risk behaviors. It has been noted that family conflicts can also be associated with problematic behaviors of individuals in the family, including alcohol, drug, or other substance use problems (Choo & Shek, 2013; Li et al., 2014). Poor family functioning, along with

psychological factors, can contribute to the development of high-risk behaviors in adolescents. A common development experienced by children raised by substance-abusing parents is trauma, an experience that creates problems in both childhood and adulthood. Growing up in an abusive family increases the risk of exposure to traumatic experiences (Kill'en, 2009; Taplin et al., 2014). Victims often try to escape from their past pain and trauma by engaging in more destructive habits, such as increasing alcohol and drug use or being forced to repeat the wrong behavior (Bautista, 2024).

It can be argued that the family, as the most important social institution, plays a significant role in the development of high-risk behaviors in adolescents. Parental divorce can cause emotional problems, anxiety, depression, and a decrease in self-confidence in adolescents. These factors contribute to adolescents' tendency towards high-risk behaviors such as drug use, high-risk sexual behaviors, and aggression. The findings of this study are constrained in their generalizability due to the abstract nature of the concepts inherent in qualitative research, the specific geographical context and social conditions of Tehran (the capital), as well as the limited number of participants involved.

This study examined the lived experiences of adolescents who grew up in dysfunctional families. The findings from this study revealed various aspects such as the way these adolescents see the world and their experiences, how they relate to others and those who are present in their lives, the way these adolescents manage problems and challenges, and also their personal development and progress in times of conflict and suffering. The insights from this study provide a clear and accurate picture of the challenges and problems faced by adolescents in dysfunctional families. This picture illustrates views about the inherent problems that exist in this type of family structure. Family bonds are known as a key factor that has a great impact on adolescents' lives. Moreover, problems caused by factors such as parental separation, family conflicts, and poor communication within the family are emphasized. Family problems and conflicts and living in a dysfunctional family can disrupt the growth of children and adolescents in all aspects of life and show their effects for years.

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Declaration of Interest

The authors of this article declared no conflict of interest.

Ethical Considerations

The study protocol adhered to the principles outlined in the Helsinki Declaration, which provides guidelines for ethical research involving human participants. Ethical considerations in this study were that participation was entirely optional.

Transparency of Data

In accordance with the principles of transparency and open research, we declare that all data and materials used in this study are available upon request.

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Authors' Contributions

All authors equally contribute to this study.

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