

Adolescents' Perceived Parental Childrearing Practice and Its Effect on Their Psychosocial Functioning in Some Selected Secondary Schools of East Hararghe Zone, Ethiopia

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ABSTRACT

The purpose of this study was to examine the effect of childrearing practice on adolescent psychosocial functioning. In order to carry out this study, a sample of 328 of 133 males and 195 female adolescent students were selected randomly from three secondary schools of East Hararghe Zone. Data were collected through self-reporting questionnaire and analyzed using both descriptive and inferential statistical methods such as, frequency, tabulation, mean, standard deviation, range, one sample t-test, Pearson moment correlation, two-way ANOVA and multiple regression. Findings indicate that participants of the study have a reasonably acceptable level of psychosocial functioning and they perceive their parents' childrearing practice is fairly good. There is strong and significant relationship between parental childrearing practice and adolescents' psychosocial functioning. The gender disparity has been observed among the dimensions of child rearing practice on controlling and psychosocial functioning and also among its dimensions on behavior and relationship problems in favor of females. In addition, according to the results of ANOVA, there is psychosocial functioning difference among adolescents with respect to their level of parental childrearing practice. The main effects of gender and level of childrearing practice on psychosocial functioning are significant while together they do not have an interaction effect. Besides, most of the variability in explaining psychosocial functioning which is accounted for 64.4% is explained by parental childrearing practice and its dimension, nurturance, did not seem to explain variability in psychosocial functioning. In the end, recommendations are also made for how to properly address the gaps noted in this research.

Key words: Children, Childrearing, Psychosocial Functioning, East Haraghe Zone, Ethiopia

INTRODUCTION

Adolescence is a stage a person could pass through in his/her life span (Elder, 1980; Kaplan, 2004). Though adolescents are viewed differently across different societies and cultures given that it is socioculturally constructed reality (Kaplan, 2004), one thing that makes it universal for all is the time where extensive changes in person's biological, cognitive, psychological, and social are experienced in an interrelated manner (Lerner, 2009). These changes are so fundamental that they transform the growing person from childhood to adulthood (Lerner, 2009). As it is a transition period from childhood to adulthood life (Kaplan, 2004; Steinberg, 2002) and due to the changes that have attained, adolescents may come to struggle for independence, tried to take adult-status, identity formation; mature social position and relationship with others (Lerner & Steinberg, 2004). In this respect, behavioral change could be observed in adolescents that are often accompanied by mood instability aggressiveness, adventurousness, experimentation with drugs and sexual activity and others. In addition, adolescents have a feeling of

independence and invulnerability, thinking that they are able to handle situations by themselves (Pappalia, Olds, & Feldman, 2001). Moreover, as a transition period, adolescence is a very critical life time where important career, social role involvement, interpersonal related decisions could be made. Their decision may lead adolescents to either productive or unproductive life that is why this period is considered as a problem age (Lerner & Steinberg, 2004) that requires parental or adult care and support.

Among others, Family is the most important socializing agents where an adolescent's life is shaped and determined (Darling & Steinberg, 1993). This means, the family environment especially those of parents or immediate caregivers are there to instill children with the base for their behavior, emotion and cognition that in turn will affect their later personality. Erikson (1968), for example, postulates that the quality relationship children established with their immediate care givers/parents and important others in the stages of psychosocial development determines the success of the progress of children in managing psychological cri-

sis. Likewise, Bowlby's (1980), attachment theory explained that the children's problem behavior occurred from the initial bonds between children and their caregivers (Cassidy & Shaver, 1999 as cited in Carr, 2006).

Meanwhile, different theories in psychology that are focused on the psychosocial aspect emphasize the significant role of earlier childhood period on individuals' personality development (Erikson, 1968; Bowlby, 1988). For instance, failure on the part of parents, guardians and/or teachers to meet the psychological needs of children at any stage in their developmental process has been implicated in personality disorders (Moime, 2009) or poor psychosocial functioning. Psychosocial functioning is an aspect of development one could attain in his/her life. The aspect of psychosocial functioning could be explained as psychosocial wellbeing (a state of good mental health, social adaptation, or a combination of both (King, De Silva, Stein, & Patel, 2009; Roberts, Odong, Browne, Ocaka, Geissler, & Sondorp, 2009) and psychosocial dysfunction (the state of deviations from normal human functions). Psychosocial development during adolescence, therefore, involves establishing a realistic and coherent sense of identity in the context of relating to others and learning to cope with stress and to manage emotions (Santrock, 2001), processes that are life-long issues for most people. Theoretically based psychosocial constructs have been related to a number of developmental issues in children and adolescents (Norman, Carlson, Sallis, Wagner, Calfas, & Patrick, 2010) while specific others such as difficult life events can permanently truncate a child's hope for the future.

Hence, as studies in the area show, mostly, parental childrearing practices may involve many factors such as, acceptance, punishment, protectiveness, responsibility, responsiveness, reward, understanding, permissiveness, encouragement, emotional stability, control and patience to influence the child's behavior, cognition and emotion (George & Rajan, 2012). Similarly, Lehrera and Tremblay (2007) report that increasing parental regulation to their children reduces their risk behaviors. The children's behavioral problems, as reported in Vanas and Janssens (2002), are related to a lack of parental support, an imbalanced parent-child relationship, a lack of cohesion and structure in the family, and a poor quality communication between parents and children.

In addition, a study conducted in the UK by Morgan, Brugha, Fryers and Stewart-Brown (2012), revealed that caring, supportive and understanding relationships in childhood protect them against poor mental health in adulthood. Another study conducted by Swan and Stavros (1973) reported that supportive and encouraging childrearing facilitates effective learning on students.

With regard to gender difference in psychosocial functioning, as explained in Brain, (1997, p. 111) "women are social, men are individualistic..." this may affect their psychosocial health. This means that women are better in communication and interpersonal relationship than men. In support of this, Wood, Christensen, Hebl, and Rothgerber (1997) evident that women place greater emphasis on relations with others compared to men. In addition, Bakan (1966) explained men are more of agentic which would be

characterized by traits such as instrumentality, assertiveness, and self-confidence, whereas women are thought to be oriented toward communion characterized by warmth, expressiveness, and concern for others. Similarly, Bem (1974) has also explained women as comfortable in small groups because they are highly interdependent and too detailed in sharing ideas while men feel comfort in large groups to play or act on something together.

In view of local studies, though very limited in number, there are some studies conducted in childrearing practice in Ethiopia. Among these for example, a correlation study conducted on parental childrearing practices and values with academic achievement in Wereda Raya Alamata reported that there were significantly different results in students' academic achievement with respect to the occupational types of the parents (Reda, 2014). Moreover, as shown in the same study, parental values had a positive and significant relationship with children's academic achievement.

Another study conducted in Arsi Oromo by Abera (2014) came up with several important findings about parenting values, beliefs, and practices of Arsi people and about their relationships though the study did not address issues related to childrearing and its possible effect on children's psychosocial functioning. There was also a study conducted in Addis Ababa context by Tefera (2014) that reported paternal involvement was multidimensional in the sense that adolescents considered direct and indirect ways, acting and capacity building roles and caring and masculine-oriented desires of fathers' involvement with children. Significant differences and relationships were also documented between the two components of ways, roles, and desires. Even if, all of the local studies have had important findings on childrearing none of them directly touches the issue in relation to psychosocial functioning which is studied in the present research.

In conclusion, although, the literature may force somebody to take a position regarding the effect of parental childrearing practice on adolescents' psychosocial functioning, it would be harsh and misleading to take it as granted on the context where the issue has not been exhaustively studied since there is no objective reality. This means, the reality might be altered from one place to another due to the fact that the life style, culture, psychological processes, community's functioning and expectations of their children. Thus, it is very important to make sure whether the findings of this study disprove the already existing knowledge about the issue. The study is believed to be important for several reasons: (i) to learn about the effect of childrearing practice on adolescent's psychosocial development; (ii) to fill the contextual knowledge gap observed so far given the idea that the concept of childrearing is embedded with values, cultures and expectations of a society (Evans & Myers, 1994); (iii) to provide insight to those who want to develop strategies in enabling parents to support their children towards having good psychosocial functioning. Eventually, this study examined the relationship between adolescents' perceived childrearing practice and their psychosocial functioning in East Hararge Zone.

Research Questions Research Questions

This study tried to answer the following research questions:

1. What is the status of adolescents' perceived parental childrearing practice and their psychosocial functioning?
2. Is there any relationship between child rearing practice and psychosocial functioning?
3. What are the main effects and interaction effect of parents' level of childrearing practice and gender on adolescents' psychosocial functioning?
4. To what extent do age, gender and dimensions of childrearing practice predict adolescents' psychosocial functioning?

THEORETICAL BACKGROUND

The concept of psychosocial functioning comprises social adaptability, interpersonal skills, optimism and coping strategy. It has been also viewed as a combination of psychosocial well-being that is a state of good mental health and social adaptation.

So far numerous researchers have noted that adolescent psychosocial functioning is related with parental childrearing practices. Erikson's (1968) psychosocial development theory posits that psychological challenges may lead some into healthy and others into unhealthy personality development. This means, the quality of relationship one can establish with others and the successful resolution of psychological challenges in the earlier stages of life are important conditions for healthy personality development. Similarly, for Bowlby's (1988) attachment theory, children's secured attachment with caregivers is predictive of a wide range of cognitive and social competencies later in their lives, many of which are related to personality functioning. The nature of attachment that one has had in his infancy with caregivers determines one's psychosocial functioning.

Over all, based on the theoretical and empirical insights obtained from literature reviewed, the following insight was developed. The parental childrearing practice is assumed to have positive effect on adolescents' psychosocial functioning. Moreover, when parents are caring and supportive, and when they seek to shape socially acceptable behaviors in their children, they will develop healthy psychosocial functioning, or personality.

METHODS

As mentioned earlier, this study aimed at investigating the childrearing practice as perceived by adolescents in East Hararghe Zone, Oromia region and its effects on their psychosocial functioning. The quantitative research approach has been employed to acquire the required data. Thus, this section describes the study site, sampling techniques, instrument of data collection, and instrument validation followed by methods of data analysis.

The Study Site

This study was conducted in some selected secondary schools of Misraq Hararghe (or East Hararghe) which is

one of the Zones of Oromia Regional state, Ethiopia. East Hararge takes its name from the former province of Hararghe. East Hararge is bordered on the southwest by the Shebelle River which separates it from Bale, on the west by West Hararghe, on the north by Dire Dawa and on the north and east by the Somali Region. The Harari Region is an enclave inside this zone. Towns and cities in East Hararge include Haramaya, Babelle and Fugnan Bira. Its highest point is Gara Muleta.

Sample and Sampling Procedure

The study was carried out in randomly selected adolescents of Haramaya secondary and preparatory school, Awaday secondary and preparatory school and Adele secondary and preparatory schools of East Hararghe Zone. These schools are composed of a total of 3,654 students (1,498 males and 2,156 females) and School wise, 720 (300 males and 410 females) from Adele, 1,830 (770 males and 1,060 females) from Awaday and 1,100 (460 males and 640 females).

With regard to sample size determination, using Neumann's (1997) guiding principles for selecting representative samples for quantitative studies in social science i.e. if there is 1000 population 30%; if 10000, 10% and if more, the proportion is supposed to be reduced in to 1%. Accordingly, participants of this study were 365 (150 males and 215 female) selected randomly from the total population of 3654; that is, 10% of the total sampling frame of the study. After the size was determined, in order to involve proportional number of participants a stratum was made based on the participants' gender. Then, participants were selected from the strata's we made so far using systematic sampling methods from the sampling frame. This means, the study used stratified and systematic sampling methods. The number of samples which could finally be used in data analysis was 328 participants who provided complete data.

Instruments

In order to obtain the needed data, this study employed self-reporting questionnaire so as to measure variables of interest. The instruments had three parts. Part one comprised structured items, mainly about the participants' demographic information. The second part of the instrument was adolescent's perceived childrearing practice scale and the last part consisted of adolescent's psychosocial functioning inventory (APFI).

Parental Childrearing Practice Scale

The childrearing practice scale that was adapted from Dame (2014) is made up of 40 items with five-point Likert scale ranging from '1' signifying 'strongly disagree' to '5' signifying 'strongly agree'. The scale consisted of four subscales: 11 items on parental nurturance, 7 items on parental consistency, 8 items on parental responsiveness, and 14 items on parental control. Each of the subscales was modified to suit adolescents' perception of their parents' childrearing

practice. In this context, parental nurturance refers to caregiver's provision of support, warmth, encouragement, and care for the child; responsiveness refers to caregiver's reaction to the child's basic needs; consistency refers to caregivers' provision of firm and uniform treatment and guidance to the child; and control refers to caregiver's provision of appropriate discipline, direction, and restraint when managed by their parents.

Adolescents' psychosocial Functioning Inventory (APFI)

The Adolescents' Psychosocial Functioning Inventory (APFI) was developed by Akapa, Bamgboye, and Baiyewu (2015). It addresses relevant challenges and expectations of adolescents in the Low-Middle Income Countries (LMIC). The APFI that has 23 items with 3-points Likert-type response scale where 0 = not at all, 1 = sometimes and 2 = very often was developed following different statistical procedures. The overall reliability of the APFI scale was $\alpha = 0.83$ while its three subscales: Optimism and Coping Strategy (OCS), Behavior and Relationship Problems (BRP), and General Psychosocial Dysfunctions (GPD) had moderate to high reliability ($\alpha = 0.59$ for OCS, $\alpha = 0.57$ for BRP and $\alpha = 0.90$ for GPD). Since APFI is reportedly a valid and reliable measure for assessing psychosocial functioning among adolescents in the LMIC (Akapa et al., 2015), the researchers opted to use it in this study. For the study purpose, the APFI was first translated into the local language (i.e. Afan Oromo) by an instructor of Afan Oromo from Haramaya University, and high reliability ($\alpha = .87$) was recorded.

Data Analysis

Descriptive statistics methods, including frequency, percentage, mean, standard deviation were used. Inferential methods were also used, including one-sample t-test to analyze the status of psychosocial functioning. Additionally, the relationship between variables of the study was analyzed using Pearson product Moment Correlation. And finally, successive analysis of how gender and level of parental childrearing practice separately and jointly produces difference on psychosocial functioning and predictor variables were determined using the statistical tools like two-way ANOVA and Multiple regression.

RESULTS

This section presents the demographic characteristic of the study participants. Then, the status of adolescents' perceived childrearing practice and the level of psychosocial functioning are presented.

Demographic Features of the Participants

As portrayed in the Table 1, 133 (40.55%) of the participants were males and 195 (59.45%) were females. The descriptive statistics in the same table also shows that the age range of adolescents participated in the study is 6, ranging from a minimum of 13 to a maximum of 19 years ($M = 16.37$, $SD = 1.14$).

Table 1. Frequency distribution of participants' gender, school, grade and age

School	Gender					
	Male		Female		Total	
	N	%	N	%	N	%
Adele	29	8.84	33	10.06	62	18.90
Awoday	75	22.87	93	28.35	168	51.22
Haramaya	29	8.84	69	21.04	98	29.88
Total	133	40.55	195	59.45	328	100
Grade						
9	22	6.71	34	10.37	56	17.07
10	86	26.22	111	33.84	197	60.06
11	16	4.88	33	10.06	49	14.94
12	9	2.74	17	5.18	26	7.93
Total	133	40.55	195	59.45	328	100

Characteristics of the Variables

Before any parametric statistics was run, the dependent variable (psychosocial functioning) was tested whether or not it complies with the assumption of normality. In an effort to check this out, skewness and kurtosis z-values, Shapiro Wilk test p-value, histograms and box plots were numerically and visually inspected. The skewness and kurtosis z-values (the statistics divided by the standard error) range between ± 1.96 . Accordingly, the psychosocial functioning scores were approximately normally distributed for all groups. Moreover, the Shapiro Wilk test indicated that psychosocial functioning scores were normally distributed, as the p-values for all groups were above .05 and the skewness and kurtosis z-values. The Q-Q box plots and histogram for the psychosocial functioning scores also indicated normal distribution of data across levels of childrearing practice, as the Q-Q box plots were almost symmetrical and the curve in the histogram was bell shaped.

Status of Participants' Perceived Childrearing Practice

The major interest in this research is to describe the status of participants' perceived parental childrearing practice. Hence, the participants' scores were grouped into three categories as poor, medium and good based on the observed mean score and one standard deviation to both sides. Accordingly, as could be seen in Table 2, the participants scores were grouped based on the one standard deviation plus or minus to the mean as medium and the two extremes to the left as poor and the right as good. Thus, as can be seen in Table 2, 240 (73.17%) among all the participants were categorized as the medium's group and the rest 34 (10.37%) and 54 (16.46%) of the participants were grouped as poor and good, respectively on the childrearing test. A higher score would indicate that the participant believed that her/his parents raised their children in a good way (with nurturance, responsiveness, consistency and controlling).

On the other hand, to determine the level of adolescents' psychosocial functioning the scores of adolescent

psychosocial functioning inventory (APFI) were converted into descriptive statistical summary as presented in Table 2. Given that the inventory had 23 items to be rated with 3 point Likert scale (0, 1 and 2), the mean is $23 = 0+1+2/3 = 1*23$, with minimum and maximum values ranging between 0 and 46. Whereas, the observed mean score of participants' psychosocial functioning is 20.88 which is a bit lower than the expected mean which is statistically significant ($t_{(327)} = -216.99, p < .000$) difference. The result suggested that, though it is slight, the status of adolescents in this study is lower than the expected level of psychosocial functioning.

Dimensions of Childrearing Practice and Adolescents' Psychosocial Functioning

Parental childrearing practice was defined in terms of four important dimensions such as *nurturance, responsiveness, consistency and control*. The descriptive statistics and one-sample mean test results are summarized in Table 3. Referring to this table, we can observe that all the dimensions are significantly lower than the respective expected means: nurturance ($t_{(327)} = -9.284, p < .000$), responsiveness ($t_{(327)} = -8.936, p < .000$), consistency ($t_{(327)} = -18.124, p < .000$), and control ($t_{(327)} = -15.996, p < .000$).

Similarly, the descriptive statistics and one-sample mean test results in Table 3 showed that all the dimensions are significantly lower than the respective expected means: optimism and coping strategy/OCS ($t_{(327)} = -3.350, p < .001$), gen-

eral psychosocial dysfunction/GPD ($t_{(327)} = -4.163, p < .000$) and behavior and relationship problem/BRP ($t_{(327)} = -2.494, p < .013$).

Correlation among Variables of the Study

In order to test the relationship between adolescents' psychosocial functioning with their age, gender, grade level and parental childrearing practice as perceived by the participants, bivariate Pearson moment correlation was computed. The result indicated that participants' psychosocial functioning has a significant relationship with gender ($r_{(327)} = -.124, p < .05$), grade level ($r_{(327)} = -.251, p < .01$), and childrearing practice ($r_{(327)} = .789, p < .01$). The result suggests that those who are raised in a good way are more likely to have a good psychosocial functioning than those who are poorly raised with nurturance responsiveness, consistency and control Table 4.

Interaction Effects on Adolescents' Psychosocial Functioning

As shown in Table 5, the psychosocial functioning mean score of males from good childrearing practice is the highest followed by those from moderate and poor raising, respectively. The same is true for females from good childrearing practice who have the highest mean score.

Table 2. Status of participants' psychosocial functioning and their perceived parental childrearing practice

Variables	Status	Gender				Mean		SD	t	p
		Male	Female	Total		Observed score On APCRP	Expected score On APCRP			
		N	N	N	%					
APCRP	Poor	8	26	34	10.37	103.07	120	21.50	-14.26	0.000
	Medium	102	138	240	73.17	Min=59	Min=40			
	Good	23	31	54	16.46	Max=168	Max=200			
	Total	133	195	328	100					
APF		133	195	328	100	APF 20.88 Min=5 Max=41	APF 23 Min=0 Max=46	8.27	-216.99	0.000

*df=327, p<0.05, APCRP: adolescents' perceived childrearing practice APF: Adolescent psychosocial functioning

Table 3. One sample t-test result on the dimension of parental childrearing practice and adolescents' psychosocial functioning

Dimensions	Item number	Expected mean	M	Max	Min	SD	t	p
PCRP	11	33	29.08	54	13	7.65	-9.284	0.000
Nurturance								
Responsiveness	8	24	21.54	36	9	4.98	-8.936	0.000
Consistency	7	21	16.27	30	8	4.73	-18.124	0.000
Control	14	42	36.24	57	23	6.52	-15.996	0.000
APF	4	4	3.75	7	0	1.35	-3.350	0.001
OCS								
GPD	15	15	13.39	29	0	7.03	-4.163	0.000
BRP	4	4	3.70	8	0	2.17	-2.494	0.013

*df = 327, p < .05

In order to determine whether this difference is significant and interaction effect of the two main effects, two-way ANOVA was computed (Table 6). As the two-way ANOVA results showed in Table 6, there is statistically significant gender difference ($F_{(1,322)} = 4.404, p=.037$) on the mean scores of male (20.03) and female (22.11) participants' psychosocial functioning in favor of females. The result suggests that gender really has an effect on adolescents' psychosocial functioning. Similarly, a statistically significant difference ($F_{(2,322)} = 108.458, p=.000$) on the mean score of participants' psychosocial functioning from poor (12.59) moderate (19.52) and good (32.11) parental childrearing practice.

This indicates parental childrearing practice have really significant effect on participants psychosocial functioning. Even though the factors (main effects) are significantly influencing psychosocial functioning discretely, those factors are failed to produce significant interaction effect ($F_{(2,322)} = .521, p=.594$) on psychosocial functioning.

As can be seen in Table 7, all the results of the pair wise comparison showed that there is significant difference on the comparisons. This indicated there is statistically significant mean difference on the psychosocial functioning scores of adolescents who come from different parental childrearing practice. This means, there is statistically significant mean

Table 4. Correlations among variables

Variables	1	2	3	4	5
Gender ¹ (1 male, 0 female)	1				
Age ²	0.058	1			
Grade ³	-0.049	0.513**	1		
APPCR ⁴	0.094	-0.053	-0.244**	1	
APF ⁵	-0.124*	-0.081	-0.251**	0.789**	1

**Correlation is significant at the 0.01 level (2-tailed)

*Correlation is significant at the 0.05 level (2-tailed)

Table 5. Male and female adolescents' psychosocial functioning scores by their level of perceived parental childrearing practice

Gender	APCRP											
	Poor			Moderate			Good			Total		
	N	M	SD	N	M	SD	N	M	SD	N	M	SD
Male ¹	8	11.73	3.35	102	19.07	6.28	23	31.29	4.62	133	20.03	7.92
Female ⁰	26	15.38	1.77	138	20.14	7.72	31	33.22	3.16	195	22.11	8.64
Total	34	12.59	3.41	240	19.52	6.94	54	32.11	4.45	328	20.87	8.27

Table 6. ANOVA summary of the effects of parental childrearing practice and gender on adolescents' psychosocial functioning

Source	Sum squares	df	Mean squares	F	p
Corrected Model	9790.093	5	1958.019	50.071	0.000
Childrearing	8482.475	2	4241.238	108.458	0.000
gender	172.231	1	17.2.231	4.404	0.037
Childrearing * gender	40.761	2	20.381	0.521	0.594
Error	12591.782	322	39.105		
Total	22381.875	327			

Table 7. Scheffe's Pair Wise comparison test results in psychosocial functioning among adolescents from divers childrearing practice

I childrearing	J childrearing	Mean difference (I-J)	Standard error	p
Poor	Moderate	-6.93*	1.146	0.000
	Good	-19.52*	1.369	0.000
Moderate	Poor	6.93*	1.146	0.000
	Moderate	-12.59*	0.942	0.000
Good	Poor	19.52*	1.369	0.000
	Moderate	12.59*	0.942	0.000

difference on psychosocial functioning between adolescents from good, moderate and poor parental childrearing practice in favor of the goodly raised one. Likewise, there is also statistically significant mean difference on the psychosocial functioning scores between moderate and poor parental childrearing practice in favor of moderately raised one. All in all, as observed in the above pair wise comparison tests, the direction of group mean difference favors adolescents from good parental childrearing practice.

Contributions of variables on psychosocial functioning

Multiple regression was computed to learn about the contributions of independent variables (such as gender, age, and the dimensions of childrearing practice) on adolescent's psychosocial functioning. As shown in the Table 8, 64.4% ($R^2=.644$) of the variance on the students psychosocial functioning is explained by the predictor variables. Indeed, the test of beta weights indicated that among others responsiveness, consistency and control are the variables that make significant contributions. This means, the combined effect of the dimensions of childrearing practice that are responsiveness, consistency and control explained 64.4% of the total variability in adolescent psychosocial functioning ($F_{(3, 324)} = 96.739, p<.000$). Thus, the variables other than those studied in this study accounted for by 35.6% of the variability in adolescents' psychosocial functioning.

A stepwise multiple regression was performed to determine the contribution of the variables entered in the above analysis as a predictor of psychosocial functioning. Accordingly, responsiveness added significantly to the prediction of psychosocial functioning ($F_{1, 326} = 398.741, p<.000$), accounting for 55% ($R^2=.550$) of the variance. The addition of control ($F_{2, 325} = 276.661, p<.000$) and control and consistency ($F_{3, 324} = 190.098, p<.000$) to the original equation (responsiveness) added significantly to the prediction of psychoso-

cial functioning, accounting for 63% ($R^2=.630$) and 63.8 % ($R^2=.638$) of the variance respectively (Table 9).

DISCUSSION

Unlike the researchers' expectation, this study showed that majority of the participants perceived their parents as they are fairly good in childrearing practice. In fact, it is uncommon to rate one's parent as they are bad or poor parents for different reasons like environmental adaptability that is one aspect of human functioning. Due to an individual's adaptation to his or her environment, there is always subjectivity in interpreting situations where he or she has survived. Even though the researchers noted from literatures that the concept of childrearing practice is culturally and situationally embedded (Evans & Myers, 1994), the researchers expected that there will be poor parental childrearing practice because of the life style of the study population. To say more, people under this study are living in the cash crop area where parents are highly involved in the production and selling of Khat/Chat than that of discharging parental responsibilities as demanded by children. Actually, the researchers' expectation was not only for the parents' involvement on farming and selling of Khat that restricted them from giving the needed care and support for their children, but also for the frequent occurrence of drought and shortage of food. In view of that, both of the parents might not spend much of their time instead they let their children to play at home while they are at farm or going to market. This means, at day time fathers are devoted in cultivating crops while mothers used up their time in preparing food for the family, cleaning home and selling the Chat by taking into the nearby market or usually to Aweday, the center of Chat market even in the country, instead of giving due time to raise their children in a good way (with nurturance, responsiveness, consistency and controlling).

Table 8. Results of multiple regression

Effects	Standardized coefficients (Beta)	R ²	F	Df	t	p
On APF	-	0.644	96.739	6, 321, 327	-1.428	0.000
Of gender	0.039				1.116	0.256
Of age	-0.056				-1.665	0.097
Of nurturance	0.076				1.123	0.262
Of responsiveness	0.361				6.007	0.000
Of consistency	0.124				2.098	0.037
Of control	0.317				5.766	0.000

Table 9. Results of multiple regression (stepwise)

Model	Standardized coefficients (Beta)	R ²	F	Df	t	p
Responsiveness	0.742	0.550	398.741	1, 326	19.968	0.000
Responsiveness	0.468	0.630	276.661	2, 325	9.967	0.000
Control	0.393				8.372	0.000
Responsiveness	0.391	0.638	190.098	3,324	7.094	0.000
Control	0.347				6.979	0.000
Consistency	0.144				2.629	0.000

It is apparent that children in low-income countries are prone to poor psychosocial development (UNICEF, 2010). Taking this fact into account, obviously, it is expected that adolescents have poor psychosocial functioning since the study area is found in low-income country. Additionally, we have learned that the status of adolescents in the study found to have low psychosocial functioning as well as its three dimensions (optimistic and coping strategy/OCS, general psychosocial dysfunction/GPD and behavior and relationship problem/BRP). This might be attributed to the existence of low level of childrearing practice and its four dimensions (Nurturance, responsiveness, consistency and control) as been noted in the present study. In connection, Vanas and Jassens (2002) noted that the children's behavioral problems are attributed to factors such as lack of parental support, an imbalanced parent-child relationship, a lack of cohesion and structure in the family, and a poor quality communication between parents and children. In support of this idea, though not directly related to the issue, research evidence indicates that caring, supportive and understanding relationships in childhood protect the child against poor mental health (Morgan et al., 2012); influence children's cognitive skills (Swan and Stavros, 1973); and facilitates good academic achievement (Reda, 2014) in adulthood. Therefore, the low level of psychosocial functioning is stimulated, among others, by low level of parental childrearing practice.

In general as stated by Darling and Steinberg, (1993) family is the most important socializing agent where children's life is shaped and determined. The present study shows that there is a strong relationship between parental childrearing practice and adolescents' psychosocial functioning. This means, aspects of healthy or problematic personality are attributed to parental childrearing or the way parents raise their children. In support of this, different research findings (such as Martin & Maccoby, 1983) and theories (such as Erikson's (1968) psychosocial development and Bowlby's (1988) attachment theory) have also come up with the idea that the quality childrearing or socialization process are likely to determine the more healthy psychosocial development in children's development. Furthermore, the findings from different contexts showed that the parental support, acceptance, encouragement, understanding, responsiveness, and punishment, generally referred to as childrearing practice, have an impact on the child's behavior, cognition and emotion (George & Rajan, 2012), protect children from behavior problems (Lehrera & Tremblay, 2007; Vanas, & Janssens, 2002), protect children against mental illness (Morgan et al., 2012), and facilitate effective learning of students (Stavros, 1973). Likewise, the two-way ANOVA results also showed that psychosocial functioning was significantly influenced by the level of parental childrearing practice and gender though these two main effects failed to produce a significant interaction effect. Even though there is a significant gender and childrearing practice effect on psychosocial functioning, this does not mean that there is disparity in parents' childrearing practice for children of two genders. The psychosocial functioning difference between males and females could be attributed to other factors.

Moreover, psychosocial functioning is found to have significant negative relationship with gender and grade level though very small. One possible explanation for this result could be attributed to differences in women and men's natures; according to Brain (1997, p. 111), "women are social [whereas] men are individualistic," a difference that might affect their psychosocial health. This gender difference in psychosocial functioning could be stimulated by the greater interpersonal self-concept of females than males (Baumeister & Sommer, 1997; Cross & Madson, 1997).

Over all, the different forms of analysis in the present study showed that the good childrearing practice has an effect on the psychosocial functioning of adolescents. In fact, various explanations can be given for the development of psychosocial functioning. Among others, this study noted that childrearing practice accounted for 64.4% of the explained variance in psychosocial functioning.

CONCLUSION

The findings of this research generally made the following major conclusions regarding the childrearing practice and psychosocial functioning as perceived by adolescent students in three selected high schools of East Hararge zone, Oromia, Ethiopia:

- The status of parental childrearing practice in the study area is moderate or reasonably acceptable as perceived by adolescents. In contrast, the score of childrearing practice was found to be significantly lower than the expected mean on the test.
- The status of adolescents' psychosocial functioning in general and also on its dimensions was poor.
- There was positive and statistically significant relationship between parental childrearing practice and adolescents' psychosocial functioning. This means, as children are raised with good care, support, understanding, encouragement, responsiveness, consistent disciplining and controlling they are more likely to develop healthy psychosocial functioning.
- Grade and gender are negatively related with psychosocial functioning which probably suggests that as grade level increases, adolescents psychosocial functioning is likely to decrease; and additionally, females are likely to have better psychosocial functioning than males.
- There is psychosocial functioning difference among adolescents with respect to their level of parental childrearing practice.
- The main effects of gender and level of childrearing practice on psychosocial functioning were significant whereas their interaction effect was insignificant.
- A considerable amount (64.4%) of variability in psychosocial functioning is explained by parental childrearing practice, and among its dimensions nurturance does not seem to explain the variability in psychosocial functioning.

Based on the findings of the study, the following suggestions would be forwarded to address the problem stated earlier:

- As perceived by adolescents, the parental childrearing practice was found to be lower or the average score on

the scale was lower than the expected level. Thus, as parent-child relationship or childrearing is the base for children development, psychologists, sociologists, governmental and non-governmental organizations should create awareness on the importance of childrearing practice in communities.

- Our findings illustrated that almost half of the participants scored below the mean on psychosocial functioning scale, though in general their status was moderate. Therefore, teachers, psychologists, sociologists, governmental and non-governmental organizations are advised to enhance parents' awareness of how they can develop children's psychosocial wellbeing.
- Further studies need to be conducted by psychologists, social workers, sociologists and experts other related disciplines by involving parents and other variables like parental occupation status for better understand the issue.

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