PERCEIVED PARENTING BEHAVIOR AND ITS RELATIONSHIP TO LEVELS OF SELF ESTEEM AMONG THE ADOLESCENTS IN SECONDARY SCHOOLS IN NAIROBI COUNTY

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Parenting and adolescents self esteem

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Abstract

Introduction: Parents play an important role in shaping their children's character and are considered an important determinant in several aspects of their children's outcome including how they view themselves. Parent child relationship is important and influential to the child's self esteem as posited by several researchers mainly in Europe. The concept of self esteem and the role it plays on a person has been described in many personality theories. Local studies on the subject are scanty though those done in Europe reported statistical significant relationship with self esteem. The current study set out to investigate whether there is a relationship between levels of self esteem and their perception of their parent parental behavior in public day secondary schools in the Nairobi County, Kenya.

Method: A random sample of school going adolescents was taken from a stratified sample of 6 day public secondary schools in Nairobi County (Kenya). Self administered instruments were used to measure perceived parental behavior and levels of self esteem in a total of 454 students. Variables in the study included demographic data, parenting styles/forms of child abuse and levels of self esteem.

Results: Mothers were ranked high on emotional neglect compared to fathers. However, adolescents did not perceive their mothers as physically neglectful towards them compared to their fathers who they perceived as physically neglectful. Fathers were also ranked high on physical abuse compared to mothers. Further analysis revealed that authoritarian parenting style and the four forms of child abuse were negatively correlated to levels of self esteem.

Conclusions: This study suggests that parental behavior has a statistical significant association with adolescents' level of self esteem. Factors that play a role in low self esteem needs to be explored. This study paves way for future studies around the topic of parenting and levels of self esteem, and creates a deeper understanding on the subject.

Abbreviations

KNH	-	Kenyatta National Hospital
EMBU	-	Egna Minnen Betraffande Uppfostran (Swedish acronym for “My Memories of Upbringing)
RSE	-	Rosenenberg self-esteem scale
SPSS	-	Statistical Package for the Social Sciences
REJ		Rejection
EMOTW		Emotional warmth
OVERP		Overprotection
SES		socio economic status
KDHS		Kenya Demographic and Heath Survey

Terminologies

Adolescent	a person aged 12- 19 years in this study
Self-esteem	the sum of attitudes which depend on perceptions, thoughts, evaluations, feelings and behavioral tendencies aimed toward ourselves, the way we are and behave, and our body's and character's features
Parenting styles	attitudes toward the child that is communicated to the child and creates an emotional climate in which parents' behavior is expressed. The four documented parenting styles are;-authoritative, authoritarian, permissive and indifferent or neglectful
Parenting behavior	parenting behavior is defined as specific content and socialization goals (e.g. school achievement) used by parents and reported by children
Authoritative parent	parent display high levels of both responsiveness and demandingness. They are warm, nurturing, and sensitive to their child's needs and consistently consider the child's age and maturity when forming behavioral expectations.
Authoritarian parent	parent display low responsiveness and high demandingness. They are often cold, unsupportive, insensitive to the child's needs, and demanding in their control.
Indulgent parent	also called permissive. Parent use high responsiveness but low demandingness; they believe that fewer rules and expectations for appropriate behavior benefit children's development.

Uninvolved parent	also called Indifferent or neglectful parent; parent display low levels of both responsiveness and demandingness. They are emotionally detached and withdrawn, and have few rules and expectations.
Emotional warmth	the parent ensures that the child's emotional needs are met giving the child secure, stable and affectionate relationships is the quality of being intimate and attached. It also suggests love, generosity, sensitivity, kindness, friendliness, unconditional acceptance, and fondness.
Rejection	being indifferent to children
Overprotection	being intrusive, excessive contact, infatilezation and prevention of independent behavior
Child abuse	any act or series of acts of commission or omission by a parent or other caregiver that result in harm, potential for harm, or threat of harm to a child. Child abuse can be in form of neglect, physical abuse, psychological/emotional abuse, and child sexual abuse.
Physical Child abuse	physical abuse is physical aggression directed at a child by a caregiver via various non-accidental means, including hitting with a hand, stick, strap, or other object; punching; kicking; shaking; throwing; burning; stabbing; or choking to the extent that demonstrable harm results

Child physical neglect	is usually typified by an ongoing pattern of inadequate care' it involves the parent or caregiver not providing the child with basic necessities. Physical neglect also includes child abandonment, inadequate supervision, rejection of a child leading to expulsion from the home and failure to adequately provide for the child's safety and physical needs.
Psychological child abuse	Psychological also called Emotional child abuse is any attitude, behavior, or failure to act that interferes with a child's mental health or social development ranging from a simple verbal insult to an extreme form of punishment. . Emotional child abuse is also sometimes termed psychological child abuse, verbal child abuse, or mental injury of a child
Emotional neglect	Emotional neglect is the failure to provide adequate nurturing and affection to a child or the refusal or delay in ensuring that a child receives needed treatment for emotional or behavioral problems. Emotional neglect occurs when a parent purposefully or ignorantly overlooks the signs that a child needs comfort or attention and includes withholding love, rejecting a child, and ignoring a child's emotional needs.
Child sexual abuse	Child sexual abuse is a form of child abuse in which an adult or older adolescent abuses a child for sexual stimulation. It is any sexual act between an adult and a child, including penetration,

	intercourse, incest, rape, oral sex, and sodomy; include asking or pressuring a child to engage in sexual activities, indecent exposure of the genitals to a child, displaying pornography to a child, actual sexual contact against a child, physical contact with the child's genitals, viewing of the child's genitalia without physical contact, or using a child to produce child pornography
Adaptive parenting style	the parenting style is characterized by low rejection and low overprotection
Mal-adaptive parenting style	the style is characterized by high rejection and high overprotection
Wellbeing	attitudes, perceptions, thoughts, self-evaluations, feelings and behavioral tendencies aimed toward one, summing up in giving a person feeling of self worth.
Secondary schools	secondary schools and high schools in this text will be used interchangeably and holds the same meaning; post primary school education in Kenyan 8-4-4 system

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Chapter One

1.0 Introduction

Parents play an important role in shaping their children's character and are considered an important determinant in several aspects of their children's outcome including how they view themselves. Parent child relationship is important and influential to the child's self esteem as posited by several researchers mainly in Europe.

1.1 Background

The concept of self esteem was constructed by William James (1890), a western psychologists and sociologists socially within the last century. The role played by self-esteem in defining human nature can be found in most theories of personality, e.g., Adler, 1958; Maslow, 1968; Rogers, 1951; as cited by Santrock, (2007). Self-esteem is the sum of attitudes which depend on perceptions, thoughts, evaluations, feelings and behavioral tendencies aimed toward ourselves, the way we are and behave, and our body's and character's features. The biggest influence on self-esteem is parenting, acceptance, and control. In other words, it's one self's evaluative perception. Young children have relatively high self-esteem, which gradually declines over the course of childhood. As children develop cognitively, they begin to base their self-evaluations on external feedback and social comparisons. As they grow older, they form a more balanced and accurate appraisal of their academic competence, social skills, attractiveness, and other personal characteristics. Self-esteem continues to decline during adolescence which has been attributed to the adolescent body image and other problems associated with puberty. Adolescence is the critical period for the development of self-esteem and self-identity, and low self-esteem may endanger adolescents' emotional regulation (Tsang, Yip, 2006). Eric Erickson as cited by Robins et al. (2001) described adolescence as a critical stage in the lives of individuals, in which one consolidate their values and identity and they conquer autonomy, achievements that frequently lead to psychological and relational tensions and the risk of problematic or maladaptive behaviors.

Psychologist Diana Baumrind (1971, 1991) identified four patterns of parenting styles based upon two aspects of parenting behavior: control and warmth. *Parental control* refers to the degree to which parents manage their children's behavior—from being very controlling to setting few rules and demands. *Parental warmth* refers to the degree to which parents are accepting and

responsive of their children's behavior as opposed to being unresponsive and rejecting. These two aspects of parenting behavior combined in different ways make the four primary parenting styles namely, authoritative, authoritarian, permissive and uninvolved. The parental child relationship is posited as important to self esteem by several researchers mainly in the western world. Reviewed studies have indicated that parental support, encouragement and affection are positively related to child's self esteem. Depending on the parenting style that the parent uses, the child might experience physical control, beating as a way to meet parental demands. Others might be emotionally deprived as for those with indulgent or uninvolved parents. The parental behaviour might expose the child to forms of child abuse. Out of all the possible forms of abuse, emotional abuse has been identified the hardest to define. It could include name-calling, ridicule, degradation, destruction of personal belongings, torture or killing of a pet, excessive criticism, inappropriate or excessive demands, withholding communication, and routine labeling or humiliation. It is worth noting that sexual abuse may be the most underreported type of abuse because of the secrecy or "conspiracy of silence" that so often characterizes these cases. Parental behaviors' can be evaluated by the level of acceptance and the level of control that parents exert on their children. Parents incorporate both love and limits in their style of parenting. It is how these are balanced that determines a particular parenting style.

Urbanization in Kenya has seen many people migrating to Nairobi and other towns in search of better socioeconomic opportunities. The movement has affected all age groups and this population ends up settling in diverse settlement areas within the city. This has resulted to rapid social Changes e.g., extended families ties are broken down and socialization of children and youth sorely left to the parents and schoolteachers in most instances.

Parents in most urban towns (Nairobi included) have busy schedules striving to maintain their economic status and in turn most of them find themselves with very little time for socializing with their children. When out of school, the children are mostly in the company of domestic workers or their age mates in their neighborhood.

Information of Kenyan parenting styles/behavior and the relationship with adolescent self esteem development are unavailable. The researcher proposes to carry out this study as an attempt to find out the students perceived parents parental styles and their level of their self esteem and bridge the gap of knowledge.

Diana Baumarind (1983) posits that authoritarian parenting tend to produce children who are quite and unhappy. They fear than love their parents due to little emotions of comfort and affection displayed by the parents and this is more likely to produce a child with deviant tendencies. The child portrays lower social competence and self esteem. The uninvolved parents are both uncaring and inadequate to meet the needs of children. Authoritative parents, balances clear, high parental demands with emotional responsiveness and recognition of child autonomy producing happy, capable and successful children. Hence, authoritative parental style produces children who have better psychosocial skills and display better emotional well being than do the offspring of parents who are not Authoritative (Darling & Steinberg, 1993; Parker & Gladstone, 1996; Steinberg et al., 1994). The negative parental behavior grossly inflicts emotional damage to their children. These effects will eventually interfere with the development of the child's self esteem and their social competencies.

1.2 Statement of the problem

Although there are some existing studies focusing on adolescents in Sub-Saharan societies, many of them focus on adolescent reproductive health issues, sex education, HIV/AIDS, etc (Gage, 1998; Mensch et al., 1999). Self esteem is seen as the backbone of a person's psychosocial health; however low self esteem is seen as the cause for a wide range of personal and social ills, from crime and drug addiction, educational under-achievements and a feeling of reduced quality of life (Baumeister et al., 2003). At the KNH youth center, adolescents express their experience both at home and school such as " my parents are too busy and never spends time with me", "am used to them being too drunk to pay attention to what is happening", " mum or dad is too harsh, it's like police force at home", "school provides a different environment. However sometimes the teachers behave like our parents at home which makes one confused and feeling lost or unwanted".

Parents play an important role in shaping the character of their children, and at adolescent offer guidance and directions which aids in the adolescent identifying their role in the world. Kenya, being a developing country, has experienced rapid urbanization. The rapid growth of urbanization has brought about social changes. The researcher's observation is that many parents are too busy trying to make ends meet, leaving the parenting responsibility to someone else who

normally takes charge of their children. Other parents have been observed to provide materials but are mostly absent while others use physical control which probably aid in them feeling that they are still in charge of their children. The parents as they practice a particular parenting style, most often than not, do so with little or no regards of the effect it has on their children. Baumrind (1996) posits that without adequate parental support, children are likely to experience anxiety, insecurity, aggression, hostility, low self-esteem, and inadequacy. Parental control helps to shape responsible conformity and self-control in children.

The magnitude of low self esteem is not known in Kenya but depressive illnesses are on the rise. Empirical studies have demonstrated that individuals suffering from depression always have low self esteem. A local study revealed a high presence of psychiatric morbidity in children and young person's appearing in the Nairobi Juvenile Court (Maru, Kathuku, and Ndetei, 2003) There is a gap of information available of studies done in areas of parenting styles and formation of self esteem especially in Kenya and this study will set precedence for similar studies on the areas and bridge the knowledge gap that currently exists.

1.3 Objectives

Broad objective

The main objective of this study is to examine the association between adolescents self esteem and their perception of their parents parenting behaviour in day public secondary schools of Nairobi province.

Specific objectives

The specific objectives of this study are:-

1. To determine the socio-demographic characteristics of adolescents attending day public secondary schools in Nairobi
2. To determine the pattern of parenting as perceived by the study participants.
3. To determine the levels of self esteem among the study participants
4. To determine the relationship between levels of self esteem and socio-demographic factors
5. To determine the association between socio-demographic factors and perceived parenting behavior

6. To determine the association between perceived parental behavior and levels of self esteem of the participants

1.4 Research question

Is there a relationship between the levels of self esteem in adolescents and different parenting behavior as perceived by adolescents in the study population?

1.5 Hypothesis

Null hypothesis (H_0) - There is no significant association between adolescents' level of self esteem and perceived parenting behavior

Alternative hypothesis (H_1) – There is a significant association between adolescents' level of self esteem and their perception of parenting behavior

1.6 Significance and Justification of the Study

Adolescence is a crucial phase of life that carries great potentials and risks. It is a period of rapid physical and psychological developments along with the task of discovering who one is and making choices for whom ones friends will be as well as which career path to follow.

Self esteem is seen as the backbone of a person's well being; however low self esteem is seen as the cause for a wide range of personal and social ills, from crime and drug addiction, educational under-achievement and a feeling of general well being (Baumeister et al., 2003). As the adolescent come to appreciate who they are, makes this group unique to study about their perception of parenting styles that their parents used in relation to their current self rating of self esteem.

There is very scanty information on this age group specifically on levels of self esteem locally. There is no clear government policy on mental health issues as pertaining to this group, though some public hospitals have provision for mental health for children and youth (e.g. KNH). Childhood experiences as well as individuals self esteem can generate negative feelings of which with time can manifest itself as psychopathology. The fact that this kind of information is very scanty, justifies the need for such and similar studies to be carried out. The researcher hopes that

the information generated from the study will aid in formulation of some programmes in the County and in the country in prevention of psychopathology in adolescents.

This study will examine the effects of parent-adolescent relationships on adolescents' psychological adjustment, as indicated by the adolescents' self esteem.

Chapter Two: Literature Review

2.1 Introduction

This chapter presents a review of available literature that is relevant to the study. The review is divided into two main sections; self esteem and parenting styles. The literature explores perceived parental styles in relation to self esteem levels among adolescents.

2.2 Self esteem

The concept of self esteem was constructed by William James (1890), a western psychologists and sociologists socially within the last century. He developed the concept of self-esteem, coincidentally, during the same historical period in which Stanley Hall (1904) coined the term adolescence. At that time adolescence was not perceived as a distinct stage of life, individuals were simply believed to move from childhood into young adulthood.

Reese (1997) defined self-esteem as the extent to which one prizes, values, approves, or likes oneself. He argues that self-esteem is relatively high in childhood, drops during adolescence (particularly for girls), rises gradually throughout adulthood, and then declines sharply in old age. It is widely assumed that levels of self-esteem are consistent over time within individuals. It is recognized as a basic personality characteristic of positive and productive behavior.

During middle childhood, children's personal identity develops so as to become more complex, multi-faceted and abstract in nature. Children stop thinking of themselves solely as defined by singular and concrete attributes and comparisons and start to describe themselves more according to their perceived personality characteristics and psychological qualities which happen to be more abstract in nature, referring to qualities and interactions rather than to things. Furthermore, children also become able to differentiate and describe their positive qualities and their less desirable qualities.

As children develop a more complex picture of who they are and what they are capable of, they start to compare themselves to other people (e.g., peers, caregivers, siblings, other people in the community) across a wide variety of traits and characteristics such as appearance, intelligence, physical abilities, artistic abilities, among others (Robins et al., 2002). Self esteem may rise and fall in accordance with a child’s experience.

A result of this growing complexity of self, children start to view themselves as more or less capable within different domains of accomplishment (e.g. academic, social, athletic, appearance, etc.). Their self-esteem (reflecting their feelings of personal worthiness) also starts to vary across these domains, with the result that children may see themselves as very capable in some areas but not in others (Robins et al., 2002).

The relationship with ones parents is posted as particularly important to self esteem with several empirical studies indicating that parental support, encouragement, and affection to be positively related to the child's self esteem. The quality of the parent-child relationship during early childhood affects children's social relationships and behavioral adjustment during middle childhood and adolescence (Scaramella & Leve, 2004). While some parenting styles produce positive outcomes which may include close parent-child relationships, greater self-esteem, and more autonomy (Herz & Gullone, 1999), permissive parenting style often fosters serious problems in adolescence such as drug use and deviant behavior (Baumrind, 1991; Maccoby & Martin, 1983).

Self-esteem is one of the most well researched constructs in psychological science. Research of self-esteem in adolescence and adults has shown the importance of (un) stable self-esteem in terms of social-emotional functioning. Unstable self-esteem is negatively viewed and Oosterwegel et al. (2001), in their research argued that an unstable self-esteem is an important predictor for internalizing and externalizing problems. Furthermore, they also found that self-esteem variability interacts with self-esteem in the prediction of depression. Self-esteem was most predictive of depression for persons high in self-esteem variability. According to them it seems reasonable to conclude from these and earlier findings that individuals may be vulnerable to depressive tendencies as a result of high variability in, and low levels of, self-esteem, (Oosterwegel et al. 2001). Substance use has negative physical effects which have been identified as psychological and emotional and are equally as devastating. One of the areas that is universally damaged is a person's view of oneself, their self-esteem. Self-esteem virtually never rises when drug use is induced; it almost always sinks lower and lower.

While the magnitude of low self esteem remains unknown locally, there is an increasing tread of psychiatric morbidity. In a local study by Maru, Kathuku, and Ndetei, (2003), they found that

there was a high presence of psychiatric morbidity in children and young person's appearing in the Nairobi Juvenile Court.

Self-esteem is seen as a household word in the western world and parenting is considered to be an important determinant of several aspects of children's outcome (Gadeyne, Ghesquiere, & Onghena, 2004). Several environmental measures have been associated with low self-esteem including lower social support (Greene & Way, 2005; Harter, 1990; Hirsch & Dubois, 1991; Leary & Downs, 1995), low socioeconomic status (Twenge & Campbell, 2002), negative parenting (Gecas & Schwalbe, 1986; Kernis, Brown, & Brody, 2000), maltreatment (Kaplan, Pelcovitz, & Labruna, 1999) and stressful life events (Baldwin & Hoffman, 2002; Masten, et al., 1999). Trzesniewski et al. (2006) found that low self-esteem during adolescence predicts poorer mental and physical health, worse economic well-being, and higher levels of criminal activity in young adulthood. Similarly, other studies found that low self esteem prospectively predicts antisocial behavior, eating disturbances, depression, and suicidal ideation (Donnellan, et al., 2005; McGee & Williams, 2000; Orth, Robins, & Roberts, 2008). Research findings thus suggest that the development of self-esteem—which is defined as "a person's appraisal of his or her value" (Leary & Baumeister, 2000, p. 2)—may have significant consequences for life outcomes. However, the etiology of self-esteem, whether biological or environmental, and the contributory role of self-esteem in psychological and behavioral health has not been firmly established (Baumeister, et al., 2003).

Another study done in Brazil (Martinez & Garcia, 2008) explored the relationship between parenting styles and self esteem among adolescents and revealed that indulgent families scored equal or higher in self esteem as those from authoritative families. Those from indulgent families scored higher than adolescents from authoritarian and neglectful families in four self esteem dimensions (academic, social, family and physical). Those adolescents from authoritative families scored higher than those from authoritarian and neglectful families in three self esteem dimensions (academic, social and family) these findings led the researcher to conclude that authoritarian parenting is not associated with optimum self esteem in Brazil.

Research conducted in Western societies has reported that warm, loving and caring parenting practices in childhood contributed to the development of healthy self-esteem in children and therefore increased their psychological well-being as young adults (Restifo et al., 2009).

2.3 Parenting styles and children's outcome

Parents play a big role in shaping the character of their children. Psychologist Diana Baumrind (1971, 1991) identified four patterns of parenting styles.

> Mize & Pettit, (1997) described parenting styles as the collection of parents' behaviors that creates an atmosphere of parent-child interactions across situations. It is a psychological construct representing standard strategies that parents use in their child rearing. Parenting is considered to be an important determinant of several aspects of children's outcome (Gadeyne, Ghesquiere, & Onghena, 2004).

Literature is lacking with local/and regional studies regarding relationship between parental parenting styles and formation of self esteem. However, literature of studies carried out on Euro-American families in the United States with samples of children and adolescents of all ages have shown that authoritative parenting is consistently associated with positive developmental outcomes in offspring (Baumrind, 1971; Steinberg et al. 1994), including school adjustment and academic achievement (Dornbusch et al., 1987; Steinberg et al. 1992), higher self-esteem and psychosocial competence, and less psychological and behavioral dysfunction (Maccoby & Martin, 1983; Buri, 1989; Lamborn et al., 1991).

During adolescence, the transition from childhood to adulthood, children become more independent, and begin to look at the future in terms of career, relationships, families, housing, etc. During this period, they explore possibilities and begin to form their own identity based upon the outcome of their explorations.

Self-esteem has been implicated as a traditional indicator of psychological adjustment in parenting studies (Felson & Zielinsky, 1989; Barber, 1990; Barber, Chadwick, & Oerter, 1992). Research done using Japanese college students (Yamawaki, Nelson and Omori, 2010) suggested that warm and caring parenting practices in a child's youth may be a universally crucial factor for individuals' psychological well-being later in life. The study results suggested that poor parenting, such as low parental care and warmth, was significantly associated with low self-esteem and life-satisfaction, which may lead to poor psychological well-being. A study by Lue, et al. (2010) also showed that perceived criticism from parents, which is rather contradictory to warm and caring parenting, directly contributed to high levels of young adults' depression and was related indirectly to their antisocial behavior. These two studies demonstrated the effect of

poor parenting style on young adults' psychological well-being and more severe forms of psychological problems, such as depression and antisocial behavior.

2.3.1 Authoritarian parenting style

Authoritarian parenting style can be very rigid and strict. It is mostly patriarchal in nature and everything is often decided by the parent. Parents who use this style have a strict set of rules and expectations; if rules are not followed it ends up with punishment (Fletcher et al. 2008). In authoritarian parenting style, there is usually no explanation of giving the punishment just that the children are in trouble and should listen accordingly (Fletcher et al. 2008). This parenting style and parents who use a more authoritarian approach with power assertion and the involvement of physical punishment with little emotions of comfort and affection are more likely to produce a child with deviant tendencies (Barboza etal. 2008). According to Fletcher et al. (2008), this style is subject to producing children that can internalize and externalize undesired behaviors' as well as developing problems in social situations. Also the punishment aspect of this parenting style also contributed to problems in school for the youth, their behaviors' were often deemed undesirable Fletcher et al. (2008). This contributed to the youth conducting themselves in a deviant manner in the school as well as toward other children (Fletcher et. al. 2008). A research conducted using Asian-American sample illustrates that authoritarian parenting appears to be associated with positive development rather than pathology in adolescent if the social setting of family and community respond favorably in concert with this parenting style (Keshavarz & Baharudin, 2009).

2.3.2 The authoritative style

The authoritative style consists of following the same rules as the authoritarian parents, but there is more open communication with parents and children in the authoritative style (Brown & Lyengar, 2008). They listen more to the child and how they are (Brown & Lyengar, 2008). When children have problems with rules and they are broken these parents tend to be more receptive (Brown & Lyengar, 2008). They contend that these parents monitor instead of trying to rule the child's life; they are less restrictive but still assertive. Developmental researches have demonstrated that authoritative parenting predicts many positive outcomes for children and

adolescents when compared with authoritarian, indulgent and uninvolved parenting (Coplan et al., 2002).

2.3.3 Permissive parenting style

Permissive parenting style is often the style parents try to stay away from as there is not much structure for children. Parents often do not set rules or have guidelines for the child (Brown & Lyengar, 2008). The permissive parent does not have many expectations for their children and avoid conflict. However, Brown & Lyengar contend that they are more nurturing to the child as they are more lenient and often do not punish the children for wrongdoing. Children under this parenting style have a hard time communicating with parents about things they found important to them (Finkelhor et al. 2009**).** Children with less communication with parents tended to have more negative behaviors at school than those who have had some open communication with their parents (Finkelhor et al. 2009). The quality of the parent-child relationship during early childhood affects children's social relationships and behavioral adjustment during middle childhood and adolescence (Scaramella & Leve, 2004). While some parenting styles produce positive outcomes which may include close parent-child relationships, greater self-esteem, and more autonomy (Herz & Gullone, 1999), permissive parenting style often fosters serious problems in adolescence such as drug use and deviant behavior (Baumrind, 1991; Maccoby & Martin, 1983).

2.3.4 Uninvolved parenting style

Uninvolved parenting style, parents are often absent emotionally and sometimes even physically (Brown & Lyengar, 2008). They have no expectations of the child and regularly do not have communication or a nurturing feature to them. They provide everything the child needs for survival with little to no engagement (Brown & Lyengar, 2008). They are not interested in their schooling other than making sure they go and they are not interested in extracurricular activities they may be involved in. There is often a large gap between parents and children with this parenting style. Children with little or no communication with parents tended to more often be the victims of other children's deviant behavior and involved in some deviance themselves (Finkelhor et al. 2009). According to Drotar, (1992), uninvolved parenting styles have received

far less attention than any other parenting styles probably because omissions of proper caretaking behaviors' are more difficult to describe and detect. However, Hilson & Kuiper, (1994), argued that neglectful caregivers engage in varying degrees of behaviors' disengagement and in most instances parental characteristics (e.g. Depression) and life styles choices (e.g. Substance use).

Lareau (2002) argues that although race may be a significant contributing factor, social class, wealth, and income have the strongest impact on what methods of child rearing are used by parents. She further posits that lack of money was found to be the defining factor in the style of child rearing that was chosen, and minorities were more likely to have less wealth or assets available for use in their children's upbringing. Lamont (2000), in her study also found that societal values and norms of a generation had an effect on the choice of parenting style. In the United States, authoritarian parenting was the most popular until the 1960s when a backlash made permissive parenting the most popular in the 1970s, which suggests that as times change, so do the way parents parent their children.

2.3.5 Other factors that can affect levels of self esteem

Baumrind (1972) theorized that if parenting behavior is consistent with cultural values, children will accept it. Cultural factors, such as race, ethnicity, and socioeconomic status may affect the preferred parenting styles. Socioeconomic status might influence self-esteem because social status and wealth influence the individual's perception of his or her relational value (Leary & Baumeister, 2000). Authoritative parenting tends to be common among whites and authoritarian parenting more typical of blacks and Hispania's (Radziszewska at al., 1996).

A research done in Taiwan by Lin et al., (2008) revealed that among 9,586 participants (response rate: 86.3%), the prevalence of depression was 12.3%. The depression risk factors was associated with lower self-esteem, higher family conflict, poorer family function, lower rank and decreased satisfaction in their peer group, and less connectedness to school were prone to depression. The researcher concluded that prevalence of depression is high in Taiwanese adolescents and the multiple factors of family, peer, school and individuals are associated with adolescent depression. The Global Burden of Disease study done by the World Health Organization (WHO) (2000), estimated the incidence and prevalence rates of major depression in

the Sub-Saharan Africa to be fourth leading cause of total disease burden, accounting for 3.7 percent (Murray and Lopez 1997b).

Substance use is associated with a variety of negative consequences, including increased risk of serious drug use later in life, school failure, poor judgment which may put the user at risk for accidents, violence and even interfere with their self esteem (Herz & Gullone, 1999). Low self-esteem has been associated with a number of psychological, physical, and social consequences that may influence successful adolescent development and the transition to adulthood, including depression, anxiety, suicide and disordered eating, violent behavior, earlier initiation of sexual activity (in girls), and substance use. This creates a vicious cycle of events.

2.3.5.1 Child abuse

Among all forms of child abuse, sexual abuse is the most single difficult to identify (Dinwiddie et al.2000) but its effects are far reaching. Emotional and physical abuse has been linked to among others, low self-esteem, emotional maladjustment, dependency, underachievement, depression, aggression, learning disorders, homicide, and suicide as well as to psychological distress later in life (Hart, & Brassard, 1987). Hirsch, & Dubois, (1991) posits that adolescence, have a quest for control, identity and separation, which can often be impeded by abuse and neglect. Abuse during this period often results in the teen developing low self-esteem and poor body image, which often leads them to engage in a variety of self-injurious behaviour such as suicide attempts and display a myriad of behavioural/conduct problems, including substance abuse and illegal activities.

Chapter Three: Methodology

3.0 Introduction

This chapter outlines the methodology and procedures that will be used to obtain the research data. The study setting, study design, study population, sample and sampling procedure, data collection procedure, data analysis and ethical consideration are all described in the chapter.

3.1 Research design

A cross sectional descriptive quantitative design was used in this study. The variables in the study were self esteem and perceived parental behavior (memories of the adolescent's upbringing which includes parenting style and forms of child abuse).

3.2 Research settings

The study was done in Nairobi County which is a culturally diverse city and the main administrative center for the Kenya national government. All the major Kenyan ethnic groups are represented in the city. Nairobi is divided into five defined sections i.e.

- EAST - Encompassing residential estates e.g. Buru Buru area, embakasi, Kariobangi, eastleigh among others
- WEST - Encompassing areas like Westlands and Parklands, Kangemi, and parts of Kawangware
- NORTH – Encompassing areas like Githurai and Kenyatta University
- SOUTH - Encompassing areas like Kibera, Langata, Karen
- CENTRAL - Encompassing central business district region of the government and private offices and businesses.

There is wide variety regarding standards of living in Nairobi. The population of Nairobi city has grown rapidly from 350,000 people at independence in 1963 to 3.1 million according to 2009 Kenyan census (central bureau of statistics, 2010). There are private and public schools in each of the regions which use different curriculums of education. The public schools use the Kenyan 8-4-4 education system which has been in existence since middle 80's. Majority of secondary schools hosts form 1-4. These schools are exclusively girls/boys school while others host both genders and are called mixed secondary schools and can either be day or boarding; yet others host day and boarding for various reasons.

3.3 Target population

The study population was adolescents' students in day public high schools of Nairobi County. The Kenyan population is characterized by a big portion of its population falling in the youth age group margins. Majority of this population is aged between ages 14 to 35years. With a sizable portion being bellow 20 years. It is this population that is in secondary schools and still dependant on their parents.

Nairobi County hosts about 74 public secondary/high schools according to Nairobi educational management information systems which were last updated in January 2011. These schools host a population of about 11,702 students of which girls are 4268 and boys 7434. The parental maladaptive behaviors' will affect the adolescents' levels of self esteem.

3.4 Sampling procedure and sample size calculation

The target population was adolescents' students in public day high schools. A list of all public day high schools of Nairobi was obtained from the provincial education department. Schools were grouped in terms of girl's day secondary schools, boy's day secondary schools and mixed day school. The names of the schools will be written on pieces of paper and folded. They will be mixed and one blindly picked. From each category of schools, a school was randomly sampled. On visiting the school a stream in the school was randomly picked. The students were proportionately sampled to get at least 373 students from forms 1 to 4. Failure to get the desired number of students from one school, prompted another school to be selected from similar category until the sample size was realized (boys schools has 2176 boys, girls schools has 928 girls and mixed schools has 8598 boys and girls).

Boys from boy's schools: - 72

Girls from girl's schools: - 31

Number of students from mixed schools: - 282 total 385 students

Students participated voluntarily and were given an equal chance to participate.

Those who didn't meet the criteria, those whose parents didn't give consent and the students who did not give assent to participate, were excluded. However, they stayed in class/hall until the exercise was completed.

Sample size Determination

The Cochran's formula (1963) was used for sample size calculation. The formula addresses continuous and categorical statistical variables and applies key risk factors like confidence level that is acceptable (95%), and a precision (alpha value, type I error) of 0.05 (5%)

Using Cochran, (1963) *Sampling formula*: $n = \frac{z^2 p(1-p)}{d^2}$

Where n= sample size

d is the desired level of precision,

p is the estimated proportion of an attribute that is present in the population,

z is the standard normal distribution set at 1.96 which corresponds with 95% confidence level

Considering that the students' population is above 10,000; the Cochran's formula is appropriate to be applied here. With a desire of 95% confidence interval for *p* that is expected to be about 50% (0.50) with a margin of error (*d*) no more than 0.05,

$n = \frac{(zxz)p(1-p)}{d^2}$ $\frac{1.96^2 x\ 0.5(1-0.5)}{0.05^2}$ making the sample size to be 384.

The sample size equation solving for n' (new sample size) when taking the Finite population Calculation into account is:

$$n' = \frac{n}{1+\frac{n}{N}}$$

where, n is the sample size based on the calculations above, and

N is population size.

Calculating the new sample size for this study using the formula above, we find:

n=384/(1+384/11,702) = $\frac{384}{1.033}$= 371.732 translating to 372 students

3.5 Research Instruments

During the study, the researcher obtained the participants socio-demographic data as well as employed 2 questionnaires; Rosenberg self esteem questionnaire and the EMBU scale questionnaire

3.5.1 socio-demographic data

Here the participants provided their identifying data, school registration number, age, gender, date of birth/age, and class being attended.

3.5.2 Rosenberg self esteem scale

Self-esteem was measured using Rosenberg's Self-esteem Scale (RES). The Rosenberg Self-esteem Scale (RSES), developed in 1965, is the most widely-used scale for the measurement of self-esteem and has undergone extensive reliability and validity tests (Robins, Hendin, & Trzesniewski, 2001).

The Rosenberg Self-Esteem Scale is a 10-item self-report measure of global self-esteem. It consists of 10 statements related to overall feelings of self-worth or self-acceptance. The items are answered on a four-point scales ranging from strongly agree to strongly disagree.

Ratings: Sum the ratings assigned to all the items after reverse scoring the positively worded items. The scale ranges from 0-30. Scores between 15 and 25 are within normal range; scores below 15 suggest low self-esteem.

Validity- Rosenberg Self-Esteem Scale demonstrates a scale coefficient of .92, indicating excellent internal consistency. Test-retest reliability over a period of two weeks reveals correlations of .85 and .88, indicating excellent stability. RSE scale demonstrates concurrent, predictive and construct validity using known groups. The Rosenberg Self-Esteem Scale correlates significantly with other measures of self esteem (Rosenberg, 1979).

3.5.3 EMBU scale

Perceived parental styles were measured by the Egna Minnen Betraffande Uppfostran (EMBU, Swedish acronym for "My Memories of Upbringing"). It is a self-report inventory, originally devised in Sweden. From the questionnaire, eight constructs can be extracted which constitutes the four different parenting styles and four forms/types of child abuse; namely: - Authoritative parenting style, uninvolved parenting style , permissive(indulgent) parenting and authoritarian

parenting style , child emotional abuse, child emotional neglect, child physical abuse and child physical neglect.

Internal consistency reliabilities for the four factors are satisfactorily high across various samples, with Cronbach alpha coefficients ranging from 0.70 to 0.94 (Arrindell et al, 1994). Further analyses of field trials in 14 countries have shown that three of the original four factors obtained (rejection - REJ, emotional warmth - EMOTW, and overprotection -OVERP); possess the qualities of cross-cultural constancy/invariance (Arrindell, & Eisemann, 1994).

All items are scored on 4-point scales (1-4) separately for the mother and the father.

3.6 Ethical considerations

Approval was sought from the department of psychiatry university of Nairobi from where an introductory letter was obtained to aid the researcher in gaining access to the provincial education officers and to the schools as well as the participants**.** Ethical approval was obtained from K.N.H. research and ethics committee and the national council for science and technology. The researcher also sought permission from the provincial educational officer (ministry of education), and consequently from the head teacher/or the principle of the secondary school before execution of data collection. Informed written consent was obtained from the parent after an explanation of the study was done. Participation to the study was voluntary and although participants did not gain financially from participating in this study, they made a major contribution to the information known about parenting behavior and its relation to the levels of self esteem. The students were psycho-educated on self esteem and its effects on self. Explanations were given to students and were assured of no physical intrusion and the risk of possible provocation of painful memories that one might have wished to forget. If this was to happen the students were explained of the availability of one to be debriefed by the researcher and/or the school counselor who had been briefed on the procedure. Those who needed further interventions were to be referred to KNH youth center. The students were assured of confidentiality. They were informed that their identity was only to be used by the researcher, but individual responses were be coded on collection to aid in maintaining anonymity hence, maintain confidentiality. This was only accessible to the researcher who stored the raw data under lock and key. The participants were given informed written assent after receiving the explanation.

3.7 Data collection procedure

The researcher obtained permission from the schools heads. The head teacher/principal in turn appointed teacher/teachers to gather the students and parents where the information of the intended study was given. The students were issued with the consent form to take to their parents to allow their children to participate. The students were explained to bring back the signed consent forms in two days time for collection and that the administration of the questionnaires. Parents who had queries were asked to see the researcher in the school. On the second day the researcher returned to school and administered the questionnaires. The students gathered in a common room and were given the questionnaires which they completed individually. The researcher was available to aid in giving explanations or guidance as the exercise continued. Participants were asked to complete the recalled parenting styles as they pertained to their mother (or the maternal figure that has most influenced them, such as a stepmother) and their father (or the paternal figure that has most influenced them, such as a stepfather), and the Rosenberg self esteem questionnaires. On completion, the students were asked to fold the completed questionnaire and drop them in a ballot box. These were transported to the working station where the raw data was being compiled, cleaned and analyzed using the *Statistical Program for Social Sciences* (SPSS) version 17.0.

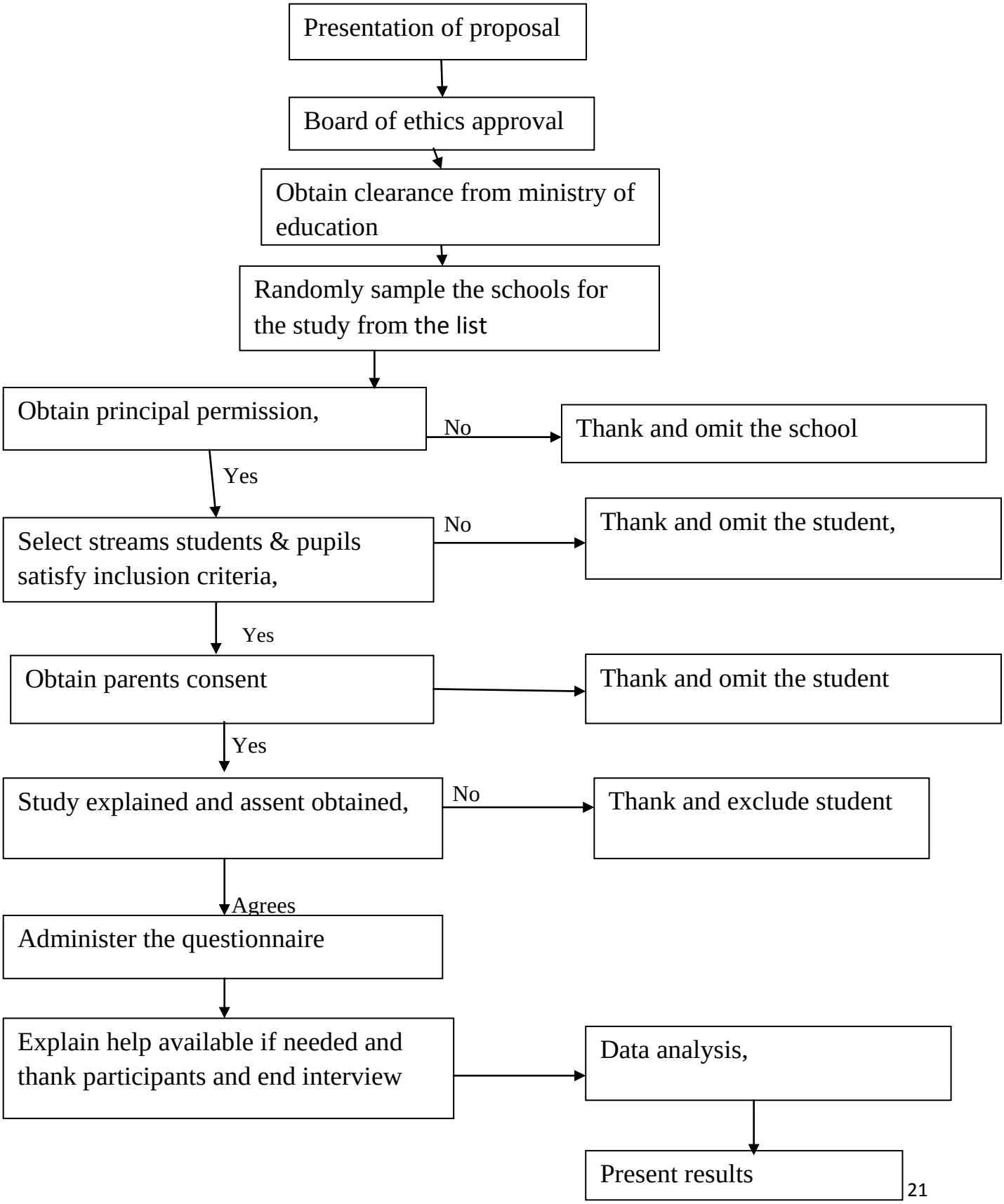
3.8 Inclusion/exclusion criteria

Only the participants who are high school student and in the Nairobi County took part in the study. Those participants who gave ascent to participate in the study were asked to answer the questionnaire.

3.9 limitations/constraints

Accessing previous local studies is a challenge as the studies that might have been carried out on the topic might not or are under published. This limits local/regional literature review process. Another limitation might be that participant responses may be biased because most of the parenting experiences reported would have occurred several years prior to completing the questionnaires. Parents might decline to consent reducing the number of respondents.

Field activity flow chart



3.10 Data analysis

Data was enter in a computer and checked for consistency and corrected before being analyzed. Raw data was analyzed using SPSS program version 17.0, interpreted and presented in forms of tables, charts, graphs and description.

Chapter four: Results

4.1 Introduction

The current research set out to investigate the association between parental behavior and the adolescent's level of self esteem. The focus of the study was to find out whether there is any significant relationship between parenting behavior and present levels of the adolescents self esteem. To answer the research question and meet the objectives structured questionnaires were employed to generate data. Data was analysed with the help of SPSS version 17.

Participants were randomly recruited from a stratified sample of six public secondary schools in the Nairobi County. Majority of the participants in the study came from the informal settlement regions of the Nairobi County that serves as a catchment for the schools. The informal settlements regions are characterized by high levels of overcrowding, unemployment (low socio-economic levels), crime and poor housing among other disadvantages. Due to the status of the public schools in the county, (public schools are funded by the government) and the proximity of the schools to the informal settlements makes the schools more accessible to this population.

A total of 621 adolescents whose parents had signed consent to allow their children to participate in the study and those who met the inclusion criteria were included in the study. However, over quota (26.9% n= 167) were excluded from analysis for non-completion of questionnaires leaving 454 participants.

4.1.1 Participant's characteristics

Out of a sample of 454 there were 24.2% (110) respondents from exclusive boy's secondary schools, 66.1% (164 boys and 136 girls) from mixed secondary schools and 9.7% (44) from

girl's secondary schools. The respondents comprised of 60.4% (274) boys and 39.6% (180) girls. Participants ranged between 13 and 19 years of age (M=16.54 yrs SD=1.311yrs) and were attending different classes from form 1- 4. More than half of the adolescents 57.7% (262) were in form three, 13.7% (62) in both form 1, form 2, and 15.0% (68) being in form four (see figure 4.1 and appendix for some extra characteristics for the parents).

Figure 4.1 Age distribution

4.1.2 Living arrangements

From the study several living arrangements for the adolescents were identified. While majority 56.8% (n=258) of the adolescents lived with both their parents, 29.7% (n=135) lived with one parent (mother or father), 13.0% lived with a guardian (grandparents, uncles and aunties or older siblings).

4.1.3 Family sizes

The adolescents reported to have come from different family sizes. More than half (55.9%) were from small sized families comprising of 1-3 siblings, 35.2% from medium sized families comprising 4-6 siblings and 8.8% from large families which had more than seven siblings with the highest number reported being 15.

4.1.4 Parents' characteristics

Single parents families comprised of single mothers and single fathers (17.1% (n=76), and 2.4% (n=9) respectfully. The adolescents further stated that 68.1% (n= 309) of their parents have never separated, while 29.7% (n=135) are separated and that the separation took place when they were of different ages. Among the adolescents, 2.2% (n=10) indicated that they did not know their parents marital status. More than three quotas 75.3% (n=342) of the sampled adolescents reported that their parents have never separated. There were a high number of parental separation incidents at 14yrs of age comprising of 2.9% (n=13) followed by age 9 and 10 at 2.2 %.

4.1.5 Parental Education attainment

Among the fathers 16.4% (n=62) had primary school level of education compared to mothers 22.5% (n=102). The fathers who had attained a secondary school level of education 25.4% (n=96) compared to mothers 33.0% (n=147). There were 25.7% (n=97) of fathers who were reported to have a college education compared to mothers 23.1% (n=103), and 20.9% (n=79) of fathers had a university degree compared to mothers 11.0% (49). Only 5.6% (n=21) of fathers were reported not to have any formal education compared to mothers 5.4% (n=24). However, some adolescents reported not to know their parents education status, fathers 6.1 % (n=23) compared to mothers 4.5% (20).

According to the adolescents, 69.0% (n=261) of fathers and 57.1% (n=254) of mothers worked. The adolescents did not know what 8.2% (n=31) of mothers and 3.4% (n=15) of fathers did for a living. However, the adolescents did not view working in the homestead or “kibanda” (kiosk) as any form of work or employment and reported their parents who engaged in these activities as not working.

4.2 Perceived Parenting behavior

Eight constructs were extracted using principle component analysis factor analysis. The eight constructs constitutes the four different parenting styles and four forms/types of child abuse; namely: - Authoritative parenting style, uninvolved parenting style , permissive(indulgent) parenting and authoritarian parenting style , child emotional abuse, child emotional neglect, child physical abuse and child physical neglect.. Results for fathers and mothers showed that, the adolescents rated their parents as the same or with very little difference on the different scales. Of the mothers reported in the study, only 13.2% (60) practiced authoritative parenting style compared to fathers 2.9% (13). Majority of mothers were reported as being emotionally neglectful 38.7% (172) compared to fathers 17.1 % (61). None of the mothers was perceived as physically neglectful compared to fathers who the adolescent perceived as being physically neglectful at 18.5%. Sixty-eight (15.3%) of mothers were perceived as emotionally abusive to the adolescents compared to fathers 1.3%. Fathers were reported to be more physically abusive 33.9% (128) compared to mothers who were perceived as physically abusive at 4.0% (18) (table 4.1).

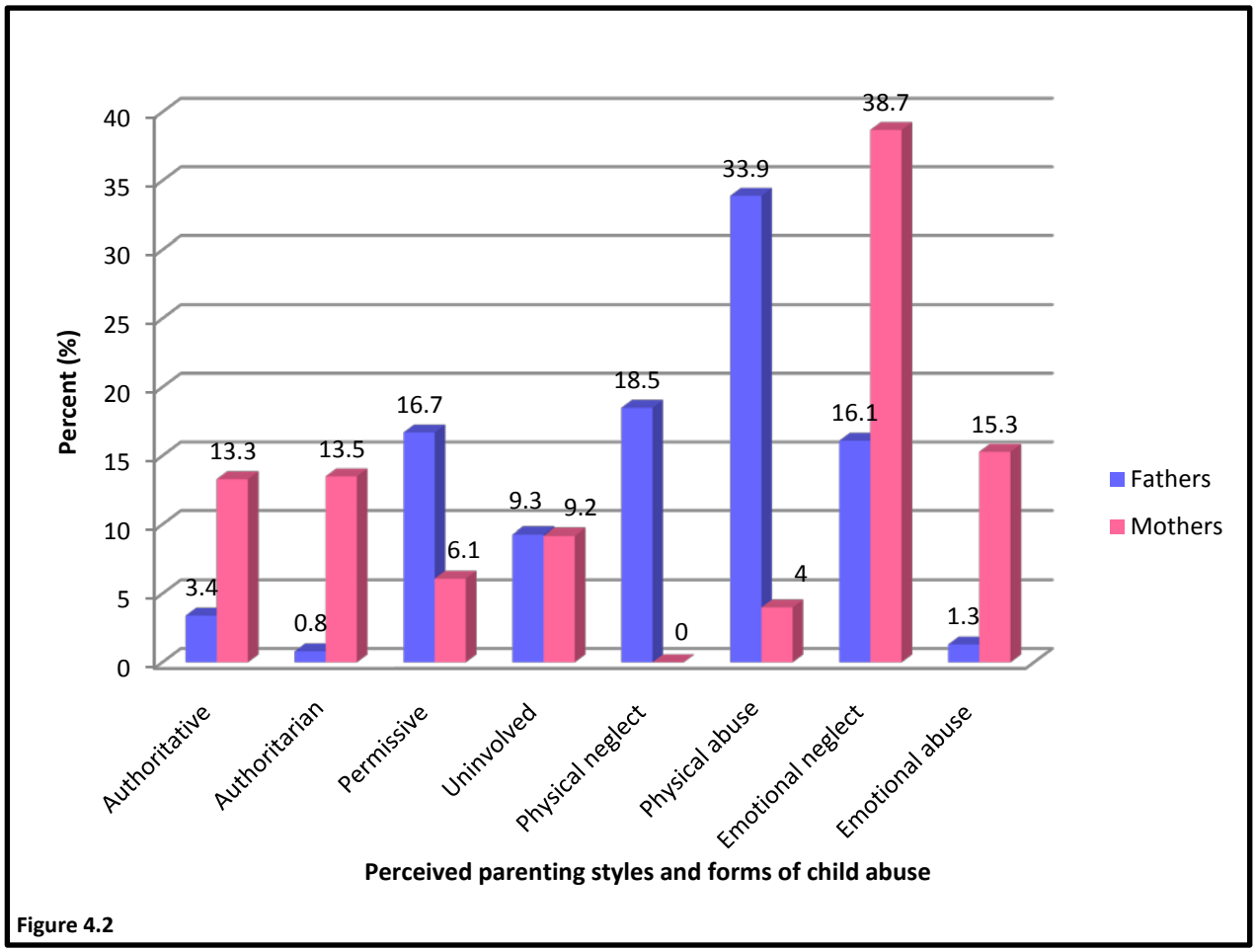


Figure 4.2 Perceived parenting styles and forms of child abuse

4.3 Levels of self esteem among the adolescents

Majority of the adolescents had normal to high levels of self esteem with only 5.0% having low self esteem. Of this group 14 adolescents were females and 10 males (table 4.1).

Table 4.1 Levels of self esteem distribution

Gender	SELF-ESTEEM LEVELS			
	Low (0-14)	Normal range (15-25)	High (above 25)	Total
Male	14 (4.8%)	215 (78.8%)	45 (16.4%)	274
Female	10 (5.5%)	138 (76.2%)	32 (18.3%)	180
Total	24 (5.0%)	353 (77.8%)	77 (17.2%)	454 (100%)

4.4 Relationship between levels of self esteem and socio-demographic factors

Pearson correlations were done to ascertain the statistical relationship with the Rosenberg self esteem score (see table 4.2). These variables subjected to Chi squire tests gave statistical significance on the relationships of father's employment and that of age at separation. However, due to some cell having very low scores these results should be taken cautiously. Father's employment status had a p-value of 0.022 (x^2= 11.49) and that of parental separation of 0.005 (x^2=21.79).

Table 4.2 Relationship between levels of self esteem and socio-demographic factors

Social demographics		Rosenberg self esteem association				Chi square test
		Low	Normal	High	Total frequency (%)	
Gender	Male	14(3.1%)	215(47.4%)	45(9.9%)	274 (60.4%)	χ^2= 0.204
	Female	10(2.2%)	138(30.4%)	32(39.6%)	180 (39.6%)	*df=2*
						P=0.903
Respondent age (grouped)						
	13-15 yrs	8 (1.7%)	80(17.6%)	17(3.7%)	105 (23.2%)	χ^2=2.366
	16-17 yrs	12(2.6%)	192(42.3%)	39(8.6%)	243 (53.5%)	*df=4*
	18-19 yrs	4(0.9%)	81(17.8%)	21(0.5%)	106 (23.3%)	*P=0.669*
Family size						
	Small	18 (4.0%)	195(43.0%)	41 (9.0%)	254 (56.0%)	χ^2=4.202
	Medium	5 (1.1%)	125(27.5%)	30 (6.6%)	160(35.2%)	*df=4*
	Large	1 (0.2%)	33 (7.3%)	6 (1.3%)	40(8.8%)	*P=0.379*
Parents education						
Mother	Don't know	- (0%)	17 (3.8%)	3 (0.7%)	20 (4.5%)	χ^2=16.242
	None	- (0%)	22 (4.9%)	2 (0.4%)	24 (5.4%)	*df=10*
	Primary	1 (0.2%)	81 (18.2%)	20 (4.5%)	102 (22.9%)	*P=0.093*
	Secondary	14 (3.1%)	108 (24.3%)	25 (5.5%)	147 (33.1%)	
	College	6 (1.3%)	81 (18.2%)	16 (3.6%)	103 (23.1%)	
	University	1 (0.2%)	37 (8.3%)	11 (2.4%)	49 (11.0%)	
Father	Don't know	1 (0.3%)	19 (5.0%)	3 (0.8%)	23 (6.1%)	χ^2=6.692
	None	2 (0.5%)	17 (4.5%)	2 (0.5%)	21 (5.6%)	*df=10*
	Primary	1 (0.3%)	50 (13.2%)	11 (2.9%)	62 (16.4%)	*P=0.754*
	Secondary	4 (1.1%)	76 (20.1%)	16 (4.2%)	96 (25.4%)	
	College	7 (1.7%)	71 (18.9%)	19 (5.0%)	97 (25.6%)	
	University	2 (0.5%)	61 (16.1%)	16 (4.2%)	79 (20.9%)	
Parents Employment						
Mother	Don't Know	1 (0.2%)	10 (2.2%)	4 (0.9%)	15 (3.3%)	**Mother** χ^2=1.555
	Yes	11 (2.6%)	199(44.7%)	44 (9.8%)	254 (57.1%)	*df=4*
	No	10 (2.2%)	137(30.8%)	29 (6.5%)	176 (39.6%)	*P=0.817*
Father	Don't Know	5 (1.3%)	20 (5.3%)	6 (1.6%)	31 (8.2%)	**Father** χ^2=11.492
	Yes	10 (2.6%)	204(54.0%)	47 (12.4%)	261 (69.0%)	*df=4*
	No	2 (0.2%)	70(18.5%)	14 (3.7%)	86 (22.8%)	*P=0.022*
Age at parental separation						
	Never separated	11 (2.4%)	274 (60.3%)	57 (12.6%)	342 (75.3%)	χ^2=21.796
	1-4 yrs	5 (1.1%)	18 (4.0%)	6 (1.3%)	29 (6.4%)	*df=8*
	5-8 yrs	2 (0.4%)	18 (4.0%)	2 (0.4%)	22 (4.8%)	*P=0.005*
	9-15 yrs	6 (1.3%)	42 (9.3%)	10 (2.2%)	58 (12.8%)	
	16-19 yrs	0 (0%)	1 (0.2%)	2 (0.4%)	3 (0.7%)	

4.5 Association between socio-demographic factors and perceived parenting styles

Pearson correlation was used to ascertain the statistical relationship among the data. On cross tabulation of family sizes and parental behavior frequencies, majority of the adolescents from

small sized families perceived their mothers (104) compared to fathers (30) to be more emotionally neglectful (table 4.3a). However, the relationship was found not to be statistically significant with the adolescents self esteem.

Table 4.3a Association of perceived parenting behavior frequencies and size of family

PARENTING STYLE/ FORMS OF CHILD ABUSE	Family size					
	Small		Medium		Large	
	Mother	Father	Mother	Father	Mother	Father
Authoritative	34	6	24	5	1	2
Authoritarian	28	2	25	0	7	1
Permissive	15	28	7	30	5	5
Uninvolved	18	23	19	9	4	3
Emotional neglect	104	30	54	25	14	6
Emotional abuse	40	1	22	4	6	0
Physical neglect	----	42	----	22	----	6
Physical abuse	8	78	8	40	2	10

Pearson chi-squire test: Mother: χ^2**=14.808, df=12, p=0.252**

Father: χ^2**=17.130, df=14, p=0.249**

More male adolescents (105) perceived their mothers to be emotionally neglectful while more female adolescents (128) perceived their fathers to be uninvolved (table 4.3b). However, the relationship was found not to be statistically significant with the adolescents self esteem.

Table 4.3b Association of perceived parenting behavior frequencies and adolescents gender

PARENTING STYLE/ FORMS OF CHILD ABUSE	PARTICIPANTS GENDER			
	Male		Female	
	Mother	Father	Mother	Father
Authoritative	42	9	17	4
Authoritarian	31	2	29	1
Permissive	14	37	13	26
Uninvolved	23	22	18	128
Emotional neglect	105	40	67	21
Emotional abuse	44	2	24	3
Physical neglect	----	44	----	26
Physical abuse	10	78	8	50

Pearson chi-squire test: Mother; $x^2 = 6.662$ df=6, p=0.353

Father; x^2 =2.051, df=7, p=0.957

4.6 Association between adolescents self esteem and perceived parenting styles and forms of child abuse

The association of the parenting style and self esteem variables was done using Anova (see fig.4.4). Results revealed that there is a significant positive relationship between Authoritative mother (r=0.203; P<0.0001), and father (r=0.256; P<0.0001), and self-esteem. Authoritarian mothers had a significant negative relationship (r= -0.135; P=0.002) with adolescents self-esteem, however, there was no significant relationship (r= -0.020; P=0.352) with the father. Significant positive relationship (r=0.123; P=0.008) was also found between Uninvolved father and the adolescents self-esteem however no significant relationship for the uninvolved mother (r=0.049; P=0.151) and self esteem. There was a negative impact on adolescents with uninvolved fathers however no significance with uninvolved mothers. There was no significant relationship found between Permissive mother (r=0.076; P=0.055) and father (r=0.080; P=0.58), and adolescents levels of self esteem. The results also revealed a significant negative relationship

between physical abuse of mothers(r= -0.324; P<0.001) and fathers (r= -0.118; P=0.010), and self-esteem of the adolescents. There was a significant negative relationship between Physical neglect mothers(r= -0.147; P<0.001) and fathers (r= -0.174; P<0.0001), and self-esteem. There was a significant negative relationship (r= -0.117; P=0.007) between Emotional abusive mothers and self-esteem however no significant relationship for the emotional abusive fathers (r= -0.002; P=0.481) and self esteem. This study showed that adolescents with Emotional abusive mothers had lower self esteem however no significant impact found of the Emotional abusive fathers. There was a significant negative relationship (r= -0.135; P=0.002) between emotional neglectful mothers and self-esteem but no significant relationship for the emotional neglectful fathers (r= -0.020; P=0.352) and self esteem. This study showed that adolescents with Emotional neglectful mothers had lower self esteem though there was no significant impact of the Emotional neglectful fathers.

Table 4.4 Association between self esteem and perceived parenting styles and forms of child abuse

	MOTHER		FATHER		MOTHER		FATHER	
	Mean	SD	Mean	SD	Pearson correlation	Sig (1-tailed)	Pearson correlation	Sig (1-tailed)
					Self esteem			
Self esteem	21.93	4.104	21.94	4.156	1.000	-------	1.000	------
Authoritative	26.26	5.852	24.88	5.900	0.203	0.000	0.256	0.000
Authoritarian	18.36	4.811	18.75	5.580	-0.135	0.002	-0.020	0.352
Uninvolved	25.67	4.988	24.51	5.898	0.049	0.151	0.123	0.008
Permissive	16.88	3.944	16.49	3.932	0.076	0.055	0.080	0.058
Physical abusive	21.41	5.664	21.01	6.266	-0.324	0.000	-0.118	0.010
Physical neglect	15.47	3.618	15.29	4.010	-0.147	0.000	-0.174	0.000
Emotional abuse	30.44	6.057	29.05	6.531	-0.117	0.007	-0.002	0.481
Emotional neglect	18.36	4.811	18.75	5.580	-0.135	0.002	-0.020	0.352

5.0 Discussions

The adolescents (respondents) were asked to answer self administered questionnaires to generate information of their levels of self esteem, their perception of their parents parenting behavior as well as some identifying data.

There were more males than females respondents in the secondary schools (60.4% males and 39.6% females). This has been a phenomenon for a long time in Kenya and has been attributed to several factors, e.g. girls dropping out of schools due to teen pregnancy, early marriages, domestic work overload, parental attitude that girls have less abilities compared to boys; boys given education priority over girls whenever there is a financial problem in the family, parental believe that girls will move out and get married while boys will carry on the family name, as well as some parents believing that educating a girl child exposes her to other live styles that can encourage prostitution which is an embarrassment to the family (Dawo & Simatwa, 2010). The current study did not attempt to establish the reason for the disparity as it was not one of its objective. The study objective was to establish whether there exists a relationship between levels of adolescents self esteem and their perceived parents' parental behavior.

Parents play an important role in shaping their children's character and are considered an important determinant in several aspects of their children's outcome including how they view themselves. One of the greatest factors affecting self-esteem is one's experiences encountered in childhood and is largely influenced by interpersonal relationships. During the formative years the child's environment is constituted by the adults who provide basic needs to the child. In this the child finds security and forms a base of reference even in the future as well as their self concept.

Parents make choices consciously or unconsciously on how they will rear their children; and in this they choose a parenting style. The parents' choice of parenting style is usually influenced by many factors. Chao, (1994) argued that the choice is influenced by the parents own temperaments', their own culture and the temperaments' of their child. Other factors that influence the choice of parenting style includes but is not limited to parents own personality, abilities and past experience. Chao posited further that every culture and civilization develops a definite pattern for raising children and what counts as good or adoptive in one culture can be viewed as maladaptive in another society.

Parenting styles vary between households, families, and cultures; each having different ways of raising their children and each parent bearing different role. In the traditional African culture mothers are entrusted with rearing children while fathers offer physical protection and are gatherer (bread winners) for the family. Kimani & Kombo, (2010) posited in their paper that in the African culture; a nuclear family is perceived as comprising of a father, a mother and children. Fathers are recognized as the heads and a focal authority of the family. With this comes security to the family and positively contribute normal development of the children including their self esteem/concept. Kimani and Kombo reported in the same paper that a number of educated women are choosing to avoid their traditional role as wives, therefore preferring life as a single parent in our setting. The Kenya demographic health survey 2009 reported those who have never married as 31.2% women and 46.8% men but in the general population aged 15-49years. The single parents in this study were 24.9% mothers and 5.3% fathers. The finding in the current study is closely similar to a study done in Europe where Krohn and Bogan (2001) reported that about 25% of families are headed by single (female) parents. Similarly, the U.S bureau of census 1998 reported a rise in single parents' families from 22% in1980 to 28% in 1998. This results therefore has an indication of how Kenyan culture is changing, catching up with the western countries life of a family settings.

Indeed lifestyle has evolved in Kenya "a developing country" and parents have to adjust to cater for their families. Busy life, competition and over stimulation of today's world have indeed brought changes in life styles in the Kenyan society, in general, and in families. Growing children need an appropriate, balanced and consistent interaction with parents and significant others. Lack of care and inconsistent interactions with parents tend to cause lack of communication with children. The busy schedules has resulted in parents mainly mothers entrusting a third party (in most cases a house help/child minder) to play their parental role to their children.

In the current study 24.7% of parents were reported by the adolescents as having separated but at different stages in the adolescents' life. Kimani & Kombo (2010) reported in their paper that single parent's families are on the rise probably out of choice, separation or divorces. Women in the Kenyan society have been empowered in various ways e.g. in education, financially etc. and would seek independence breaking away from the traditional female roles in the family. Separation/divorce of parents in this study revealed a significant statistical relationship ($p= 0.005$) with the adolescents' level of self esteem.

According to McIntosh (2003), parental separation/divorce can have different effects across infancy and childhood, impacting on the different developmental age related needs of the children at different stages. McIntosh further argued that separation/divorce affects the couple's relationship as parents as well as the way in which they fulfill their parental functions to their children. Amato & Fowler, (2002) reported that the period following separation or divorce of parents; portrays less effective parenting attributes. The separation/divorce might mean changing the living arrangements, the household economics and directly affect parenting functions. Irfan (2011), argued that parental separation or divorce significantly interrupts interaction with significant others which is vital to adolescents.

The adolescents in this study reported their parents to be in formal employment (69.0% of fathers and 57.1% of mothers). Most of them seemed not to equate self employment or owning a kiosk or green grocer as work/employment. This might mean that white collar job is their preferred type of work as it is viewed as a higher social status. The father's employment status was found to be significant (p=0.022) in the adolescent's levels of self esteem. Studies done in the western societies have shown that a lack of financial resources causes great stress to a family (McLeod et al., 1994). They concluded that financial insecurity and unavailability of resources results in many stress-induced family conflicts.

There was a sizable number of adolescents in this study who did not know what their parents did for a living (5.8%) or the highest education level they had attained (5.3%). The researchers view is that parental self disclosure can enhance communication and enhance motivation in the children in turn boosting their self esteem. Blake & Slate, (1993), found that adolescents who viewed their parents' communication as supportive and open were more likely to have higher self-esteem than those who perceived their parents' communication patterns as controlling and unsupportive.

Different parental behavior in the past has been found to differ in the correlations with the wellbeing of their children. Authoritative parenting in most instances is associated with higher self esteem while authoritarian is associated with more positive child outcomes (Baumrind, 1993). Adolescents of indulgent parents were reported in engaging more in misconduct, and in drug use and children of uninvolved parents do not have set limits which leave the children confused and not knowing how to control themselves (Steinberg et al., 1991). Local literature on studies done in this area is unavailable making it difficult to compare the findings with the current study. Results in the current study revealed (38.7%) emotional neglect by mothers and (33.9%) physical abuse by fathers as predominant parental behavior as perceived by the adolescents. These findings compares closely to

those of an empirical study carried out locally in 2004 (Khasakhala , unpublished master's thesis) done in a clinical setting KNH youth centre. In that study, 56.6% of mothers were reported as emotionally neglectful to male child and 53.6% to girl child. Overall Khasakhala's study revealed mothers as being more abusive to their children than the fathers. Current study reported 38.7% of mothers as being emotionally neglectful compared to fathers 16.1%. There were less than 10% of the parents who were uninvolved according to the adolescents. The current study results also revealed that fathers were more permissive to boys (9.8%) as compared to girls (6.9%).

The researcher observation is that the nature of mothers' role in the family exposes them to spend more time with the children. Hence, the children have more time to observe their mother's than their fathers. Majority of fathers spend more time away from their homes or are absent. The researcher also observed that when the mother has other roles especially career roles, it becomes a challenge to balance the two. It is also possible that the children will be biased in their judgments especially where the fathers only visits and probably doesn't deal with children discipline issues. The findings in this study indicated that mothers of small size families were emotionally neglectful (23.4%) while fathers were physically abusive (20.6 %) to their children. Overall the parents are demonstrated as abusive in this study group.

Bowlby (1977) argued that parents who are unresponsive rather than caring and who invert the normal relationship by requiring the child to act as an attachment figure to the parent create "anxious attachment" in the child. As a consequence the child is said to be anxious, insecure and over dependent and disposed to display "neurotic symptoms, depression or phobia" under stress. Thus, high rejection and high overprotection lead to developing the feelings of loneliness, helplessness and worthlessness. Adolescents had expressed their view about fathers as practicing hands off parenting, being absent most of the times, and playing a passive role in the family management issues. Fathers

were viewed as more permissive (16.4%) compared to mothers (6.1%). The researcher views this as probably an unconscious gesture to fill the vacuum they leave in their children rearing task.

The consequences of child abuse according to Read (1998) can be profound and may endure long after the abuse. The effects of child abuse can appear in childhood, adolescence, or adulthood, and may affect various aspects of an individual's development. Read further argued that the consequences of the effects range from minor physical injuries to low self-esteem. However, not all children exposed to similar experiences of abuse and neglect gets affected in the same way. Dubowitz & Bennett (2007), argues that a range of other life experiences and family circumstances - both positive and negative - impact on a child's vulnerability. The current study revealed that 5.5% girls and 4.8% boys in the study group scored low on global levels of self esteem derived from the Rosenberg self esteem scale. These findings seem to compare closely with what had been found in Europe where gender differences in self-esteem suggested that male adolescents had higher self-esteem than female adolescents (Chubb et al., 1997; McMullin & Cairney, 2004; Moksnes et al., 2010; Robins et al., 2002). However, in some studies, the gender difference was small (Kling et al., 1999; Quatman et al., 2001) or not significant (Keltikangas-Ja¨rvinen, 1990). In this study the cause of low self esteem was difficult to identify but results indicated a strong statistical association with the parental behavior.

According to Haskett at el., (2006), in spite of the risks of negative outcomes, some children exposed to child abuse may emerge unscathed due to protective factors that strengthen their resilience. These factors include the child’s attributes such as self-esteem and independence, as well as features of the family environment and community resources.

Low self esteem strips the person of their self confidence and makes it difficult for them to make decisions and choices which can lead to several negative outcomes. Several studies done in Europe found that low self esteem prospectively predicts antisocial behavior, eating disturbances, depression, and suicidal ideation (Donnellan, et al., 2005; McGee & Williams, 2000; Orth, Robins, & Roberts, 2008) which are significant negative consequences for life outcome.

5.1 Limitation

This study had some limitations.

- First, the analyses relied on adolescents' self reports. Views of parents and child minders who know the adolescents could enrich the findings.
- Some students had difficulties understanding some questions, some gave up and left many questions unanswered making the questionnaires to be rejected for analysis. Others found the questionnaires too long causing fatigue and leaving many blanks. This too, led to those questionnaires being rejected affecting the final number of participants in the study.
- This study was cross-sectional and it is possible that adolescents' outcomes influence their parents' child-rearing styles rather than vice versa. Parental inclusion in the study could have given light on how children affect the parental behavior.
- The present study population was largely from the informal settlements in Nairobi County which is characterized with low social economic status and a high number of single mothers households.

5.2 Conclusion

The role played by parent’s in child care and development cannot be underscored. The adolescents also demonstrates high resilience devoid the high forms of child abuse. This study suggests that parental behavior has a statistical significant association with adolescents’ level of self esteem.

5.3 Recommendations

- For future studies, use of the shorter version of EMBU after being locally adopted and validated will reduce participants fatigue producing reliable results.
- Including other types of schools like private and those in rural settlement will aid in generalizing the results in the Kenyan population.
- Future researches could incorporate parents, and/or child minders who are involved in parenting the adolescents as participants which will give better view to their perceived parental behaviors.
- The information on effects and roles of parental behavior on self esteem can be shared in different forums in the society e.g. Churches and schools to safeguard the child's wellbeing.

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APPENDIX 1

Parent/participant information

Permission for Children Participation in Research

Title: Perceived parenting behavior and its relationship with the level of self esteem among the adolescents in day secondary schools of Nairobi County.

Introduction

The purpose of this form is to provide you (as the parent of a prospective research study participant) information that may affect your decision as to whether or not to let your child participate in this research study. The person performing the research will describe the study to you and answer all your questions. Read the information below and ask any questions you might have before deciding whether or not to give your permission for your child to take part. If you decide to let your child be involved in this study, this form will be used to record your permission.

Purpose of the Study

If you agree, your child will be asked to participate in a research study about childhood memories. The purpose of this study is to determine whether there is an association between adolescents self esteem and their perception of parenting styles used when they were growing up. If you allow your child to participate in this study, they will be asked to answer questions in form of questionnaire about: -

- Themselves
- What they recall about their early life experiences
- How they feel about themselves

These questions will take about 30 minutes to complete and there will be 375 other people participating in this study.

There are no foreseeable risks to participating in this study. However because of the personal nature of the questions asked, your child may reflect on unpleasant memories while responding

to a questionnaire. Should this happen your child should inform the researcher who will debrief them and if need be refer them for further psychological help.

Your child will receive no direct benefit from participating in this study; however, he/she will make a major contribution to the information known about parenting behavior and its relation to the development of self esteem. The students will be psycho-educated on self esteem and its effects on self.

Your child's participation in this study is voluntary. Your child may decline to participate or to withdraw from participation at any time. Withdrawal or refusing to participate will not affect their relationship with The University of Nairobi in anyway. You can agree to allow your child to be in the study now and change your mind later without any penalty.

In addition to your permission, your child must agree to participate in the study. If your child does not want to participate they will not be included in the study and there will be no penalty.

NB: - Neither you nor your child will receive any type of payment participating in this study.

The identity of the participant will only be known by the researcher, but individual responses will be coded on collection to aid in maintaining anonymity hence, confidentiality. The raw data will be stored under lock and key to maintain confidentiality and will only be accessible to the researcher.

If you have any questions about the research you can contact the researcher Mwihaki Gitonga at 0700895885, or Kenyatta National Hospital/University of Nairobi ethical review committee on (254-020) 2726300 Ext 44355.

This study has been reviewed and approved by department of psychiatry university of Nairobi and reviewed by K.N.H. research and ethics committee and the national council for science and technology.

Your signature below indicates that you have read the information provided above and have decided to allow your child to participate in the study. If you later decide that you wish to withdraw your permission for your child to participate in the study you may discontinue his or her participation at any time. You will be given a copy of this document.

Parental consent

I, Mr./Mrs./Ms…….. parent/guardian
of…….in
form……of…… school,
give informed consent for him/her to participate in the study that has been fully explained to me. I understand that there are no financial or other gains but a lot can be learnt to help parents and care givers on how to help the adolescents' self esteem.

Signed……

Date……

Appendix 2

Ascent form

Thank you for agreeing to participate in this research project on relationship of perceived parenting styles and self esteem. The principal investigator is Mwihaki Gitonga.
Your participation in this study is entirely voluntary and you may decline to continue at any time without jeopardy. You will remain anonymous at all times. By completing and returning this questionnaire packet, you are indicating your consent to participate.
Your participation will provide you with experience in the research process and increase our collective knowledge about the relationship of parental styles and adolescent self esteem. The process should take approximately 30 minutes.
The questions included in the questionnaire might evoke some emotions that you might have wished to forget. If and when this happen, please let the investigator know so that you can be debriefed and receive psychological support on site. If you feel the need to discuss the questionnaires after completing them, please contact the chairman ethical committee KNH, or the investigator, or the supervisors Dr. Mathai, and /or Dr. KhasaKhala, Nairobi University, School of Medicine, Psychiatry Department
Age: _____
Gender: _____

Appendix 3

BUDGET

RESOURCE	QUANTITY	TOTAL AMOUNT
4 Exercise book	@ Ksh 50	Ksh. 200
10 Ream of paper	@Ksh 450	Ksh. 4,500
10 Pencils	@Ksh 20	Ksh. 200
10 Pens	@Ksh 30	Ksh. 300
4 Ruler	@Ksh 20	Ksh. 80
Transport facilitation		Ksh. 10,000
Typing/photocopy/biding		Ksh. 35,000
Computer /statistician		Ksh. 75,000
Total		Ksh. 125,280

Appendix 4

Timeline/time frame Work Plan (Gantt chart)

February2011-August 2012	August 2011-February 2012	February2012-April 2012	April 2012-May 2012	May/June 2012 Revised July 2012 Revised August 2012 Revised November 2012 Revised February 2013
Conceptual phase 1.idea generation 2. Literature review	3. formulation of the research problem 4. formulation research questions 5. Research design (planning)			
Phase 2		6. Ethical approval	7.Data collection/ Data Analysis	
Phase 3			8. Answering the Research questions 9. interpretation of the results	
Phase 4			10. compiling results and writing the report	10. Presentation of findings

Appendix 5

Socio-Demographic data

Name of school…….

School registration number…….

Gender, male…..Female…..

Date of birth……/……../……. Age in yrs…….

Class being attended. Form 1…Form 2…Form 3…Form 4….

Appendix 6

Rosenberg Self-Esteem Scale

To what extent do you disagree or agree with the following statements?

SD=Strongly Disagree
D= Disagree
A=Agree
SA=Strongly Agree

1. On the whole, I am satisfied with myself.
   SA.....A..... D..... SD.....
2. *At times I think I am no good at all.
   SA.....A..... D..... SD.....
3. I feel that I have a number of good qualities.
   SA.....A..... D..... SD.....
4. I am able to do things as well as most other people.
   SA.....A..... D..... SD.....
5. *I feel I do not have much to be proud of.
   SA.....A..... D..... SD.....
6. *I certainly feel useless at times.
   SA.....A..... D..... SD.....
7. I feel that I'm a person of worth, at least on a level equal with others.
   SA.....A..... D..... SD.....
8. *8I wish I could have more respect for myself.
   SA.....A..... D..... SD.....
9. *All in all, I am inclined to feel that I'm a failure.
   SA.....A..... D..... SD.....
10. I take a positive attitude toward myself.
    SA.....A..... D..... SD.....

Appendix 7

EMBU Questionnaire

Participants ID…….. Date……

It can sometimes be difficult to remember in what ways one's parents were alike and in what was they differed. Do therefore try, for each question, first to co consider how your father behaved and then how your mother behaved towards you.

Here is an example to illustrate how you should fill out the questionnaire.

1= No Never 2= Yes Occasionally 3=Yes Often 4=Yes Always

F=Father M=Mother

Did your parents use to beat you? F…**2**……. M…**3**…..

Did your parents use to be kind to you? F…**4**…. M….**4**…..

I lived with both parents up to the age of……..

My father is still living…… (Died when I was …….years old)

My mother is still living ……. (Died when I was…….years old)

My parents separated when I was ……..years old.

I have lived with……..since I was……..years old.

I have……..brothers and sisters.

I have……brothers and sisters older than me.

Is your father working/employed? 1=yes 2=No

If yes specify type of work/employment

……..

Is your mother working/employed? 1=Yes 2=NO

If yes specify type of employment

……..

Highest level of education attained by your father? 1=None 2=Primary 3=secondary 4=College 5= University

Highest level of education attained by your mother?

1=None 2=Primary 3=secondary 4=College 5= University

1= No Never 2= Yes Occasionally 3=Yes Often 4=Yes Always

F=Father M=Mother

1. Did you feel your parents interfered with everything you did? F…….. M……..
2. Did your parents show with words and gestures that they liked you? F…….. M……..
3. Were you spoilt by your parents in comparison to your sister(s) and /brother(s)? F…….. M……..
4. Did you feel that your parents liked you? F…….. M……..
5. Did your parents usually refuse to speak to you for a long time if you had done anything silly? F…….. M……..
6. Did it happen that your parents punished you even for small offences? F…….. M……..
7. Did your parents try to influence you to become something “posh” F…….. M……..
8. Did it happen that you were disappointed with your parents because you didn’t get something you wanted? F…….. M……..
9. Do you think that either of your parents wished you had been any different in any way? F…….. M……..
10. Did you think your parents let you have things your sisters and brothers were not allowed to have? F…….. M……..
11. Did you think your parents punished you justly? F…….. M……..
12. Do you think that either of your parents was severe with you? F…….. M……..
13. If you had done something foolish, could you then go to your parents and make everything right again by asking for forgiveness? F…….. M……..
14. Did your parents always want to decide how you should be dressed or how you should look? F…….. M……..
15. Did your parents usually lie to you? F…….. M……..
16. Did you feel that your parents liked your brother(s) and/or sister(s) more than they liked you? F…….. M……..
17. Did your parents treat you unjustly (badly) in comparison with how they treated your sister(s) and/or brother(s)? F…….. M……..
18. Did it happen that either of your parents forbids you to do things other children were allowed to do because they were afraid that something might happen to you? F…….. M……..
19. Did it happen that as a child you were beaten or scolded in the presence of others?

F…….. M……..

20. Did your parents usually care about what you did in the evenings? F…….. M……..
21. If things went badly for you, did you then feel that your parents tried to comfort and encourage you? F…….. M……..
22. Did your parents usually worry about your health unnecessarily? F…….. M……..
23. Did it happen that your parents gave you more corporal punishment than you deserved? F…….. M……..
24. Would your parents become angry if you didn't help at home with what you were asked to do? F…….. M……..
25. Would your parents look sad or in any way show that you had behaved badly so that you got real? F…….. M……..
26. Did your parents let you have things which your friends got, to the extent they could not afford them? F…….. M……..
27. Did you feel that it was difficult to approach your parents? F…….. M……..
28. Did it happen that your parents narrated something you had said or done in front of others so that you feel ashamed? F…….. M……..
29. Did you feel that your parents liked you more than they liked your sister(s) and/or brother(s)? F…….. M…….
30. Did your parents begrudge things you needed? F…….. M…….
31. Did your parents usually show that they were interested in your getting good marks? F…….. M…….
32. If you had a difficult task in front of you, did you then feel support from your parents? F…….. M…….
33. Were you treated as the black sheep, or scapegoat of the family? F…….. M…….
34. Did it happen that your parents wished you had been like somebody else? F…….. M…….
35. Would your parents say: you who are so big or you, who are a boy/girl shouldn't act like that, should you? F…….. M…….
36. Did your parents usually criticize the friends you like to frequent? F…….. M…….
37. Did you feel your parents thought it was your fault when they were unhappy? F…….. M…….
38. Did your parents try to spur you to become the best? F…….. M…….
39. Would your parents demonstrate that they were fond of you? F…….. M…….
40. Did you feel that your parents trusted you so that you were allowed to do things on your own? F…….. M…….
41. Do you think that your parents respected your opinion? F…….. M…….

42. If you had little secrets, did either of your parents want you to tell them about them? F…….. M…….
43. Did you feel that your parents wanted to be together with you? F…….. M…….
44. Do you think your parents were mean and grudging towards you? F…….. M…….
45. Did your parents use expressions “if you do that you will make me sad? F…….. M…….
46. When you came home, did you then always have to account for your what you had been doing to your parents? F…….. M…….
47. Do you think that your parent tried to make your adolescence stimulating, interesting and instructive (for instance by giving you good books, arranging for you to go on camps, taking you to clubs? F…….. M…….
48. Did your parents usually praise you? F…….. M…….
49. Would your parents use expression “is this the thanks we get for having done so much for you and for having sacrificed so much for your sake”? F…….. M…….
50. Did it happen that that your parents wouldn’t let you have things you needed, based on the principle that you shouldn’t become spoilt? F…….. M…….
51. Did it happen that you got a bad conscience towards your parents because you behaved in a way they did not desire? F…….. M…….
52. Do you think that your parents put high demands on you when it came to school marks, sport performances or similar things? F…….. M…….
53. Did your parents usually ignore it if you behaved carelessly or in a similar way? F…….. M…….
54. Could you seek comfort from your parents if you were sad? F…….. M…….
55. Did it happen that you were punished by your parents without having done anything? F…….. M…….
56. Did your parents allow you to do the same things as your friends did? F…….. M…….
57. Did your parents often say that they did not approve of your behavior at home? F…….. M…….
58. Did it happen that your parents tried to press more food upon you than you could manage? F…….. M…….
59. Did your parents usually criticize you and tell you how lazy and useless you were in front of others? F…….. M…….
60. Did your parents usually take an interest in what kind of friends you frequented? F…….. M…….
61. Were you the one or your sister(s) and/or brother(s), whom your parents blamed if anything had happened? F…….. M…….
62. Did your parents accept you as you were? F…….. M…….

63. Were your parents usually abrupt towards you? F…….. M…….
64. Would your parents punish you hard, even for trifles? F…….. M…….
65. Did it happen that your parents beat you for no reason? F…….. M…….
66. Did it happen that you wished your parents would worry less about what you were doing? F…….. M……
67. Did your parents usually engage themselves in your interest and hobbies? F…….. M…….
68. Did you usually get beaten your parents? F…….. M…….
69. Were you usually allowed to go where you liked without your parents caring too much? F…….. M…….
70. Did your parents put decisive limits for what you were not allowed to do- to which they then adhered rigorously? F…….. M…….
71. Did your parents treat you in such a way that you felt ashamed? F…….. M…….
72. Did your parents let your sister(s) and/or brother(s) have things which you were not allowed to get? F…….. M…….
73. Do you think that your parents' anxiety that something might happen to you was exaggerated? F…….. M…….
74. Did you feel that warmth and tenderness existed between you and your parents? F…….. M…….
75. Did your parents respect the fact that you had other opinions than they had? F…….. M…….
76. Did it happen that your parents were sour or angry with you without letting you know the cause? F…….. M…….
77. Did it happen that your parents let you go to bed without food? F…….. M…….
78. Did you feel that your parents were proud when you succeeded in something you had undertaken? F…….. M…….
79. Did your parents usually favor you in relation to your sister(s) and/or brother(s)? F…….. M…….
80. Did your parents take your part against your sister(s) and/or brother(s) even if you were guilty one? F…….. M…….
81. Did your parents usually hug you? F…….. M…….
82. I am of the opinion that my parents, with regards to my upbringing, have been: (tick one)
    a) Extremely consistent with almost unswerving principles
    b) Consistent most of the time
    c) Fairly inconsistent
    d) Extremely inconsistent, could change principles from time to time

83. I am of the opinion that my parents, with regard to my upbringing, have been (tick one)

a) Very severe, I was close to being terrorized

b) Severe on the whole

c) Not particularly severe

d) Not at all severe, I was allowed to do as I pleased

84. Does your mother have any medical/psychological {mental} problem? Yes [...] No [...]

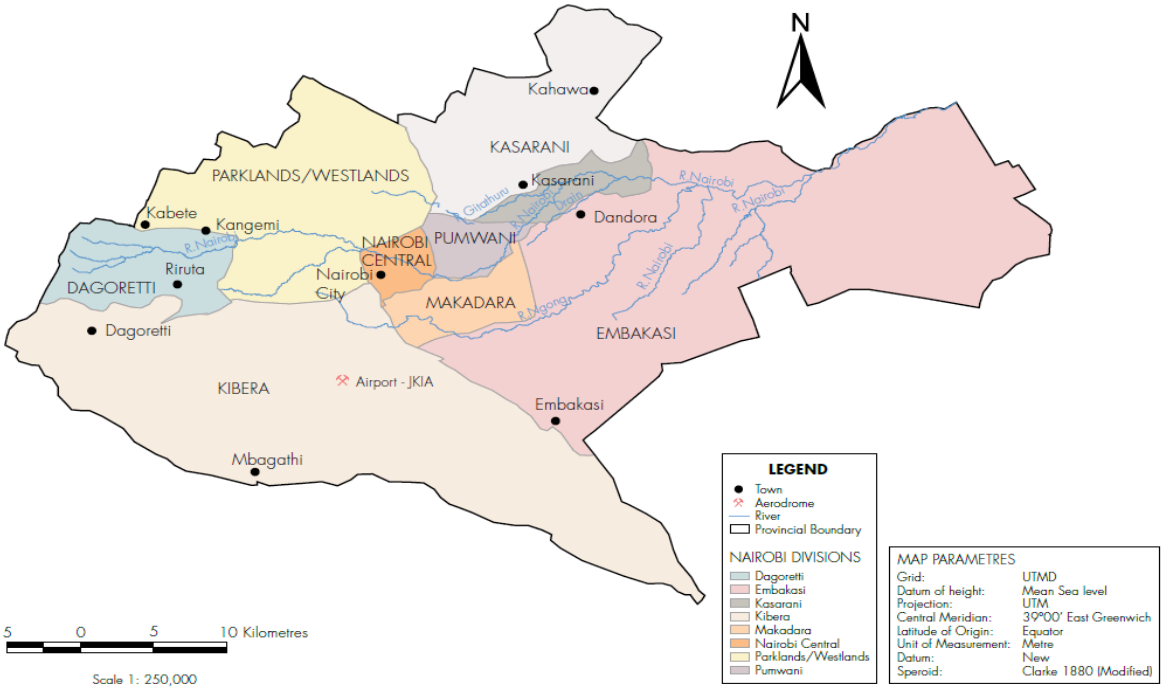
If yes, specify which problem

……
…….

85. Does your father have any medical/psychological {mental} problem? Yes [...] No [...]

……
……..

If yes, specify which problem

Appendix 8

Map of Nairobi