

Examining the Relationship between Parenting Dimensions, Religiosity, Peer influence, Self-Esteem and Prosocial Behavior among Adolescents in High School of South West Shoa Zone

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Abstract

Problem: Limited evidences are available in Ethiopian context concerning prosocial behavior and its contributing factors as compared to antisocial behavior among in school adolescents. Most studies have focused on antisocial behavior than prosocial behavior. Thus, the main purpose of this study was to examine the contributions of parenting dimensions, religiosity, peer influence and self-esteem to adolescents' prosocial behavior. **Approach:** A cross sectional survey design was used. Self-report questionnaires were utilized to collect data from selected 225 students using simple random sampling. **Findings:** acceptance/involving of both father and mother parenting dimensions positive and significantly related to prosocial behavior ($r = .17$ & $r = .19$) respectively. Religiosity and self-esteem of the participants were also positively and significantly related to prosocial ($r = .23$ & $r = .13$) correspondingly. Multiple regression analysis results also showed despite the small effect sizes revealed, fathers' acceptance dimension and religiosity, and mothers' acceptance dimension and religiosity of the participants significantly predicted prosocial behavior among other variables and explained 10.4% and 8.6 % of the variance of participants' prosocial behaviors respectively. A one-way ANOVA revealed no significant effect of the four parenting style of fathers and mothers on prosocial behavior, $F(3,221) = 1.95$; $F(3,221) = 1.83$ $p > 0.05$ respectively. **In conclusion**, the acceptance parenting dimension of both fathers and mothers and religiosity of the adolescents were the major contributors of prosocial behavior tendencies. The entire findings shown that despite positive contributions were observed, the effect sizes were small. This implies, much will be expected from parents, religious institutions and other concerned bodies to promote prosocial behaviors of the adolescents.

Key Words: Prosocial behaviors, Acceptance parental dimension, control/strictness parental dimension, religiosity

Introduction

Promoting positive behavior among adolescents appears to be important to create responsible, cooperative and productive adolescents in the society. The act of engaging in activities that benefit others or prosocial behavior is one of the positive behaviors to be fostered among adolescents. Prosocial behavior is noted as a form of moral behavior which is indispensable for sustaining positive social relationships and promoting social adjustment[17]. In Ethiopia where collective culture is exercised, aims to benefit others or act of social behaviors that benefit other people are connected to the life of the society. Scholars suggest Ethiopia is a collectivist culture and its people are characterized as kind and hospitable [38]; known by togetherness, support, interdependence, compliance and agreement which are promoted in the family systems[62, 65, 58,

2]. Whether such social behaviors are directed by personal factors or social factors, they are critical for pleasant social interactions, for the quality of close relationships with others, for harmonious interpersonal and group relations [39, 8].

Many studies in prosocial behavior areas showed positive effect it holds to individuals in particular and the society in general. Prosocial behavior produces positive outcomes [69]; and linked to positive consequences including high self-esteem, academic success, and high quality of relationships [41, 55, 71]. It also contributes to the formation of social responsibility and moral behavior; the development and stability of the society; interpersonal helping and collective behaviors (e.g., volunteerism and participation in social movements), and to the process of cooperation between collectives [39, 35, 18].

Despite the fact that prosocial behavior is expected and has paramount of positive outcomes, extensive body of researches indicated antisocial behavior including crime, violence, hate speech, vandalism, abusing, bullying, harassment or any perceptions and actions that harm or violate the well-being of others are common among adolescents in today's social world. Farrington [21], and Martinez and Gras [47], describe antisocial behavior as deceitfulness, lack of empathy, socially insensitive, irresponsible, disobedient, violation to societal norms and lack of respect for the rights of others. These behaviors are typically peak at the age of adolescence when they are in fact responsible for the majority of all criminal offences [32, 67]. This situation mainly happens because, it is a stage of seeking, formation of personal identity, trying and experimenting [6].

Studies from some African countries showed that violence, crime, delinquency, examination malpractice, stealing, rape, cultism and rudeness are common serious antisocial behavior [54, 26]. Particularly, in Ethiopia several studies by [29] have shown many kinds of antisocial behaviors committed among adolescents in schools. A recent study on antisocial behavior in Ethiopia revealed 31.3% prevalence of antisocial behavior which was adversely related to students' academic performance [29]. These findings suggest prosocial behavior needs substantial attentions and antisocial behaviors should be suppressed through instilling and promoting constructive behaviors like feeling of empathy, helping, comforting, sharing, civic engagement, cooperation and philanthropy in the community. However, studies are limited in the prosocial side than antisocial side especially in Ethiopian context where collective social behaviors are expected, and it needs considerable attention.

As so far searched from the literatures, very few educational researches in Ethiopia have looked at the prosocial side and related factors [36, 68, 1, 66] than antisocial behavior. Among others, what factors contribute to prosocial behavior of adolescents requires answers to promote prosocial behavior through focusing on the enhancing factors. Limited evidences are also available concerning adolescents' self-worth, peers or friends' role and religious commitment that advocates positive behavior in adolescents. Therefore, knowing major factors that help in imparting and promoting social behaviors that benefit other people requires an inquiry. To this end, senior secondary school students in south west shoa zone was randomly selected using simple random sampling technique. The current study thus, investigates the following two research questions: To what extent parenting dimensions, peer influence, self-esteem and religiosity are related to prosocial behavior of adolescents in South West Shoa Zone? What are the major factors presented in predicting prosocial behaviors of adolescents in South West Shoa Zone?

Materials and Methods

Design of the Study and Population

The main purpose of this study was to investigate the contributions of parenting dimensions, peers, religiosity and self-esteem to prosocial behavior of senior secondary school students. A cross-sectional survey research design, quantitative method was used in this study. This design provides a chance to describe trends, attitudes and opinions using a sample from the population. It allows researchers to answer descriptive questions, the

relationships between variables and questions about predictive relationships between variables [16]. It is often used by relationship researchers and a cost effective way to fulfill research objectives[30].

The population of this study were 2021 G.C high school senior students in south west shoa zone. The researcher used Krejcie & Morgan's [40] formula and table for determining minimum returned sample size for a given population size for categorical data. In current study, the total population was 9963 students in grade 11th and 12th (where 5911 were males and 4052 were females). The questionnaires were distributed to 251 students that were selected using simple random sampling method, and 225 students reacted to the questionnaires but 26 students didn't return the questionnaires. This shows, the response rate in this study was 89.64 percent.

Instruments

Prosocial Tendency Measure (PTM-R) developed by [10] was used to measure prosocial behavior. It contains six types of prosocial behaviors including anonymous, dire, altruism, emotional, public and compliant that consists of 25 items and the response format of the items was a four point Likert scale such as "Does not describe me at all", "Describes me a little", "Describes me well", and "Describes me greatly" which were scored 1,2,3,4 respectively [11]. Parenting styles scale (PSS) developed by [42] based on [45] was also used. The scale has 25 items in which students were asked to rate their parents in terms of the two parenting dimensions: acceptance/involvement sub-scale (13 items) and control/strictness/supervision sub-scale (12 items) that measures the extent to which the late adolescent and young adult perceive their parents as loving, responsive, and involved, and parental monitoring and supervision of their late adolescent and young adult respectively. For acceptance/involvement sub-scale responses are made on a four-point Likert-type scale ranging from 1 (Strongly Disagree) to 4 (Strongly Agree) while for strictness/control sub-scale response is made on a three-point Likert-type scale ranging from 1 (Doesn't Try/Know) to 3 (Tries/Knows a Lot). The responses for two items is made using a four-point Likert-type scale ranging from 1 (As Late as I Want) to 4 (Doesn't Allow Me Out). For each student the scores for the items of each sub-scale are summed to create a total score for both dimensions. Peer Influence Scale was also used to measure how peers thought, feeling and behavior contributed to prosocial behavior. It is a sub-scale of Learner's Aggressive Questionnaire [27]. It contains 14 items out of the total 83 items of the original scale. The items are structured in a 3-point Likert format with responses ranging from 1= No, 2= undecided, and 3= yes. Religiosity measures used by Hardy & Carlo [37] was used. According to these authors, it attempts to measure one or more of the following aspects: religious salience or commitment; religious activity or involvement; and religious identity. These religiosity measures have seven items that jointly tap these three areas of religiosity. The items are organized in 5-point format with responses ranging from 1 (Very much unlike me) to 5 (Very much like me). Rosenberg Self-Esteem Scale (RSES) developed in 1965, and widely used instrument in many settings [31] was used. It has ten items that assess individuals' general evaluation of themselves and measured on 4-point Likert scale ranging from 1 (strongly disagree) to 4 (strongly agree). In the current study, all instruments were checked for their reliability and validity. The researcher used Cronbach alpha to compute the reliability and found that the items were on acceptable reliability ranges for prosocial measure tendencies altogether $\alpha = .71$, and in particular, public $\alpha = .89$; Altruism $\alpha = .81$; Emotional $\alpha = .76$; Dire $\alpha = .75$; Complaint $\alpha = .81$ and Anonymous $\alpha = .88$; overall parenting style $\alpha = .76$ where acceptance $\alpha = .78$; strictness/control $\alpha = .90$ respectively. Moreover, peer influence; religiosity and self-esteem scales also had $\alpha = .76$, $\alpha = .71$ and $\alpha = .70$ respectively. Both face validity and content validity were checked by experts from the field of psychology. Unclear and vague questions were amended by the advice of the reviewers. To maximize opportunity to understand the questionnaire for the participants, translating to mother tongue language was needed. The English versions of the Questionnaires were translated into Afaan Oromo by two psychologists, whose mother tongue is Afaan Oromo, then back-

translated by another senior psychologist. Finally, the translators, researchers and other psychologists had discussions to minimize the difference and make consensus.

Methods of data analysis

Descriptive and inferential statistics including mean and standard deviations, Pearson correlation coefficient, multiple regressions and one-way ANOVA were employed in data analysis using Statistical Package for the Social Sciences SPSS version 24. Mean and standard deviations were used to analyze demographic characteristics of the participants. The association between prosocial behaviors and parenting, religiosity, self-esteem and peer influence was examined by Pearson correlation coefficient while their contributions was tested using multiple linear regressions. One-way ANOVA was also used to check if any difference exists between the four parenting styles of both fathers and mothers in terms of prosocial behavior tendencies.

Data collection procedure

This study was approved by the Addis Ababa University School of Psychology Research Ethics Committee. The self-report questionnaire of the Afaan Oromo version was used to collect data. During data collection process, the researchers explained purpose of the study and ethical issues, and the participants were asked for their consent to participate in the study. Finally, the data was collected from randomly selected participants.

Findings

Demographic characteristics of study participants

Majority of the participants were male students with total number of 117 (52%) from both grade 11th and 12th and the rest 108 (47.99%) were female students. Most students 119 (52.89%) were from grade 12th while 106 (47.11%) students were from grade 11th. Moreover, the participants' age ranges from 16 to 23 years; where majority of the participants 128 (56.89%) were between 18-19 years. Participants between the age of 16- 17 were found to be 62 (27.56%) followed by the age of participants between 20-23 years 35 (15.56%). The mean age of the participants was 18.58. In terms of religion affiliation of the participants, majority of the participants were Orthodox religion followers 105 (46.7%) followed by Protestant 52 (23.1%) and Muslim 36 (16.0%) religion followers. The least number of participants were from catholic religion 9 (4.0%).

Relationships between Parenting dimensions, Peer influence, Religiosity, Self-esteem and Prosocial Behavior

Table 1: Intercorrelations of the Study Variables for the participants (N = 225)

Variable	1	2	3	4	5	6	7	8
1. Prosocial Behavior Tendencies	-	.17*	-.03	.19**	-.005	.10	.23**	.13*
2. Acceptance parenting of Father	.17*	-	-.09	.97*	-.115	.18**	.02	.02
3. Control parenting of Father	-.03	-.09	-	-.120	.995**	.32**	.09	-.11
4. Acceptance parenting of Mother	.19**	.97**	-.12	-	-.122	.116	.09	.042
5. Control parenting of Mother	-.005	-.115	.995**	-.122	-	.32**	.08	-.105
6. Peers influence	.10	.18**	.32**	.116	.32**	-	.38**	.16*
7. Religiosity	.23**	.02	.08	.089	.080	.31**	-	.14*
8. Self-esteem	.13*	.02	-.11	.042	-.105	.16*	.14*	-

** p < .01 & *p < .05

Despite differences in magnitude, intercorrelations of the study variables were observed. More specifically as can be seen in table 1, acceptance/involving father parenting, religiosity and self-esteem of the participants positive and significantly related to prosocial behavior ($r = .17$; $r = .23$ & $r = .13$) respectively. In addition,

acceptance parenting of mother was positive and significantly related to prosocial tendencies. With regards to the association between independent variables, acceptance/involving father dimension was positively related to peer influence ($r = .18$). There was also positive and significant relationship between controlling father parental dimension and peer influence ($r = .32$), while peer influence positively and significantly related to acceptance/involving parent dimension ($r = .18$), controlling parental dimension ($r = .32$), religiosity ($r = .38$) and self-esteem ($r = .16$). Religiosity, peer influence and self-esteem of the participant were also positively and significantly related.

Contributions of parenting dimensions, peer influence, religiosity and self-esteem to prosocial behavior

Table 2: Model Summary of Multiple Regression result on prosocial behavior, Father parental dimensions, peers, self-esteem and religiosity

Model	R	R Square	Adjusted R Square	Std. Error of the Estimate	Change Statistics				
					R Square Change	F Change	df1	df2	Sig.F Change
1	.32 ^a	.104	.084	6.40	.104	5.09	5	219	.000

a. Predictors: (Constant), Total father Acceptance/Involvement, Total Strictness/Control, peers, self-esteem and religiosity b. Dependent Variable: Total prosocial behavior

Multiple regression analysis was used to examine if fathers' parenting dimensions, self-esteem, peers and religiosity significantly predicted participants' ratings of prosocial behavior. The results indicated the two predictors explained 10.4% of the variance ($R^2 = .104$, $F(5, 219) = 5.09$, $p < .05$). It was found that fathers' parental acceptance/involvement dimension and religiosity of the participants significantly predicted prosocial behavior ($\beta = .188$; $\beta = .205$, $p < .05$) respectively. Among the study variables (i.e., parenting dimensions: acceptance/involvement, strictness/control, self-esteem, peers and religiosity) the most predicting factors of prosocial behavior tendencies were acceptance parenting dimension and religiosity of the participants. This implies that, the positive association obtained between prosocial behavior and acceptance parenting dimension is reflecting the higher parents positively involved in adolescents' behavior and religiosity does, the likely good prosocial tendencies occur among students.

Table 3: Model Summary of Multiple Regression results on prosocial behavior, mother parental dimensions, peers, self-esteem and religiosity

Model	R	R Square	Adjusted R Square	Std. Error of the Estimate	Change Statistics				
					R Square Change	F Change	df1	df2	Sig.F Change
1	.29 ^a	.086	.065	6.41	.086	4.14	5	219	.001

a. Predictors: (Constant): Total Mother acceptance/involvement parental dimension, Total Mother strictness/control, peers, self-esteem and religiosity b. Dependent Variable: Total prosocial behavior

Results from multiple regression analysis concerning mother parental dimensions indicated that like in fathers' case, mothers' acceptance parental dimension and religiosity of the participants significantly predicted participants' ratings of prosocial behavior. The results of the regression revealed that two predictors explained 8.6% of the variance ($R^2 = .086$, $F(5, 219) = 4.14$, $p < .05$). It was found that mothers' parental acceptance dimension significantly predicted prosocial behavior tendencies ($\beta = .199$, $p < .05$), as did religiosity ($\beta = .197$,

$p < .05$). In general, these results showed that in both fathers' and mothers', acceptance parenting dimension and religiosity of the participants were significant predictors of prosocial behavior. However, in both fathers and mothers, when acceptance and strictness dimensions further labeled into the four parenting styles: authoritative, authoritarian, permissive/indulgent and neglectful, they were not significantly predicted prosocial behavior.

Discussion

Many studies have been conducted since the study of prosocial behavior has got attention in the 1960's. Mixed findings are available concerning roles of social and personal factors for the socialization of the adolescents' behavior. In this specific study, it is intended to connect existing literature to the present findings regarding the role of parenting style, peer influence, self-esteem and religiosity in promoting prosocial behavior of adolescents. With this intention, the contributions of parenting dimensions (e.g., acceptance/involvement and control/strictness), peers, self-esteem and religiosity were examined. It was found that fathers' parental acceptance dimension and religiosity of the participants significantly predicted prosocial behavior tendencies ($\beta = .188$, $\beta = .205$, $p < .05$) respectively. Mothers' acceptance parenting and religiosity also significantly predicted prosocial behavior ($\beta = .199$, $\beta = .197$, $p < .05$). Though studies concerning the association between parenting dimensions and prosocial behaviors are scarce, particularly during adolescence stage [56], this finding is supported by some empirical evidences. Existing evidence showed that parenting styles play roles in personal and social development of children which further contributes to adolescents' behaviors [46]. When adolescents perceive their parents more as authoritative, the prosocial behavior become strong [59]; and supportive, warm and positive parenting have been positively associated with children prosocial behavior [9, 14, 41, 72, 20, 44].

As Eccles et al., [19] also noticed, parental acceptance appears to influence the degree to which adolescents internalize the standards and expectations of their parents. Other findings also showed that acceptance dimension of parenting influences adolescents positive behavior; and those who report having more affective relationships with their parents have shown greater emotional well-being and better psychosocial adjustment [58, 27]. According to Grusec and Hastings [34], when attentive parenting exists, adolescents tend to have more interest and inclined to enter into voluntary activities. These findings affirmed the current finding that revealed positive contribution of acceptance parenting to prosocial behavior. In addition, previous studies consistent with the current findings found that adolescents' perceptions of their parents close and warm involvement in their lives had predicted higher level of engaging in voluntary work [73], and such behavior is a positive action used to benefit others [10]. This consistency may be due to constructive conditions used in this kind of parenting to build positive behavior in adolescents.

One's commitment to his/her religion's activity play a significant role in his/her lives and development of adaptive behavior like prosocial behavior. Religion has been considered to be an important determinant of individuals' behavior, societies, economic and political phenomena [5]. According to Afolabi [3], religiosity is defined as a system of beliefs with certain rituals, practices, which are learned and demonstrated in places of worship. Religiosity differs from spirituality in that spirituality is considered as a way of living which predetermines how individuals respond to life experiences, and one need not engage in any formal religious activities to be spiritual, and spirituality can be used as more general term. Religiosity may be an expression of spirituality; but not guaranteed that all religious people are spiritual [74]. Religiosity is the extent to which one participates in religious practices and believed to have connection with prosociality. As scholars asserted, religiosity is seen as a form of social capital, acts as a source of social control, provides reinforcement for prosocial behavior, and punishment in case of lacks it [37, 24]; it provides people with moral directives to lead their decisions and behaviors [63]. Therefore, given that all religions have teachings emphasized care and compassion for others, religiosity (in this study defined as commitment to, identification with and involvement

in a religion or system of religious beliefs) has a potential positive influence on adolescent prosocial behavior tendencies. It was based on this importance that the current researcher come to include this variable as one of determining prosocial behavior of adolescents.

In previous study by Galen [25], it was found that religious individuals behave in more prosocial ways than nonreligious ones while Grossman and Parrett [33] on the other hand revealed no evidence of religious prosociality. Other study also found that people's particular views about the personality of their Gods was a significant predictor of their behavior towards other people [60]. Similarly, the current finding affirmed that religiosity of the participants positively and significantly related to prosocial behavior ($r = .23$). In spite of small effect size, religiosity was also significantly predicted prosocial behavior when used along with fathers and mothers parenting dimensions ($\beta = .205$, $\beta = .197$, $p < .05$) correspondingly. For a coefficient β , effect sizes between 0.10–0.29 are said to be only small, effect sizes between 0.30–0.49 are medium, and effect sizes of 0.50 or greater are large [15, 22]. This is also consistent with other previous studies that revealed adolescents' religiosity related to prosocial behavior [23, 50]. These results suggest that, commitment to and involvement in one's religion shape social behavior. Along with this, social cognitive theory asserts the paramount roles it plays in modeling the development and practice of behavior, and its effect on one's self-efficacy to be part of social behavior [7]. Bandura suggests that an individual can observe a model, learn the new behavior, and decide whether or not to exhibit the behavior depending on the consequences associated with that behavior [70]. Therefore, religiosity of adolescents facilitates the thought and action of adolescents in their religion's activities which leads to decision in participating positive behaviors as determined in their religions. Regularity in findings may be due to the fact that any religions teaching is to boost individuals believe in their life as having meaning and purpose, to become optimistic on life and toward others, to practice faith, experience life satisfaction and behaving according to religious teachings.

In this study, self-esteem and peer influence showed positive association with prosocial behavior, but did not significantly predict prosocial behavior. In previous study, students with high self-esteem and good family relations had high prosocial behavior engagement [4]. In addition, self-esteem was positively related to prosocial behavior in adolescence stage [52, 43], and had perfect mediating effects on the relationship between the parental acceptance attitude [53]. A number of previous studies also showed that positive peer influence ensures a positive sense of self, promote positive involvement in social behavior and improves mental health [48, 49, 51, 61, 64]. In addition, it was also found that adolescents who saw their high school peers as positive were more likely to engage in community volunteer work and prosocially orientated [73]. However, promising contributions of self-esteem and positive peer influence were not revealed in the current study though positive associations were observed. Inconsistency of findings between previous and current studies may be due to different reasons; for example, due to inadequate modeling of positive behavior than the opposite. In addition, cultural difference may contribute to this inconsistency. Positive peer influences more works in a culture where adolescents develop belongingness to social group. In western societies for example, children are more socialized in autonomous, self-directive and assertive way. On the other hand, children who grow up in Asian societies are more likely to be socialized in self-restrained, cooperative, connected, and exhibit greater self-control when interacting with others [12, 13]. This can be connected to social cognitive theory in which person's cognition or understanding and decision making are important to model others behavior and behave accordingly.

Conclusion

Based on the findings of the study, it can be inferred that acceptance parenting dimension of both mother and father, self-esteem and religiosity of the participants had significant positive relationship with adolescents' prosocial behavior tendencies. Moreover, acceptance parenting dimension and religiosity of the participants are significant predictors and contributed to prosocial behavior though small effect sizes were revealed. These positive associations and contributions of adolescents' social environments (e.g., acceptance parenting

dimension, self-esteem, religiosity) to adolescents' prosocial tendencies can be explained through the perspective of social cognitive learning theory. This perspective postulates that learning occurs in a social context with active and reciprocal interaction of the person, environment and behavior. From this point of view then, adolescents' social environments like parents are important to help adolescents to learn social behaviors and behave carefully. However, these small effect sizes reflect that though much are expected from parents, religion institutions, peers and adolescent themselves to enhance prosocial behavior, they have contributed less in this area.

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