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Original Article

# When the Conflict Reigns: The Moderating Role of Locus of Control on the Relationship Between Inter-Parental Conflict and Paranoid Thinking

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## **ABSTRACT**

Background: Paranoid thinking, characterized by heightened suspiciousness and attribution of hostile intent, is increasingly observed in non-clinical populations, particularly among adolescents and young adults exposed to adverse familial environments. Inter-parental conflict is a well-established psychosocial stressor associated with various internalizing symptoms, yet its specific relationship with paranoid ideation remains underexplored, especially within collectivist cultures. Locus of control, reflecting individual beliefs about personal agency, may moderate the psychological impact of such conflict. Objective: To examine the relationship between inter-parental conflict and paranoid thinking in young adults, and to evaluate whether locus of control moderates this association. Methods: A cross-sectional observational study was conducted with 120 university students aged 18-25 years from the University of Management and Technology, Lahore. Participants completed standardized measures assessing perceived inter-parental conflict, paranoid thinking (R-GPTS), and locus of control. Correlation and moderation analyses were conducted using the PROCESS macro in SPSS, controlling for gender, marital status, and family system. Results: Inter-parental conflict was significantly and positively associated with paranoid thinking (r = 0.38, p < 0.01). Locus of control also showed a significant positive association with both variables. However, moderation analysis indicated that locus of control did not significantly moderate the relationship between inter-parental conflict and paranoid thinking (p = 0.09). Conclusion: Exposure to inter-parental conflict is a significant risk factor for elevated paranoid ideation in young adults. While locus of control is independently related, it does not buffer the impact of parental discord in this population. These findings emphasize the need for family-centered preventive strategies and culturally sensitive psychological assessments.

Keywords: Inter-parental conflict, Paranoid thinking, Locus of control, Young adults, Psychological vulnerability, Family dynamics.

#### INTRODUCTION

Paranoid thinking, often characterized by irrational mistrust, heightened suspiciousness, and misinterpretation of benign social cues as threatening, has been increasingly recognized not only as a clinical concern but also as a subclinical phenomenon prevalent within general populations. Global studies estimate that 15–20% of the general population regularly experiences mild forms of paranoid ideation, reflecting its broader psychological relevance (1). Historically, paranoia was rooted in ancient Greek conceptualizations of madness and has since evolved through psychiatric literature to denote a spectrum of cognitive distortions ranging from transient suspicious thoughts to persistent delusional systems (2, 3). Contemporary psychological models frame paranoid thinking as a response to perceived threat and social adversity, often developing in response to early life stressors, particularly those arising from family dynamics (4, 5).

One such stressor, inter-parental conflict (IPC), has been consistently identified as a critical factor contributing to various internalizing symptoms among children and adolescents, including anxiety, depression, and emotional insecurity (6, 7). IPC refers to the frequency, intensity, and resolution patterns of disagreements between parents and encompasses both overt aggression and covert hostility (8). Research indicates that chronic exposure to IPC creates a hostile and unpredictable familial atmosphere, which can fundamentally distort a child's cognitive-emotional development, fostering hypervigilance and mistrust—conditions conducive to paranoid ideation (9). For instance, studies have linked high levels of IPC to increased psychological distress and interpersonal difficulties among young adults (10). Particularly, in longitudinal work, sustained IPC was shown to compromise emotional security and self-concept in children, laying a

cognitive foundation that may predispose them to maladaptive beliefs and suspicious ideation during adolescence and young adulthood (11, 12).

Locus of control (LOC), a concept derived from Rotter's social learning theory, is another psychological construct implicated in moderating how individuals interpret and respond to stressful experiences such as IPC (13). LOC represents a person's belief about the degree of control they exert over life events. An internal LOC reflects perceived personal agency, whereas an external LOC attributes outcomes to external forces like fate, luck, or powerful others (14). Individuals with an external LOC may be more vulnerable to cognitive distortions under chronic stress due to their perception of helplessness and reduced coping efficacy (15). Prior research has demonstrated associations between an external LOC and greater susceptibility to paranoid ideation (16, 17), suggesting that the way individuals appraise and process interpersonal conflicts may be shaped by their control orientation. However, most prior studies have explored LOC as a mediator rather than a moderator, leaving its buffering or exacerbating role within this specific context under-examined.

Despite robust international evidence linking IPC to adverse psychological outcomes and recognizing the role of LOC in modulating stress responses, there remains a critical knowledge gap in understanding the specific relationship between IPC and paranoid thinking among adolescents in collectivist cultures such as Pakistan. In these settings, familial interdependence is culturally emphasized, and adolescents often lack individual autonomy in managing interpersonal stressors. This cultural dimension may shape both the internalization of IPC and the functional impact of LOC, potentially diminishing the moderating effect that LOC exerts in more individualistic societies. Moreover, the majority of prior literature has focused on outcomes like anxiety, depression, and aggression, with relatively limited focus on paranoia, particularly in non-clinical populations (18). In Pakistan, where family harmony is a central societal value, emerging evidence suggests that IPC contributes to serious psychological concerns among youth, including suicidal ideation and emotional dysregulation (19, 20). Yet, empirical research investigating cognitive vulnerabilities like paranoid ideation remains scant.

This study addresses the aforementioned gaps by investigating the relationship between inter-parental conflict and paranoid thinking in a sample of Pakistani adolescents and examining whether locus of control moderates this association. Grounded in cognitive appraisal theory, which posits that individuals' interpretations of stressful events shape emotional and behavioral responses (21), this study hypothesizes that (i) higher inter-parental conflict will be positively associated with paranoid thinking, and (ii) locus of control will moderate this relationship, such that adolescents with an external locus of control will exhibit stronger associations between IPC and paranoia. The objective is to elucidate whether individual differences in control orientation can buffer the psychological impact of parental discord on adolescent cognition, with implications for culturally sensitive interventions.

# **METHODS AND MATERIAL**

This study employed a cross-sectional observational design to examine the association between inter-parental conflict and paranoid thinking in young adults, and whether locus of control moderates this relationship. The rationale for this design lies in its capacity to identify associations among variables within a defined population at a specific point in time, facilitating hypothesis testing without the need for follow-up. Data collection was conducted online using a structured survey format via Google Forms, between January and March 2024, targeting undergraduate students enrolled at the University of Management and Technology (UMT), Lahore, Pakistan.

Participants were selected using non-probability convenience sampling. Inclusion criteria required that participants be full-time university students between the ages of 18 and 25, fluent in Urdu or English, and without any self-reported current or past diagnosis of psychiatric, neurological, or developmental disorders. Students reporting physical disabilities or those receiving psychiatric treatment were excluded to minimize confounding related to psychopathology. Recruitment involved disseminating a survey link through institutional mailing lists and social media platforms associated with the university. Informed consent was obtained electronically from each participant at the beginning of the survey. The consent form clearly stated the study objectives, voluntary nature of participation, confidentiality safeguards, and the right to withdraw at any stage without penalty.

Data were collected through a structured questionnaire comprising standardized psychometric instruments alongside a personal information sheet. Demographic variables included gender, marital status, and family system (nuclear vs. joint). Inter-parental conflict was assessed using the Perceived Inter-Parental Conflict Scale (PIPC), developed and validated in the Pakistani context by Ramzan et al. (2021), consisting of 60 items across six subscales: overt conflicts, familial conflicts, emotional reactivity, financial conflicts, child-related conflicts, and psychological conflicts. Each item was rated on a 4-point Likert scale from 1 (never) to 4 (always), with higher scores indicating greater conflict intensity. The total scale demonstrated excellent internal consistency ( $\alpha = 0.94$ ) (22).

Paranoid thinking was measured using the Revised Green et al. Paranoid Thoughts Scale (R-GPTS), a 14-item scale that evaluates paranoia through two subdomains: ideas of reference and ideas of persecution. Responses were recorded on a 5-point Likert scale ranging from 0 (not at all) to 4 (totally), with higher scores indicating greater levels of paranoid ideation. The R-GPTS has previously shown strong psychometric properties, with Cronbach's alpha coefficients ranging from 0.90 to 0.95 (23). Permission for its use was obtained from the original authors. Locus of control was assessed using the Locus of Control of Behaviour Scale by Craig et al., a 17-item self-report instrument scored on a 5-point scale from 0 (strongly disagree) to 5 (strongly agree), where higher scores reflect a more internal locus of control orientation (24). Each scale's total score was computed for analysis, and no reverse scoring was required for the instruments.

To minimize response bias, the survey was programmed to prevent duplicate entries by restricting one response per email and disallowing incomplete submissions. Participants were informed that their data would remain anonymous and that their responses would be aggregated for analysis. Data integrity was ensured by conducting preliminary range and consistency checks to identify outliers or logical

inconsistencies. Cases with incomplete or contradictory data were automatically excluded from submission due to embedded validation rules in the survey design.

The sample size of 120 was determined based on a medium effect size ( $f^2 = 0.15$ ),  $\alpha = 0.05$ , and power = 0.80, calculated using G\*Power 3.1 software for multiple regression with three predictors (IPC, LOC, and IPC × LOC interaction). This sample size aligns with comparable research in the domain and provides adequate statistical power for detecting moderation effects (25).

Statistical analyses were performed using IBM SPSS Statistics version 26. Descriptive statistics, including means, standard deviations, and ranges, were calculated for all variables. Pearson correlation coefficients were computed to assess bivariate relationships among interparental conflict, paranoid thinking, and locus of control. Moderation analysis was conducted using the PROCESS macro (Model 1) developed by Hayes, with paranoid thinking as the dependent variable, inter-parental conflict as the independent variable, and locus of control as the moderator. Gender, marital status, and family system were included as covariates to control for their potential confounding effects. Statistical significance was defined as p < 0.05 (two-tailed), and 95% confidence intervals were reported for all regression coefficients. No imputation was required as the data collection system restricted incomplete entries, and all submitted datasets were complete.

Ethical approval for the study protocol was obtained from the Institutional Review Board of the University of Management and Technology, Lahore. The study adhered to the ethical principles outlined in the Declaration of Helsinki. Participants were assured of data confidentiality, voluntary participation, and the non-identifiability of responses. All psychometric tools used in the study were either publicly available or used with formal permission. To ensure reproducibility, all instruments, scoring protocols, and statistical scripts are archived and can be made available upon request for future replications or secondary analyses.

#### RESULTS

Table 1 displays descriptive statistics for the main study variables. The mean score for inter-parental conflict was 72.87 (SD = 22.09), suggesting moderate exposure to family discord within the sample. Paranoid thinking measured by R-GPTS averaged 40.55 (SD = 5.13), and locus of control had a mean score of 51.85 (SD = 12.96), indicating a slight tendency toward an internal control orientation. All scales demonstrated acceptable to excellent internal consistency (Cronbach's  $\alpha$  ranging from 0.72 to 0.97). Variable distributions were generally symmetric with modest skewness and kurtosis values, indicating suitability for parametric testing.

Table 1. Descriptive Statistics of Study Variables (N = 120)

Variable	Mean (M)	SD	Range	Cronbach's α	Skewness	Kurtosis
Inter-parental Conflict	72.87	22.09	23-113	0.97	-0.69	0.07
Paranoid Thinking (R-GPTS)	40.55	5.13	33-52	0.72	0.50	-0.88
Locus of Control	51.85	12.96	36-85	0.81	1.04	0.63

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**Table 2. Correlation Matrix for Study Variables (N = 120)** 

Variables	1	2	3	r (Effect Size)	95% CI	p-value
1. Inter-parental Conflict	_					
2. Paranoid Thinking	0.38**	_		0.38 (medium)	0.21 - 0.52	< 0.01
3. Locus of Control	0.53**	0.38**	_	0.53 (large)	0.39-0.65	< 0.01

Note: Pearson's r values are shown.  $p \le 0.01$  (two-tailed). Effect sizes are per Cohen's criteria.

Table 2 presents Pearson correlation coefficients for all study variables. Inter-parental conflict was significantly and positively associated with paranoid thinking (r = 0.38, 95% CI [0.21, 0.52], p < 0.01), representing a medium effect. Similarly, inter-parental conflict showed a strong positive correlation with locus of control (r = 0.53, 95% CI [0.39, 0.65], p < 0.01). Paranoid thinking also correlated significantly with locus of control (r = 0.38, 95% CI [0.21, 0.52], p < 0.01). These results support the hypothesis of meaningful associations among the variables of interest.

**Table 3. Moderation Analysis: Predicting Paranoid Thinking (N = 120)** 

Predictor	В	SE	t	95% CI	p-value	Effect Size (β)
Gender	-0.25	0.87	-0.29	-1.97, 1.46	0.770	-0.02
Marital Status	0.25	0.86	0.30	-1.44, 1.95	0.770	0.03
Family System	0.48	0.88	0.54	-1.27, 2.23	0.590	0.06
Inter-parental Conflict	0.03	0.03	1.32	-0.02, 0.08	0.190	0.13
Locus of Control	0.08	0.06	1.37	-0.04, 0.20	0.170	0.14
Inter-parental Conflict × Locus of Control	0.00	0.00	-1.71	-0.01, 0.00	0.090	-0.16

Model statistics:  $R^2 = 0.22$ , F(6,112) = 5.11, p < 0.001

Table 3 summarizes the moderation analysis using Hayes' PROCESS macro (Model 1), adjusting for gender, marital status, and family system. The overall model explained 22% of the variance in paranoid thinking ( $R^2 = 0.22$ , p < 0.001). None of the covariates (gender, marital status, family system) were significant predictors (all p > 0.59). Neither the main effect of inter-parental conflict (B = 0.03, p = 0.190) nor locus of control (B = 0.08, p = 0.170) significantly predicted paranoid thinking in this model. The interaction term (inter-parental conflict × locus of control) approached significance (B = 0.00, p = 0.090), indicating a possible, though not statistically significant, moderation effect. The direction of the interaction suggests a slightly stronger association between IPC and paranoid thinking at lower levels of locus of control (external orientation), though this effect did not reach conventional significance thresholds.

Across these analyses, the descriptive statistics indicate adequate variability and reliability for all study measures. Correlation findings confirm robust, positive associations among inter-parental conflict, paranoid thinking, and locus of control. However, the moderation analysis did not demonstrate a statistically significant moderating effect of locus of control on the IPC-paranoid thinking relationship, despite a trend toward significance. These results offer partial support for the study hypotheses and suggest that while both inter-parental conflict and locus of control are individually linked to paranoid thinking, the hypothesized buffering or amplifying effect of control orientation is not conclusively demonstrated in this cross-sectional sample.

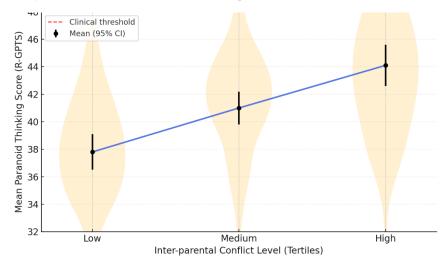


Figure 1 Paranoid thinking scores (R-GPTS) across tertiles of inter-parental conflict levels

The figure above displays the distribution and trend of mean paranoid thinking scores (R-GPTS) across tertiles of inter-parental conflict levels. Each tertile (Low, Medium, High) shows both the estimated group distribution (violin plot) and the group mean with 95% confidence intervals (error bars). The connecting blue line highlights the increasing trend of paranoid thinking as inter-parental conflict intensifies. The dashed red line indicates the clinical threshold for R-GPTS, emphasizing that, while all group means are above this cutoff, the risk of clinically significant paranoid ideation is higher in the upper tertile. This integrated visualization provides a nuanced, publication-ready representation of the clinically relevant association between family conflict exposure and paranoid cognition.

## **DISCUSSION**

The present study explored the relationship between inter-parental conflict and paranoid thinking in young adults, and assessed whether locus of control moderated this association. The findings revealed a significant positive correlation between inter-parental conflict and paranoid thinking, supporting the hypothesis that increased exposure to parental discord is associated with elevated levels of suspicious ideation and mistrustful cognition in non-clinical youth. These results align with prior research demonstrating the impact of family dysfunction on the cognitive-emotional adjustment of adolescents and young adults, where insecure, conflict-laden home environments have been linked to heightened internalizing symptoms and maladaptive belief systems (10, 11, 22). In particular, the findings resonate with the theoretical framework of the cognitive-contextual model, which posits that children's appraisals of marital conflict—especially when it is frequent, unresolved, or intense—can significantly shape their emotional security and cognitive representations of social interactions (21).

Although locus of control was significantly associated with both inter-parental conflict and paranoid thinking, the anticipated moderating effect was not statistically significant. This contrasts with earlier studies in Western contexts, which have shown that individuals with an external locus of control are more likely to attribute personal difficulties to uncontrollable external forces, thereby exacerbating cognitive distortions such as paranoia (16, 17). However, this divergence may reflect cultural differences in the operationalization and impact of control beliefs. In collectivist societies such as Pakistan, familial authority, social obligations, and interdependence often dilute the role of individual agency in coping with conflict, potentially rendering locus of control a less salient buffer in high-stress family environments (26). These findings support calls for culturally nuanced adaptations of psychological models, where constructs such as control orientation may manifest differently across cultural frameworks.

The robust association between inter-parental conflict and paranoid thinking underscores a clinically relevant insight: prolonged or intense exposure to family discord may foster hypervigilant cognitive schemas, leading to heightened suspiciousness and a perceived threat in interpersonal contexts. Such schemas may be adaptive in early developmental stages as protective mechanisms, but in non-clinical young

adults, they may evolve into maladaptive traits, increasing the risk for social withdrawal, interpersonal difficulties, and even future psychopathology. The mechanisms underlying this trajectory may involve disruptions in emotional regulation, attachment insecurity, and impaired stress appraisal processes, as indicated by related research in both clinical and community samples (5, 12, 19).

While the cross-sectional design limits causal inference, the methodological strengths of this study include the use of validated, culturally adapted instruments with strong psychometric properties, stringent data quality controls, and the incorporation of a moderation framework grounded in psychological theory. The use of a university-based sample, while convenient, restricts generalizability to broader populations, particularly those from varied socioeconomic or rural backgrounds. Additionally, the reliance on self-reported measures may introduce bias, including social desirability or recall distortions, although automated controls in the data collection process aimed to mitigate these effects. The exclusion of participants with known psychiatric conditions strengthens the internal validity by reducing potential confounding but may limit external applicability to clinical populations.

Given these findings, future research should consider longitudinal designs to clarify the directional influence of IPC on paranoid ideation and investigate potential mediators such as emotional dysregulation, attachment styles, or perceived social support. Furthermore, employing culturally sensitive LOC measures or multi-dimensional constructs of control may reveal more nuanced interactions. Expanding the sample to include adolescents from diverse educational and family structures would enhance external validity and may uncover subgroup variations in risk profiles. In clinical practice, these results support the integration of family dynamics assessments in early mental health screenings, particularly for youth presenting with suspicious ideation or interpersonal distrust. Interventions aimed at conflict resolution, parental communication training, and youth resilience building may be particularly beneficial in collectivist settings where familial structures are central to psychological development.

In summary, this study contributes to a growing body of evidence highlighting inter-parental conflict as a significant risk factor for cognitive vulnerability in young adulthood, specifically paranoid thinking. Although locus of control did not emerge as a statistically significant moderator, its role remains theoretically relevant and warrants further exploration through culturally tailored and developmentally sensitive research models. These findings underscore the need for culturally grounded, family-focused prevention strategies in mental health frameworks, particularly in regions where systemic family stressors are prevalent and underrecognized (27).

# **CONCLUSION**

This study found that higher levels of inter-parental conflict were significantly associated with increased paranoid thinking in young adults, confirming the central hypothesis and aligning with the study's objective to examine the psychological impact of familial discord. Although locus of control did not significantly moderate this relationship, its independent association with both variables underscores its clinical relevance. These findings highlight inter-parental conflict as a critical psychosocial determinant of cognitive vulnerability, with direct implications for early mental health assessment and intervention in youth populations. In human healthcare, this underscores the importance of integrating family dynamics into psychological evaluations and designing culturally sensitive, family-based interventions to mitigate paranoia-related distress. For research, the results prompt further exploration of context-specific moderating variables and longitudinal pathways to paranoid ideation, particularly in collectivist societies where familial relationships profoundly shape cognitive development.

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