

Contemporary Issues in Nigeria:

Social Scientific Perspectives (SECOND EDITION)

Edited by:

Gboyega E. Abikoye Adeniyi M.Sholarin Ejikeme J.Okechukwu

CONTEMPORARY ISSUES IN NIGERIA: SOCIAL-SCIENTIFIC PERSPECTIVES

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Gboyega E. Abikoye
Adeniyi M. Sholarin
& Ejikeme J. Okechukwu

Pumark Nigeria Limited [Educational Publishers]

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O Adeniyi M. Sholarin

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Second Edition (2013)

ISBN: 978 - 978 - 51953 - 9 - 2

Published by:
Pumark Nigeria Limited
[Educational Publishers]
173 Ipaja Road,
Iyana-Orile Bus-Stop, Agege,
P.O.Box 1727, Agege, Lagos.
Tel: 08022235233, 08033449404
E-mail:pumarkbooks@yahoo.com

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Chapter Nine

INFLUENCE OF PARENTAL BONDING AND PEER BULLYING ON ADOLESCENT'S MENTAL WELL-BEING

Gboyega E. Abikoye, Adeniyi Solarin & Deborah A. Omosuyi

Abstract

This study investigated the influence of parental bonding and bullying on adolescents mental well-being. Participants were 370 secondary school students randomly selected from four secondary schools in Ijebu-North Local Government Area of Ogun State. Of the 370 participants 209 (56.5%) were males while 269 (73.4%) were females. Participants' mean age was 16.6 (±3.25). Data were collected using structured questionnaires consisting of widely-used and empirically validated measures of the variables of study. Results indicated that age (r = -.14; p < .05), sex (r = -.15; p < .05), and bullying (r = -.35; p < .01) were significantly but negatively related to paternal bonding. Results further indicated that only paternal bonding (r = .14; p<.05) was significantly related to mental well-being. In other words, the greater the adolescent's paternal bonding the better his/her mental well-being, and vice versa. Interestingly, bullying was not associated with mental well-being (r = -.05; p > .05). Also, maternal bonding was not significantly associated with mental well-being (r = -.02: p>.05). These results were discussed and the need

measures aimed at enhancing adolescents' well-being as well as the need for more research in the area was highlighted.

Introduction

Adolescents' mental well-being is very crucial as it plays significant roles in adulthood. In understanding the concept of adolescents' mental well-being, Korkeila (2000) conceptualized two dimensions of mental well-being: the positive (well-being and coping in the face of adversities), and the negative (symptoms and disorders). Positive mental wellbeing is therefore not merely an absence of negative symptoms such as depression or anxiety, but also includes aspects of control of self and events, happiness, social involvement, selfesteem and sociability. Adolescents who are mentally healthy have the ability to: develop psychologically, emotionally, creatively, intellectually, spiritually and initiative. Healthy adolescents also have the ability to develop and sustain mutually satisfying interpersonal relationships, use and enjoy solitude, become aware of others and empathize with them, play and learn. Also, adolescents who are mentally healthy have the ability to develop a sense of right and wrong, resolve problems and setbacks and learn from them (Korkeila, 2000).

Mental well-being is fundamental to enhanced quality of life. Happy and confident adolescents are most likely to grow into happy and confident adults, who in turn contribute to the health and well-being of nations (Bentley & Li, 1995). Mental well-being in adolescents has implications for self-esteem, behaviour, attendance at school, educational achievement, social cohesion and future health and life chances. Adolescents with a good sense of mental well-being possess problem-solving skills, social competence and a sense of purpose. These assets help them rebound from setbacks, thrive in the face of poor circumstances, avoid risk-taking behaviour and generally continue a productive life (Bernat, & Resnick, 2006).

According to problem behaviour theory (Jessor, 1977), problem behaviour consists of three independent but related systems of psychosocial components. The personality system includes social cognitions, individual values, expectations, beliefs, and attitudes. The perceived environmental system consists of proximal and distal social influence factors such as family and peer orientation and expectations regarding problem behaviors. The third component, the behavior system, consists of problem and conventional behavioral structures that work in opposition to one another. Jessor and colleagues postulate that these problem behaviors stem from an individual's affirmation of independence from parents and societal influence. In contrast, conventional behavior structures consist of behaviors oriented toward society's traditional standards of appropriate conduct such as church attendance and high academic performance.

There are myriad of factors that can influence adolescents' mental well-being. One of such factors is the interactive style of parent and child (parental bonding). Parenting bonding is a warm, intimate and continuous relationship between parents and child in which both find satisfaction and enjoyment. It can also be seen as affectional or tie between parents and their children. This affectional bond is based on a child's needs for safety, security and protection, paramount in infancy and childhood. Separation of a child from the parent can prevent the development of bonding resulting in psychopathology at some point in adolescents' life (Bowlby, 1958). Parent-child relationships can also be seen as the process in which a child goes through in developing lasting emotional ties with its immediate caregivers, which is seen as the first and most significant developmental task of a human being, and is central to that person's ability to relate properly to others throughout its life. This suggests that parents need to develop strong relationships with their young children

and remain actively and positively involved in the lives of their adolescent children in order to help him/her develop a stable mental well-being (Brown & Ryan, 2003). It is obvious that disturbances in parental bonding will be linked with the development of mental disorders later in life.

Hair, Jager & Garrett, (2002) found that higher quality relationships are associated with higher academic motivation and achievement, school engagement, better social skills, and lower rates of risky sexual behaviors. And low quality relationships are associated with, among other troubles, psychological problems, especially conduct disorder. Zaff, Jonathan & Michelsen, (2002) found that adolescents whose parents are involved in civic activities are more likely, themselves, to be involved in such activities. Also, parents who smoke, drink, take drugs and engage in risky sexual behaviors are more likely to have children who engage in the same behaviors. Adolescents who perceive their parents as monitoring their lives are more likely to do well academically and socially (Hair, Jager & Garrett 2002).

Another factor that can influence adolescents' mental well-being is bullying. Bullying has being seen as an important form of peer abuse affecting a substantial number of school children. It can be defined as a negative and often aggressive or manipulative act or series of acts by one or more people against another person or people usually over a period of time. Bullying is comprised of direct behaviours such as teasing, threatening, hitting and stealing that are initiated by one or more students against a victim. In addition to direct attacks, bullying may also be indirect by causing someone to intentional exclusion (Smith & Shu 2000).

Bullying is a common problem that is gradually increasing in every part of the society and in schools and that has negative impact especially on the climate of the schools

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and on the students. It has been observed that the incidents of bullying commonly experienced today tend to involve a gradual increase of violence and even some fatalities, (Batsche & Knoff, 1994). A study of 4,236 middle school students in Maryland found that, 30.9 percent of the students reported being victimized three or more times over the past year (Haynie, Nansel & Eitel, 2001). A further 7.4 percent reported having bullied others three or more times over that past year. More than half of those who reported bullying others also reported having been victims of bullying. Simanton, Burthwick and Hoover's (2000) study of bullying in small town and found that nearly one in three students experienced some degree of peer victimization and that one in five participated in bullying of peers. Smith and Shu (2000) carried out research targeting years 6 to 10 (10-to-14-year-olds) in 19 English schools, and found that, overall, 55.5 percent of pupils stated they had not been bullied, with 32.3 percent having been bullied once or twice, 4.3 percent two or three times a month, 3.8 percent once a week, and 4.1 percent several times a week.

West and Sweeting (2003) found 44 percent of students reported some experience of being teased or called names and 17 percent reported having bullied. Fourteen percent said that they were teased weekly or more frequently, and 4 percent bullied others weekly or more frequently. An Australian survey of more than 38,000 children, Peterson and Rigby, (1999) found that approximately one child in six is bullied at school at least once a week. In a class of 30 this would mean five of the students would be victims of bullying and in a school with a population of 1,000, this would equate to 166 students. Bullying is an important factor which can distort adolescent mental well-being and can be described as an attack that causes hurt of a psychological, social or physical nature (Nansel, 2001).

Bullying can have negative lifelong consequences both for students who bully and for their victims. While boys typically engage in direct bullying, girls who bully utilize more subtle indirect strategies, such as spreading rumors and enforcing social isolation. Whether the bully is direct or indirect, the key component of bullying is that the physical or psychological intimidation occurs repeatedly over time to create an ongoing pattern of harassment and abuse (Graham & Juvonen, 2003). Direct bullying seems to increase through the elementary years, peak in the middle school/junior high school years, and decline during the high school years. However, while direct physical assault seems to decrease with age, verbal abuse appears to remain constant. School size, racial composition, and school setting (rural, suburban, or urban) do not seem to be distinguishing factors in predicting the occurrence of bullying (Graham & Juvonen, 2003).

Adolescents' ability to cope with and enjoy life and its challenges is strongly linked to, among other factors, their mental well being. If adolescents have mental well being difficulties in their formative years, the effects on their ability to function may last for the rest of their lives. Few studies have been conducted on the effect that bullying, parental bonding or both have on mental well-being of adolescents, especially in Nigeria. There is a need, therefore, to empirically investigate the extent to which parental bonding and bullying would impact adolescents' mental well being with a view to stimulating more research into this very important issue. The present study examined the influence of parental bonding, bullying and some demographic variables on adolescents' mental well-being.

Method

Participants

The participants were 370 secondary school students in Ijebu-North Local Government Area of Ogun State, Nigeria. Participants mean age was 16.6 (±3.25). Two hundred and nine (56.5%) of the participants were males while 161(43.5%) were females. In terms of religious affiliation, 169(45.7%) of the participants were Christians, 162(43.8%) were Muslims and 39(10.5%) were traditionalist. Participants were chosen from the senior secondary school (SSS) classes. Students from the junior secondary school (JSS) classes were excluded because many of them may not be able to fully comprehend the research instrument.

Instrument

Parental attachment was assessed with a scale developed by Parker, Tupling and Brown (1979). The scale is a 25-item likert-type instrument, scored along a four point scale ranging from "very unlike" (0) to "very like" (3), with items 2, 4, 14, 16, 18, and 24 reversely scored. Respondents are expected to complete the scale in two separate forms: one to assess maternal bonding and the other to assess paternal bonding. Higher scores on the scale denote higher levels of parental attachment and vice versa. A coefficient alpha of 0.78 and a Guttmann split-half reliability coefficient of 0.77 were obtained for the maternal bonding sub-scale. For the paternal bonding sub-scale, a coefficient alpha of 0.75 and a Guttmann split-half reliability coefficient of 0.72 were obtained in the present study.

Mental well-being was assessed with the mental well-being scale developed by Warwick-Edinburgh (2006). The instrument contains 12 statements, structured in the likert format, to which participants responded by ticking "none of the time" (1), "rarely" (2), "some of the time" (3), or "often"

(4). The higher a participant's scores, the higher his or her level of mental well-being. A Cronbach alpha of 0.82 and a Guttmann split-half reliability coefficient of 0.61 were obtained for the scale in the present study.

Peer bullying was assessed using the 5-item Peer bullying scale (Bosworth, Espelage & Simon, 2005). Participants responded to each of the five statement by ticking "none of the time" (0), "rarely" (1), "some of the time" (2) or "often" (3), with higher scores denoting more bullying experience. A Cronbach alpha of 0.57 and a Guttmann split-half reliability coefficient of 0.56 were obtained for the scale in the present study.

Procedure

The questionnaires were administered to secondary school students in Ijebu-North Local Government Area of Ogun State. Four (4) schools were randomly selected from all the secondary schools in Ijebu North Local Government area (through balloting technique). In all, four hundred questionnaires were administered, while three hundred and seventy questionnaires were retrieved with usable data. This represented a 92.5% return rate. The questionnaires were thereafter subjected to statistical analysis, using the 15th version of the statistical package for the social sciences (SPSS).

Results

We conducted an intercorrelational analysis of the variables in the study (age, sex, bullying, maternal bonding, paternal bonding and mental well-being). Results (see Table 1) indicated that age (r = -.14; p < .05), sex (r = -.15; p < .05), and bullying (r = -.35; p < .01) were significantly but negatively related to paternal bonding. This implied that younger students, males, and having more bullying experiences are significantly related to lower paternal bonding.

Table 1: Zero-order correlation showing the relationships among variables in the study

Variable	Age	Sex	Bullying	Maternal	Paternal	Mental
Age	-			bonding	bonding	well-being
Sex	14**	=				
Bullying	12*	17**	-			
Maternal bonding	03	19**	.17**	-		
Paternal bonding	14*	15*	35**	05		
Mental well-being	.03	.04	05	02	.14*	-

Results further indicated that only paternal bonding (r = .14; p<.05) was significantly related to mental well-being. In other words, the greater the adolescent's paternal bonding the better his/her mental well-being, and vice versa. Interestingly, bullying was not associated with mental well-being (r = -.05; p>.05). Also, maternal bonding was not significantly associated with mental well-being (r = -.02: p>.05).

Discussion

Findings of the present study indicated that paternal bonding was significantly and positively associated with adolescents' mental well-being. This finding is consistent with Hair et al' (2002) who found that higher quality parent-child relationships are associated a host of positive outcomes such as higher academic motivation and achievement, school engagement, better social skills, and lower rates of risky sexual behaviors. Conversely, low quality parent-child relationships have been found to be significantly associated with markedly poorer mental well-being, especially conduct disorder (Zaff et al, 2002). The finding in this study which indicated that only paternal bonding was associated with mental well-being of adolescents could be due to the fact that in contemporary societies, spending time with children are perceived by many

as a feminine occupation, such that most fathers are hardly at home thus making it become almost practically impossible for children to form any meaningful emotional bonding with them. It is plausible therefore, that those fathers (who are available for such relationships) with their children are likely to engender greater feelings of psychological well-being in their children.

Results also indicated that the relationship between bullying and mental well-being was not statistically significant. The finding appears to be in direct contradiction to earlier findings (such as Simanton et al's, 2000) who found that peer victimization is detrimental to well-being. It is possible that since most previous studies on bullying among adolescents were conducted in the western societies, methodological, cultural and idiosyncratic differences accounting for the seemingly contradictory findings cannot be ruled out. Another plausible reason for this finding could be that, just like many other categories of people in Nigeria, bullying might have become so common and normalized that it no longer affects adolescents negatively.

The implication of the findings of this study is the need for parents, especially fathers, to spend quality time and develop strong emotional bonding with their children with a view to enhancing their mental well-being. The need for more empirical studies on this subject matter cannot be overemphasized, especially given the several limitations of the present study (such as the relatively small sample size, the non-manipulation of variables of study such that causation could not be inferred, etc.).

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