



Interpersonal Communication Patterns of Parents in Supporting Adolescent Mental Health in Banda Aceh City

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Received: 18 May 2026;

Revised: 16 June 2026;

Accepted :22 June 2026;

Published : 30 June 2026

Abstract

Adolescents are an age group vulnerable to emotional, social, and psychological changes, making mental health an important aspect that requires attention. In this study, families, especially parents, play a strategic role as the closest environment that can help adolescents cope with life's pressures through healthy interpersonal communication. This study aims to determine parental interpersonal communication patterns in supporting adolescent mental health in Banda Aceh City. The study used a descriptive qualitative approach, collecting data through in-depth interviews. The research informants numbered seven: three parents, three adolescents aged 17–20 years, and one child and adolescent psychologist. Data analysis was carried out through data reduction, data presentation, conclusion, and verification. The results show that parental interpersonal communication patterns play an important role in maintaining adolescent mental health through five main aspects: openness, empathy, support, positive attitudes, and equality. Openness provides a safe space for adolescents to share; empathy makes adolescents feel understood; support increases self-confidence; positive attitudes strengthen self-esteem; and equality encourages adolescents to feel valued. However, equality remains a challenge due to the influence of traditional parenting patterns and hierarchical family cultures. This study concludes that parental interpersonal communication is a protective factor for adolescent mental health. Therefore, parents need to build more open, empathetic, supportive, positive, and participatory communication in their daily lives.

Keywords : Adolescents, Interpersonal Communication, Family, Mental Health, Parents



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1. INTRODUCTION

Adolescence is a stage of development that marks the transition from childhood to adulthood. During this phase, intense physical, emotional, social, and psychological changes occur, requiring adolescents to adapt to their environment and develop their own identities. According to the WHO, adolescents are defined as individuals aged 10–19 years, whereas in national policy, they are defined as those aged 10–18 years (Khairunnisa & Usiono, 2023). The dynamic nature of adolescence makes this phase both crucial and vulnerable, especially when adolescents face academic pressure, social relationships, family demands, and the search for identity.

This vulnerability is closely related to mental health. According to Merriam-Webster, mental health is defined as a stable emotional and psychological condition that enables individuals to use their cognitive and emotional abilities optimally, function in



society, and meet the needs of daily life (Rozali et al., 2021). In the adolescent context, mental health not only concerns the absence of disorders but also the ability to manage stress, face change, build healthy social relationships, and maintain self-esteem (Aulia et al., 2025). When this ability is weakened, adolescents can experience psychological pressure that affects their personality development, achievements, and social relationships.

Various studies have shown that mental health issues in adolescents require serious attention. (Rahmawaty et al., 2022) emphasized that the inability to address emotional and mental health issues can negatively impact adolescent development, particularly character formation and the emergence of emotional disorders. (Mustamu et al., 2020) also emphasized the importance of protecting adolescents from negative experiences and risk factors that can impact their growth, ensuring their physical and mental health is maintained. In other words, mental health in adolescence is not simply an individual issue, but a developmental issue that requires support from those closest to them.

One factor that exacerbates adolescents' psychological well-being is the emotional fluctuations typical of this developmental phase. Adolescents can experience rapid mood swings, internal conflict, feelings of inferiority, sadness, and even despair when faced with significant life pressures (Diananda, 2019). If these pressures are not managed properly, the impact can develop into serious psychological stress. (Jatmiko, 2021) states that conditions such as depression and despair often arise from severe life pressures, which can lead to psychological distress and even suicide attempts. This finding becomes even more important in the context of Aceh. Based on the Indonesian National Adolescent Mental Health Survey, Aceh is among the areas with a high prevalence of emotional disorders in adolescents (Gloria & Despriansyah, 2022). Furthermore, suicide cases have also been recorded in Aceh, including in Banda Aceh, indicating that mental health issues among adolescents and students cannot be ignored. (Asri, 2019; Fernanda & Mawarpury, 2019).

Amidst these conditions, the family becomes the first and closest social environment for adolescents. Parents not only play a role in meeting physical needs but also shape children's emotional development, thinking patterns, and coping skills. Through daily communication, adolescents learn to recognize themselves, manage their emotions, and understand moral and social values. (Barseli et al., 2019) explain that interpersonal communication is the process of conveying messages to individuals or small groups, both verbally and nonverbally, with the opportunity for a direct response. Within the family, interpersonal communication is the primary means by which adolescents feel heard, understood, accepted, or ignored.



Effective interpersonal communication between parents and children is crucial because it shapes the quality of emotional relationships within the family. Individuals who rarely engage in interpersonal interactions are at risk of encountering obstacles to personal development due to a lack of mental adaptability to their social environment (Barseli et al., 2019). In parent-adolescent relationships, open, empathetic, supportive, and respectful communication can be a crucial source of social support. Conversely, closed, judgmental, or authoritarian communication can leave adolescents feeling isolated, misunderstood, and reluctant to express their problems. (Indrawati, 2020) emphasized that children more readily accept values taught by parents. Thus, parental attitudes and behavior within the family will be imprinted on the child's memory and influence their emotional development.

Furthermore, this research is important because the family context in Banda Aceh is inextricably linked to religious values, social norms, and family relationship patterns that still tend to respect parental authority structures. In such situations, interpersonal communication between parents and adolescents serves not only as a means of exchanging information but also as a medium for fostering emotional closeness, a sense of security, and healthy social control within the family. When communication is warm, open, and respectful, adolescents will more easily develop self-confidence, emotional regulation, and readiness to face life's pressures. Conversely, rigid, closed, and judgmental communication risks creating emotional distance between parents and children, making adolescents more vulnerable to suppressing problems and experiencing psychological distress. Therefore, studying parental interpersonal communication patterns to support adolescent mental health is relevant to understanding how the family can function as a psychologically protective space for adolescents amidst the various developmental challenges they face.

Based on this background, this study aims to identify the interpersonal communication patterns that parents use to support adolescents' mental health in Banda Aceh City. How do parental interpersonal communication patterns support the mental health of adolescents in Banda Aceh City? Building on this question, this study aims to provide a more in-depth picture of the forms of family communication that can serve as protective factors for adolescent mental health. To address this objective, this study uses a descriptive qualitative approach, including in-depth interviews with parents, adolescents, and psychologists. This study will also use Family Communication Patterns Theory (Koerner & Fitzpatrick, 2006), which classifies families by the degree of conversational openness and compliance with authority. This theory is relevant to examining how the hierarchical family communication style in Banda Aceh influences adolescent mental health.



2. METHOD

This study employed a descriptive qualitative approach. This approach was chosen to gain a deep understanding of the experiences, perspectives, and practices of interpersonal communication between parents and adolescents in everyday life in Banda Aceh City. Descriptive qualitative methods allow researchers to explore the meaning, relationship dynamics, and emotional experiences of informants in a natural way.

The research was conducted in Banda Aceh City. The location was chosen because Banda Aceh is a city with strong cultural and religious values, making interpersonal communication within families crucial to shaping adolescent mental health. Furthermore, Banda Aceh's socio-cultural context offers an opportunity to examine how family communication unfolds amid family values and parenting styles that are still shaped by hierarchical structures. The research informants were selected purposively. The informants consisted of seven individuals: three parents with adolescent children aged 17–20, three adolescents aged 17–20 who reside in Banda Aceh and are mentally healthy, and one child and adolescent psychologist with experience in dealing with family communication and adolescent mental health issues. This composition of informants was chosen to capture perspectives from parents, adolescents, and experts. The age range of 17–20 was chosen because, at this stage, adolescents generally have more mature self-reflective skills and can express their experiences of family communication more articulately. Furthermore, at this age, adolescents are facing a crucial transition from school to college, making parental communication support even more crucial for their mental health.

Table 1: Research Informants

No.	Code	Name	Occupation	Age	Information	Address
1	N2	NL	Housewife	46	Humaira's Parents	Lambaro Skep
2	N4	Y	Midwife	48	Ghina's Parents	Punge Blang Cut
3	N5	M	BUMN Employees	52	Khanza's Parents	Lamtemen
4	N1	H	Students	20	Nur Laila's Children	Lambaro Skep
5	N3	G	Students	19	Yuliana's Children	Punge Blang Cut
6	N6	K	Students	17	Mukhtar's Children	Lamtemen
7	N7	MD	Child Psychologist	34	Child and Adolescent Psychologist	Ulee Kareng



The data collection technique used was in-depth interviews. Interviews were conducted in person to obtain detailed information about the informants' experiences, views, and attitudes regarding communication patterns within the family. Interview questions focused on five aspects of interpersonal communication: openness, empathy, support, positive attitudes, and equality. In addition to primary data from interviews, the research used secondary data from prior research, journal articles, and other literature relevant to interpersonal communication and adolescent mental health.

Data analysis was conducted in four stages: data reduction, data presentation, conclusion drawing, and verification. Data reduction was performed by selecting and focusing interview data relevant to the problem formulation. The reduced data was then presented systematically in narrative and tabular form. The next stage was to conclude the patterns emerging in the data, which were then verified for consistency with the overall interview results.

In the data analysis process, coding was conducted using an inductive thematic approach. Interview data were transcribed verbatim and then coded into units of meaning relevant to the five aspects of interpersonal communication. To ensure consistency of interpretation, the researcher conducted peer debriefing with fellow research team members. Regarding research ethics, all informants were informed of the study's purpose and provided verbal consent before the interviews. Informant identities were anonymized using codes to maintain confidentiality. To strengthen the validity of the data, this study applied source triangulation by presenting three perspectives: parents as the parties conducting the communication, adolescents as the parties receiving and responding to the communication, and child psychologists as expert informants. Triangulation was conducted by comparing statements from parents and children within the same family to confirm the parent-child communication relationship. Consistency between the two perspectives within a single family unit will strengthen the credibility of the data obtained.

3. RESULT AND DISCUSSION

Research findings indicate that parental interpersonal communication patterns play a crucial role in maintaining adolescent mental health in Banda Aceh. The five aspects analyzed were openness, empathy, support, positivity, and equality. These five aspects emerge in daily communication practices between parents and children, although the extent of their application varies from family to family. Overall, the results of this study indicate that interpersonal communication within families is not merely a process of exchanging messages but a relational process that shapes adolescents' sense of psychological security, self-esteem, and ability to cope with life's stresses. In terms of openness, adolescents tend to share their experiences, stress, and problems more easily



when their parents actively open up the conversation and listen without judgment. One interview result that demonstrates this comes from informant N1 (20 years old).

“Usually I tell my mom. If I have a lot of homework or something important at university, I tell her straight away. Sometimes I feel more comfortable telling my mom because she is more patient and listens.”

Mrs. N's statement (46 years old) reinforces this finding.

“Almost every day, especially after the children come home from activities, I ask, 'How was today? Was there anything fun or something that made you tired?’”

The interview findings were further clarified by the statement that N1's mother deliberately initiated conversations almost every day because if her child did not share, the parents needed to open the space first. This suggests that openness is characterized not only by a child's willingness to share but also by parents' initiative in starting conversations and ensuring the child feels heard and cared for. This openness was also evident in other informants. N3 (19 years old) stated:

“I often tell stories, especially to my mother. If there is a complicated group assignment, I usually tell it. Mama likes to ask, 'How was college today? When there is a problem, mom immediately asks, 'What is the problem?’ and that makes me feel cared for.”

This statement was reinforced by Mother N3 (N4, 48 years old), who said:

“Usually ask every night after dinner, 'how was today? Is there an interesting story?’ If there is a problem, I say, 'if there is anything, just tell mom.”

Mrs. N4 (48 years old) also added:

“I often encourage children to tell stories by giving examples of my experiences.”

The results of these interviews demonstrate that openness is fostered through regular communication, consistent questioning, and parental role models in sharing experiences. This way, children do not feel like they are being interrogated, but rather invited into a warm and safe relationship. This form of openness strengthens emotional bonds and helps children feel psychologically safe enough to discuss problems without



fear of negative judgment. In informant N6's family, openness also emerged, albeit in a more modest manner. N6's father (N5, 52 years old) said:

"If you say often, hmm, maybe not every day, but pretty regularly. Usually in the evening after Isha prayer, we sit together. Sometimes I ask, 'How was school today? Was there anything good or tiring?' So even though it is not long, there is communication almost every day."

He also emphasized:

"I try not to judge right away. So when he tells a story, I listen to it all the way through. Sometimes I nod, so he feels heard. If I comment harshly right away, I am afraid he will be reluctant to talk anymore."

Meanwhile, N6 (17 years old) stated:

"When it comes to school, I often tell my dad. He often asks, 'Are there any problems on campus? When I talk to my mom, I tend to talk about friends or lighthearted things. My mom is more fun to talk to casually."

The interview results show that openness is not always synonymous with lengthy conversations but can also occur through small talk, simple routines, and non-judgmental parental behavior. These findings confirm that this type of openness fosters a sense of psychological safety that reduces anxiety and facilitates adolescents' emotional regulation.

Interviews with psychologists also supported these findings. Expert informants emphasized that openness is one of the foundations of healthy attachment. Teenagers who feel able to open up to their parents tend to have lower anxiety levels because they know they have a safe place to talk. This means that openness within the family serves not only as a form of communication but also as a psychological protection mechanism for adolescents.

In terms of empathy, parents who are sensitive to their children's emotional states can help adolescents feel understood and less alone. Informant N1 (20 years old) stated:

"Mom usually knows right away, sis. Well, she can tell from my face, she says. She often says, 'Eat first, then tell me.' So I feel cared for."



The results of this interview show that empathy does not always come in the form of long advice, but can take the form of sensitivity, calmness, and simple, calming responses. N1's (20 years old) statement about his father further deepens this:

“If Dad is shorter, he usually says, 'Never mind, just rest.' But I understand that is how he cares. But both make me feel cared for.”

This statement shows that empathy from fathers and mothers can take different forms but is equally meaningful for children. Mrs. N1 (N2, 46 years old) also explained the form of empathy she uses:

“I try to listen without getting angry. Even if he is wrong, I will hold back my emotions first. For example, if he tells me there is a problem with his friend, I do not immediately blame him. I said, 'Okay, try telling me first.' So the child is not afraid to open up. I approached slowly. If he is angry, I will be quiet first, so that his emotions subside. When he has calmed down a bit, I say, 'Do you want to talk to me?' If he is sad, I usually hug him first, so he feels safe.”

This empathy is also shown when a child experiences failure (N2, 46 years old):

“Once he was disappointed because he did not pass the organizational selection at school. He said he felt like a failure. I said, 'I understand, it really hurts, I have been rejected before.' I told her about my experience, so she felt like she was not alone.”

The results of the interview show that empathy comes through listening, postponing judgment, validating feelings, and sharing experiences so that children feel they are not alone. On the other hand, Mother N3 (N4, 48 years old) also emphasized the practice of empathy when dealing with disappointed children:

“I will try listening first. Sometimes he just needs to be listened to, not given a direct solution.”

This empathy is also seen when N3 (19 years old) says:

“Mom usually realizes right away. He often says, 'You look pale, have you eaten yet?' That makes me feel cared for. Dad is usually quiet at first, then suddenly asks to chat at night. He asked, 'Are there any problems on campus?' So even though it was not direct, Dad was concerned in his own way.”



This interview shows that parental empathy is not always explicit but can be read by children as genuine concern. So if empathy is placed at the core of interpersonal communication, parental validation makes teenagers more confident, calmer, and better able to rise above pressure.

In terms of support, parents provide emotional, moral, and instrumental assistance. N1 (20 years old) explained:

"Mom usually accompanies me to study, sometimes helps me make a schedule. Well, that makes me calmer. "If my father often tells me stories about his past experiences, I feel motivated."

The different forms of support between mothers and fathers show that healthy interpersonal communication is not always uniform, but still has an impact when it makes children feel accompanied and strengthened. This support is emphasized again through N1's (20 years old) statement:

"Well... usually I do not get angry. Mom said, 'It is okay, try again.' Dad was also more encouraging. So... hmm, I am not afraid of failing, but I am still trying, sis."

Meanwhile, mother N1 (46 years old) stated:

"Usually, I encourage first. I said, 'You can definitely find a way out.' If the problem requires my help, for example, with college matters, I will accompany you. However, I also want him to learn to solve it himself so that he can be stronger. In my opinion, the most important thing is listening. Teenagers need to be heard, not directly advised at length. So if he feels his story has been heard, that is a big form of support."

The same findings also appeared in N3 (19 years old) and N6 (17 years old). N3 stated:

"Mama often says, 'Do not panic, just work slowly.' Sometimes she makes food so I can focus. Dad is more about motivation, like telling stories about his college experiences. Well... I never get angry. Mom usually says, 'It is also a process.' Dad says, 'The important thing is to try first.' So I do not feel afraid." Like when my father took me to campus early in the morning just so I would not be late. It is simple but effective."



Meanwhile, N6 (17 years old) said:

“Moral support, however. They often say, 'You can do it.' It is simple but makes me confident. Well, my parents still pay for my tutoring, so that is a big support. It allows me to focus on my studies. Erm... they were not angry. Mama said, 'Just repeat it, it is okay.' Dad also encouraged me. So I did not feel burdened.”

Based on these interviews, the most impactful support is multi-layered: emotional support, then informational support, and, if necessary, instrumental support. This pattern is important because it helps teenagers feel safe without losing their autonomy. Support like this also contributes to increasing self-efficacy, academic motivation, and readiness to face the demands of adolescent development.

In the positive attitude aspect, parents tend to offer praise, appreciation, and affirmation for their children's efforts. Informant N3 (19 years old) stated:

"My mom often says, 'I am proud of you,' when I manage my time between college and my organization. That motivates me.”

A positive attitude like this fosters appreciation and increases motivation. Research also finds that appreciation does not always take the form of large gifts but can include verbal praise, small amounts of attention, and recognition of a child's efforts. N1's (20 years old) statement reinforces this finding:

“Hmm... yeah, like when my mom says, 'I am proud of you,' even though I only managed to finish my assignment on time. That makes me feel appreciated, sis. Well, still. If my grades go up, Mom praises me. My father likes to say that I have become more diligent. That makes me... um, more enthusiastic about learning. Hmm, yes, it really makes an impact. Because they see my efforts, it is not a waste of studying until late at night.”

Mrs. N1 (N2, 46 years old) also explained:

“If he has an achievement, no matter how small, I say, 'Mommy is proud of you.' Sometimes I buy his favorite food as a form of appreciation. So it is not just words, but also small actions.”



Meanwhile, in families N3 and N6, a similar pattern was also found. N4 (48 years old) said:

“If he succeeds in doing something, I say 'very good, proud mother.' Sometimes I give him a small gift, for example, his favorite food. Well, I think it makes kids feel valued.”

N5 (52 years old) also stated:

“Well... if he succeeds, for example, his exam score is good, or he takes part in a competition, I say, 'well done, dad is proud of you.' I know it might be simple, but my child seems happy when I say that.”

These results indicate that a positive attitude serves as psychological reinforcement, making children feel recognized, appreciated, and motivated. So a positive attitude is understood as a protective factor because it can increase teenagers' self-esteem and sense of competence, especially in the phase when they are building their self-identity.

Meanwhile, equality arises when parents provide space for teenagers to express their opinions, discuss, and participate in decision-making. N6 (17 years old) said:

"At first my father wanted me to take another major, but after I explained why I chose this, he finally agreed."

These findings suggest that adolescents feel valued when their views are taken into consideration. Apart from that, a form of equality was observed among other informants. N1 (20 years old) said:

“Well... sometimes there is. Mama likes to forbid playing on her cellphone at night. Nevertheless, if I say, 'I am done studying,' hmm, he usually wants to listen. Well, I would. So I feel... ahem, my opinion is valued too.”

Mrs. N1 (N2, 46 years old) added:

“Well... I let him finish his story. I look into his eyes to show that I am listening intently. Only then do I respond. So he feels his opinion is valuable.”

Similar findings also appeared in N3 (19 years old):

"Hmm... I have. Mom is sometimes afraid when I come home at night. However, if I explain that there is an important meeting, Mom can understand. Erm... yes, really. Because I feel like I am



not a child anymore, but I am considered to be able to think for myself."

These results show that equality in this research does not mean that parents and children are in the same position, but rather the recognition that teenagers have voices, considerations, and cognitive capacities that are worthy of respect. However, research also finds that equality is the most challenging aspect to implement consistently, especially because traditional parenting styles remain strong, time constraints are present, and family culture tends to be authoritative.

This challenge can be traced through several informant statements. First, N5 (Father of N6) admitted that he had wanted his son to choose a different major than his own, although in the end, he was willing to listen to his son's explanation. This shows that equality does not appear automatically but requires negotiation. Second, N1 said that her mother sometimes still restricted cellphone use at night without first listening to the child's reasons, even though she was later willing to listen when the child explained. Third, N6 revealed that the initial decision about the major came from the father, not the result of joint discussions from the start. These three examples show that even when parents have good intentions, a top-down parenting style persists and is a real obstacle to consistently achieving equality.

In general, the research results show that parental interpersonal communication functions as a protective factor for adolescent mental health. Openness helps teenagers have a safe space to tell their stories, so they do not keep the pressure on themselves. Empathy makes the emotional regulation process easier because teenagers feel understood rather than judged. The support provided emotionally, morally, and instrumentally helps teenagers build resilience and self-confidence. Positive attitudes, fostered through praise and appreciation, strengthen teenagers' self-esteem, while equality fosters a sense of responsibility and control over their life choices.

This finding is consistent with research by (Wowor & Putri, 2021), which shows that interpersonal communication within families helps ease emotional burdens and increase motivation among overseas students. This finding is also supported by research by (Djayadin & Munastiwi, 2020), which shows that family communication patterns have a significant impact on children's mental health, particularly because communication helps children stay connected with their parents, reduce loneliness, and maintain social relationships despite limitations. Furthermore, research by (Juli & Sulistyowati, 2023) also confirms that interpersonal communication serves as a platform for sharing and interaction, thereby reducing feelings of loneliness and minimizing the risk of mental health disorders. Therefore, the results of this study further strengthen the conclusions of



previous studies that warm, open, and supportive communication helps children stay emotionally connected, provides a space to share, and enables them to maintain their psychological well-being better. In this study, this contribution is more specifically examined through five aspects of parental interpersonal communication: openness, empathy, support, positive attitudes, and equality, as they are practiced in family relationships in Banda Aceh.

The results of interviews with psychologists strengthen this interpretation. Expert informants emphasized that openness is one of the foundations of a healthy attachment; teenagers who feel they can open up to their parents tend to have lower levels of anxiety. Psychologists also emphasize that empathy is at the core of interpersonal communication because validation makes teenagers more confident and better able to rise above pressure. This view shows that healthy communication patterns are not just about the frequency of speaking, but about the quality of relationships that provide a sense of security, appreciation, and support.

Apart from that, the results of this research can also be understood from the perspective of circular interactional communication patterns. In this pattern, communication is understood as an ongoing two-way process in which parents and children alternately become senders and recipients of messages. Research findings show that communication within the informant's family does not flow in one direction but involves the exchange of messages, feedback, and adjustments to responses based on the child's emotional condition. When parents start a conversation, the child responds, and then the parent adjusts how to respond; that is where interactive and more effective communication is formed. This type of communication pattern facilitates information sharing and mutual understanding, so that teenagers feel more appreciated and more comfortable communicating with their parents.

This can be traced in the two interview data sets. First, when N2 (N1's mother) started the conversation by asking "how was today, is there anything fun or makes you tired?", N1 responded by telling about the college assignments that were piling up, then N2 adjusted his response by listening first before giving advice. Second, N5 (N6's father) spoke about his habit of sitting together after Isha prayers and asking about school. Then his son, N6, responded, and his father again adjusted his response by 'not immediately judging.' This pattern shows that communication is not linear or unidirectional, but circular and adaptive to the child's emotional state.

At the same time, this study revealed differences in strengths and challenges among parents. NL (N2) excelled in openness and empathy, demonstrating the ability to foster warm and reflective conversations. She tended to be patient, able to read her child's



emotional state, and provided space until the child was ready to share. Y (N4) was stronger in practical support and motivation, although sometimes too quick to offer solutions. Meanwhile, M (N5/I5) demonstrated consistency in responsibility and presence, but still faced challenges in emotional expression and verbal openness. This variation suggests that the quality of parents' interpersonal communication is strongly influenced by family background, childhood experiences, personal characteristics, and work situations.

This finding is consistent with research by (Koerner & Fitzpatrick, 2006) within the framework of the Family Communication Patterns Theory, which shows that family communication patterns are strongly influenced by each parent's conversational orientation and obedience. NL, who works as a housewife, has more time to develop emotional openness. In contrast, M, who works full-time at a BUMN, shows limitations in verbal expression, even though she is consistently physically present. This difference is also influenced by the parenting experiences each parent received during childhood.

Barriers found in this research include limited time, a tone of voice that is often misunderstood, childhood communication habits, and a family culture that remains hierarchical, which prevent interpersonal communication from always running optimally. However, parents show reflective awareness to improve their communication patterns. Some are starting to be more careful when speaking; some refrain from immediately offering solutions; and others try to be more involved so their children know that daddy also cares. This means that effective interpersonal communication in the family is not something static, but a dynamic process that requires continuous learning and adjustment.

Thus, the interpersonal communication patterns of parents in this study are not simply a conversational activity between parents and children, but rather a relational process that shapes adolescents' sense of psychological security, self-esteem, and ability to cope with life's pressures. When the five aspects of interpersonal communication are balanced, adolescents' mental health is better maintained. Conversely, when one or more aspects are suboptimal, adolescents are at risk of feeling unheard, undervalued, or lacking space to express themselves. These findings emphasize that the family is a crucial arena in efforts to prevent adolescent mental health problems, and that warm, empathetic, supportive, positive, and participatory interpersonal communication needs to be continuously developed in daily family life.



4. CONCLUSION

This research shows that parents' interpersonal communication patterns play a significant role in supporting adolescents' mental health in Banda Aceh City. Research findings confirm that openness, empathy, support, positive attitudes, and equality are five important, interrelated aspects in forming healthy family relationships. Openness creates a sense of security for teenagers to convey their feelings, experiences, and problems they face without fear of being judged. Empathy helps teens feel understood, accepted, and not alone in dealing with emotional distress. Emotional, moral, and instrumental support from parents makes teenagers more confident, calmer, and more resilient in facing challenges. Positive attitudes through praise, affirmation, and appreciation strengthen teenagers' self-esteem, while equality gives them space to be heard, have their opinions respected, and be involved in decision-making.

The results of this research also show that interpersonal communication in the family is not just a talking activity between parents and children but a relational process that fosters a sense of psychological security, emotional closeness, and teenagers' ability to manage life stress. When these five aspects of interpersonal communication are in balance, teenagers' mental health tends to be better maintained because they have space to share, emotional support, and a sense of self-esteem. However, this research also found that equality was the most challenging aspect to implement consistently. This is influenced by traditional parenting patterns, limited parental time, communication habits within the family, and a family culture that still tends to be hierarchical. However, research findings show that parents are aware and willing to continue learning to adapt their communication methods to be warmer, more reflective, and more participatory in addressing their children's emotional needs.

Theoretically, this research confirms the importance of family interpersonal communication as a protective factor for adolescent mental health. It strengthens the view that the quality of parent-child relationships strongly influences adolescent psychological well-being. Practically, this research emphasizes the need for parents to foster more open, empathetic, supportive, and positive communication and to involve teenagers in everyday life. Parents need to be present not only physically but also emotionally by listening, validating, encouraging, and respecting their children's opinions. It is recommended that further research expand the scope of informants and research areas, and examine more deeply the roles of fathers, mothers, or other caregivers in family communication to obtain a broader understanding of interpersonal communication patterns that support adolescent mental health.

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