

IMPACT OF FAMILY DYSFUNCTIONS ON SELF-ESTEEM OF IN-SCHOOL ADOLESCENTS

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Abstract

This study investigated impact of family dysfunctions on the self-esteem of in-school adolescents in Obollo-Afor Education Zone, Enugu state, Nigeria. The study adopted Ex-Post Facto research design. The population of the study comprised 673 in-school adolescents with symptoms of traumatic experiences and school related challenges (had physical or mental health records, facing new crisis, living with caregiver/step parents, willing to participate, minimum age of 15 years, and poor school records). The sample of 316 in-school adolescents who met the inclusion criteria of the study was used through a purposive sampling technique. Family Dysfunctions Scale (FDS) and In-school Adolescents' Self-esteem Scale (ISASES) were instruments used for data collection. The instruments were validated by three experts- two from educational Psychology and one from measurement and evaluation all from the Faculty of Education, University of Nigeria, Nsukka. Cronbach Alpha method was used to obtain the internal consistency of the instruments. The reliability coefficient of 0.89 and 0.84 for Family Dysfunctions Scale (FDS) and In-school Adolescents' Self-esteem Scale (ISASES) respectively were obtained. Mean, standard deviation and ANOVA were used for data analysis. Major findings revealed that family dysfunctions impact negatively on self-esteem of in-school adolescents. The results of the study showed that adolescents' self-esteem with respect to gender is highly correlated with their family's dysfunctions. Therefore, to enhance the self-esteem of adolescents, it was recommended among others that parents, caregivers and teachers should be informed about the long-term adverse outcome of family dysfunctions on their children and as well be educated on the preventive measures at the household, school and community levels.

Key words: Family dysfunctions, self-esteem and in-school adolescents

Introduction

A child's initial and primary social environment is their family. All of an individual's important developmental activities take shape there. Each child is born into a family that consists of parents, siblings, cousins, grandparents, aunts, and uncles. Children first establish fundamental character through training and imitation in this setting, which serves as the most significant social institution and the primary means for socialization (Shantisree, 2015). It is one of the most important elements that play a role in shaping human character. Every family setting is different and has its own particular demands, structures, and functions. The degree to which a child can adapt to their environment in life depends on the type of family setting they are born into (Tripathy & Sahu, 2019). According to Rao and Hossain (2012), family environment refers to the conditions and social climate within families. Additionally, it lays the groundwork for a person's capacity to carry out daily tasks. The authors further stated that as a primary agent of socialization, when a family is functioning well, it produces healthy and vibrant people who will benefit not just the family but also the entire society. However, when a family is not functioning properly, it will have an adverse effect on not only the children but also the entire community. The way family functions can affect the physical and psychological health of adolescents. In this regard, Anderson (2014) has noted that the way in which a family functions can have a positive or negative impact on the physical, social, and emotional health of the children. In a perfect world, families raise their children to feel loved and important. Parents support and raise their children. In this view, children who grow up in loving, nurturing homes may feel more confident about themselves and are more likely than other children to make appropriate adjustments and get along with their peers (Raby, Roisman, Labella, Martin, Fraley, & Simpson,

2019). Hence, family is supposed to be where a person develops an understanding of who they are, the world around them, and how to relate with others. However, family environment can be a source of setback for the individual's development, academic outcomes and general well-being. Families may occasionally fail to meet many of their children's academic, emotional, physical, and safety needs as a consequence of inconsistent interactions or due to conflict in the family. According to Tolorunleke (2013), family members should play complementary roles and live in harmony with one another in order to prevent disagreements from destroying the family and harming the children. In the same view, Borst (2015) contended that family life should be defined by open communication among its members as well as close cooperation to ensure that everyone live in harmony. Family dysfunctions can result through disagreement among relatives, particularly between spouses. In addition, children's behaviour can be impacted by familial dysfunction, which may change their personality (Schmidtgall, King, John, & Cooper, 2000). In line with the study, Shantisree (2015) found that children from dysfunctional families tend to be affected psychologically, especially in their way of thinking and their perception of their future including a person's sense of self. In this study, family dysfunction is defined as a domestic violence that damages relationships and causes individuals to become estranged from one another.

Many families in Enugu State today, including those in the Obollo Afor-Education Zone, may have suffered from one impact of family dysfunction or the other. Divorces, polygamy, killing of spouses or suicide, poor communication, all forms of abuse, parent-child conflict, competition, and other situations where children are the victims may have an impact on the children's well-being, especially their self-esteem. (Dihn et al. 2017). In addition, the families' communication patterns may severely limit the child's expressions of feelings and needs (Rezaei-Dehaghani, Paki & Keshvari, 2015). Children growing up in such families may likely develop low self-esteem and may feel that they are not important (Njeru, 2017). As a result, they may find it difficult to relate and trust others later in life. Early family relationships have a bearing on the type of relationships a person will experience throughout their life. Researchers found that higher level of positive experiences in childhood emanating from a functional family is associated with lower chances of having depression, low self-worth or poor mental health at an adulthood (Riichiro & Masahiko, 2011) unlike the individual who had experienced negative events in their family or outside their family. Children reared in environments where violence, assault, and abuse are frequent may be more prone to exhibit this trait themselves due to the fact that such behaviour is seen as normal, (Connolly & Kavish, 2019). As a result, they may perform violent actions or become victims of such acts even as teens. However, in such a setting, parents can deliberately encourage abuse and neglect, and their kids might be made to choose sides in disputes between their parents. These children may have their feelings and opinions ignored or criticised. Some of them have parents who are excessively strict, unnecessarily distant bothersome and detached with their children. Some parents place unreasonably high expectations on their children, such as those relating to choices of friendship or behaviour. This action could lead some of these children to experience rejection or preferential treatment, be restricted from full and direct communication with other family members (Novilla, Barnes, De La Cruz, Williams, & Rogers, 2006). Children who continuously witness disruption in the home may come to have negative views of the world, which can result in behavioural issues (Balistreri & Alvira-Hammond, 2016). In such cases, child victims of dysfunctional family could grow to develop poor attachment, low self-esteem and negative self-identity at later life (Wairimu, Macharia, & Muiru, 2016). Hence, Firestone (2011) predicted that when children are loved, they feel good about themselves, and if they are neglected, they feel hurt, resulting in impending perception of negative experience.

Experiences of family dysfunction can include unpleasant forms of conflict including being assaulted physically or emotionally or threatened. Family violence may contribute to a variety of adverse life outcomes (Nguyen, Dunne, & Vu, 2014). Studies by Bahreini, Akaberian, Ghodsbin,

YazdankhahFard, and MohammadiBaghmollaei (2012) have shown that children who experienced any form of dysfunctions in the family have a greater likelihood of not developing good sense of self-worth. Such children tend to exhibit more developmental problems including low self-esteem and attain lower levels of education (Lloyd, 2015). Several researchers have shown that family dysfunction can be the cause of educational and training failures, disintegration of social ties, social alienations, and alcohol and drug abuse (Walker & Shepherd, 2008). These researchers further found that dysfunctional families are a centre in which crime grows and any incompetency in the function of the family could adversely affect the adolescent's self-esteem. Furthermore, Connolly and Kavish (2019) indicated a dramatic link between children exposure to family dysfunctions and psychological issues such as self-esteem. Studies have shown that development of psychological problem including low self-esteem is more common among in-school adolescents from dysfunctional family than those who were not from dysfunctional family (Akwei, 2015; Alm, Brodin Låftman, & Bohman, 2019). Self-esteem represents the evaluative component of self-concept. This feeling signifies how people feel about themselves and is considered an important outcome of psychological resilience (Sowislo & Orth, 2013). Self-esteem refers to the extent to which one likes, accepts or approves of oneself. People with a sense of high self-esteem tend to be more confident, competent, and therefore more successful, while those with sense of low self-esteem tend to feel inferior, frustrated, hopeless, and may even get emotional trauma. Several studies have shown that people with high self-esteem have high level of mental health and self-consistency (Shim, Wang, & Cassidy, 2013; Gao, Zhang, & Xu, 2015). Another study reported that self-esteem regulated the interaction between human and environment (Liu, Xu, & Yu, 2010). Therefore, individual's environment and cultural background tend to shape the development of one's self-esteem. There is also evidence that dysfunctional family is likely to negatively influence adolescents' physical and emotional development, potentially leading to feelings of being neglected, insecurity, and uncertainty, which in turn, impair adolescent's self-esteem (Walker & Shepherd, 2008). It was further noted by the author that many factors influence self-esteem which include one's inner thinking, age, physical limitations and genetic factors but it is often one's experiences that form the basis for overall self-esteem. Those who consistently receive overly negative assessment from family and friends may be prone to experience low self-esteem. Low self-esteem in this study is an in-school adolescent's negative evaluation of oneself. In the same view, Madigan, Wade, Tarabulsy, Jenkins and Shouldice (2014) in their study in another country reported that adolescents with a history of maltreatment reported lower levels of self-esteem- inability to accept oneself, giving up easily, feeling unwanted, depending on other people's decision, not believing one's ability and strengths.

These cases are not only recorded in foreign countries. Research evidences has attested to the high level of dysfunctional family in Enugu state (Animba, Ezema, Adeyemi, Napoleon, & Chigozie, 2023; Kama, 2017). More specifically, in Obollo Education zone, though no empirical evidence is found pertaining to ACEs, researchers' observation shows that majority of school age children live in a dysfunctional family in the area. Hence, it is evident in Agbaje, Nnaji, Nwagu, Iweama, Umoke, Ozoemena and Abba (2021) that a significant portion of children who are in school in Enugu state, Obollo Education zone not excluded, are exposed to traumatic experiences, ranging from, all kinds of abuse, neglect and violence in the family. Despite being aware of the role of the family in bringing up children, the researchers observed that adolescent students had experienced feelings of inadequacy, loneliness, avoiding reality, and self-destructive behaviours which may be due to low self-esteem levels. Although several studies have emphasized on the family dysfunctions and its relationship to physical, psychological and social well-being, but there is still little knowledge about the impact of family dysfunctions on self-esteem of adolescent students. Moreover, reviewing numerous researches and literature showed lack of studies related to the impact of family dysfunctions on self-esteem of in-school adolescent in the study areas. Thus, the researcher aimed at investigating the impact of family

dysfunctions on self-esteem of in-school adolescents in Enugu state. Therefore, the problem of this study put in question form is: how do family dysfunctions impact on self-esteem of the in-school adolescents in Obollo Afor Education Zone, Enugu state?

Purpose of the Study

The study specifically sought to determine the:

1. Impact of family dysfunctions on self-esteem scores of in-school adolescents
2. Impact of gender on self-esteem of in-school adolescents
3. The impact of family dysfunctions on self-esteem of in-school adolescents based on gender

The following research questions guided the study:

1. What is the impact of family dysfunctions on mean self-esteem scores of in-school adolescents?
2. What is the impact of gender on self-esteem of in-school adolescents?
3. What is the impact of family dysfunctions on mean self-esteem of in-school adolescents based on the gender?

The following null hypotheses were formulated and were tested at 0.05 probability level ($p < 0.05$):

H₀₁: Family dysfunctions do not significantly impact on self-esteem score of in-school adolescents

H₀₂: Gender has no significant impact on self-esteem score of in-school adolescents

H₀₃: There is no significant impact of family dysfunctions on self-esteem score of in-school adolescents based on gender

Methodology

This study adopted Ex-Post Facto research design. The population of the study comprised all the 673 Senior Secondary school two (SSII) at-risk in-school adolescents in all the 41 co-educational public schools in Obollo-Afor education zone, Enugu state. Identification of at-risk adolescents was based on the information gathered from teachers of SS2 classes and school Guidance and Counselors pertaining to students' school adjustment and maladjusted behaviours such as poor discipline, consistent failing in examinations, truancy, absenteeism, late comings, cultism and other maladaptive school behaviours. The sample of the study consisted of 316 senior secondary II in-school adolescents who met the inclusion criteria in Obollo-Afor education zone drawn through multistage sampling procedure. 125 participants were victims of family dysfunctions while 191 participants were non victim of family dysfunctions who served as a comparing group. Two instruments were used for data collection, Family Functioning scale and In-school Adolescents' Self-Esteem Scale (ISASES). Family Functioning scale contains 30 items adopted from Noller, Seth-Smith, Bouma and Schweitzer (1992) to elicit information on family functioning of in-school adolescents. The minimum score is 30 and maximum score is 120 for Family Functioning Scale. In-school Adolescents' Self-Esteem Scale (ISASES) contains 20 items adapted from the Rosenberg to elicit information on self-esteem of in-school adolescents. The minimum score is 20 and maximum score is 80 for Self-Esteem Scale. The instruments were validated by three experts in Faculty of Education, University of Nigeria, Nsukka. The instruments were trial tested using 20 SS II students from the area not participating in the study. Cronbach's Alpha method was used to determine the reliability estimates. The reliability coefficient of 0.89 and 0.84 for Family Dysfunctions Scale (FDS) and In-school Adolescents' Self-esteem Scale (ISASES) respectively were obtained. Data collection was done by administering the instrument to the participants on the spot with the help of 5 research assistants. The research questions were analysed using mean and standard deviation while hypotheses were tested using ANOVA.

Results

Research Question One: What is the impact of family dysfunctions on mean self-esteem scores of in-school adolescents?

Table 1: Mean analysis of the impact of family dysfunctions on self-esteem scores of in-school adolescents

Group	N	Mean	Std. Deviation
Exposed to family dysfunctions	125	37.94	4.96
Not exposed to family dysfunctions	191	62.34	8.94

Data in table 1 showed that the in-school adolescents who were exposed to family dysfunctions had a mean self-esteem score of ($M = 37.94, SD = 4.96$), while those who were not exposed to family dysfunctions had a mean self-esteem score of ($M = 62.34, SD = 8.94$). This indicates that the in-school adolescents who were exposed to family dysfunctions had lesser mean self-esteem than those who were not exposed to family dysfunctions. The data suggested that in-school adolescents from dysfunctional family have low self-esteem.

Ho₁: Impact of family dysfunctions on mean self-esteem scores of in-school adolescents is not significant

Table 2: Analysis of variance of the impact of family dysfunctions on self-esteem of in-school adolescents

Source	Type III Sum of Squares	Df	Mean Square	F	Sig.	Partial Eta Squared
Corrected Model	45273.424 ^a	3	15091.141	261.728	.000	.716
Intercept	752860.023	1	752860.023	13056.972	.000	.977
Group	44752.800	1	44752.800	776.155	.000	.713
Gender	207.477	1	207.477	3.598	.059	.011
Group * Gender	32.575	1	32.575	.565	.453	.002
Error	17989.801	312	57.660			
Total	940655.000	316				
Corrected Total	63263.225	315				

a. R Squared = .716 (Adjusted R Squared = .713)

Data in table 2 revealed that there is a significant difference in the mean self-esteem scores of in-school adolescents who were exposed to family dysfunctions and those who were not, $F(1, 312) = 776.155, p = .000$. Thus, the null hypothesis was rejected. The effect size of 0.713 implies that 71.3% reduction in the self-esteem of the in-school adolescents is attributed to the impact of family dysfunctions

Research Question Two: What is the impact of gender on mean self-esteem scores of in-school adolescents?

Table 3: Mean analysis of the self-esteem of male and female in-school adolescents

Gender	N	Mean	Std. Deviation
Male	139	53.52	13.95
Female	177	52.03	14.34

Data in table 3 showed that the male in-school adolescents had a mean self-esteem score of ($M = 53.52, SD = 13.95$), while female in-school adolescents had a mean self-esteem score of ($M = 52.03, SD = 14.34$). This indicates that male in-school adolescents had slightly higher mean self-esteem than female in-school adolescents. Thus, in this study, male in-school adolescents have higher than the female in-school adolescents.

H₀₂: Gender has no significant impact on mean self-esteem scores of in-school adolescents

Data in table 2 revealed that there is no significant difference in the mean self-esteem scores of male and female in-school adolescents, $F(1, 312) = 3.598, p = .059$. Thus, the null hypothesis was not rejected.

Research Question Three: What is the impact of family dysfunctions on mean self-esteem scores of in-school adolescents based on gender?

Table 4: Mean analysis of the impact of family dysfunctions on self-esteem scores of in-school adolescents based on gender

Group	N	Gender	Mean	Std. Deviation
Exposed to family dysfunctions	56	Male	38.50	5.09
	69	Female	37.49	4.84
Not exposed to family dysfunctions	83	Male	63.66	7.22
	108	Female	61.33	9.99

Data in table 4 shows that the male in-school adolescents who were exposed to family dysfunctions had a mean self-esteem score of ($M = 38.50, SD = 5.09$), while male in-school adolescents who were not exposed to family dysfunctions had a mean self-esteem score of ($M = 63.66, SD = 7.22$). On the other hand, female in-school adolescents who were exposed to family dysfunctions had a mean self-esteem score of ($M = 37.49, SD = 4.84$), while female in-school adolescents who were not exposed to family dysfunctions had a mean self-esteem score of ($M = 61.33, SD = 9.99$). The data suggest that there is an impact of family dysfunctions on self-esteem of in-school adolescents.

H₀₃: The impact of family dysfunctions on self-esteem of in-school adolescents based on gender is not significant.

Table 2: revealed that there is no significant negative impact of family dysfunctions and gender on self-esteem of in-school adolescents, $F(1, 312) = .565, p = .453$. This implies that the null hypothesis is true.

Discussion

The finding of this study revealed that family dysfunctions have a significant negative impact on self-esteem of in-school adolescents who are exposed to family dysfunctions. This implies that in-school adolescents who are exposed to family dysfunctions demonstrated a lower self-esteem compared to those not exposed. The finding of this study is in line with the findings of earlier studies conducted on impact of family dysfunctions on self-esteem of in-school adolescents. For instance, Yen, Yang, Wu and Cheng (2013) conducted a study on the relation between family adversity and social anxiety among adolescents: effects of family function and self-esteem and established a significant negative relationships *between family dysfunction and decreased self-esteem*. A similar study was done by Orth (2018) on long-term effect of family environment on self-esteem and found that the home environment is a key factor in early childhood that influences the long-term development of self-esteem. Other researchers such as Animba, Ezema, Adeyemi, Napoleon, and Chigozie (2023), Lloyd (2015), Njeru (2017), Akwei, (2015), Anderson (2014), Walker and Shepherd, (2008), Firestone, (2011), Connolly and Kavish, (2019), in their studies indicated a negative impact of family dysfunctions on self-esteem of the in-school adolescents. Madigan, Wade, Tarabulsky, Jenkins, and Shouldice (2014) also in their study reported that adolescents with a history of maltreatment from a dysfunctional families reported lower levels of self-esteem- inability to accept oneself, giving up easily, feeling unwanted, depending on other people's decision, not believing one's ability and strengths.

The finding of this study also indicated that male in-school adolescents had slightly higher mean self-esteem than female in-school adolescents. It may be that female students' higher level of

exposure to family dysfunctions probably contributes significantly to their low self-esteem. Thus, this study has established that cultural practices such as girl-child neglect, son preference, early marriage, and child labour among others predispose females more to negative experiences from their dysfunctional home which in turn lower their self-esteem. The finding of this study is consistent with previous studies by Carlson and Gjerd (2010); Rezaei-Dehaghani, Paki and Keshvari, (2015) who believe that girls, compared to boys, experience a drastic reduction in self-esteem in early adolescence in relation to their family functioning. The finding of this study is also in agreement with the finding of Bahreini, Akaberian, Ghodssbin and Fard (2012) which concluded that low parental care and tight control patterns have a significant relationship with depression and low self-esteem in adolescent girls. The finding of this study also showed that there was no significant interaction impact of family dysfunctions and gender on self-esteem score of in-school adolescents from a dysfunctional family and those not from. The finding of this study is in line with the findings of Orth (2018) who stated that that there exists no gender differences in the mean score of family environment and even no gender differences exist in the mean scores of self-esteem of adolescents. The findings of this study disagree with that of Maha, Nathalie, Hassan and Majid (2017) and Al Shawi, Sarhan and Altaha (2019) which shows that men with a history of exposure to adversity resulting from family dysfunctions reported lower levels of emotional support, suggesting an indication of interaction impact of family dysfunctions and gender on self-esteem of in-school adolescents.

Conclusion

Conclusions of this study are made based on its findings and discussion. This study has shown that most of the in-school adolescents exposed to family dysfunction are faced by threat factor for many negative life outcomes such as low self-esteem. Exposure to a functional family plays an important role in building self-esteem during adolescents. Charity they say begins at home and if the home is not functional, there is the tendency for in-school adolescents' self-esteem to be low irrespective of their gender.

Recommendations

Based on the findings of the study, the following recommendations were made:

1. There should be a family therapy aiming at developing relationships skills to prevent conflict and violence in the family in order to enhance the self-esteem of in-school adolescents.
2. Teachers and school counselors should identify and support adolescents from dysfunctional family in school to help improve their self-esteem
3. Parents should also not discriminate against any gender or have gender preference among their children.

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