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Aggressive Behaviour among Secondary School Students in Ibadan, Nigeria: Relationship with Family Functioning and Parenting Styles

Samuel O. Osasona, FMCPsych¹; Olaide Nathaniel Koleoso, Ph.D.² and Michael Godswill Okolie³

 ^{1,2}Department of Mental Health, University of Benin Teaching Hospital, Benin City, Nigeria
¹Email: samuelosasona@gmail.com
²Email: olaidekoleoso@gmail.com1 ³Department of Psychology, University of Ibadan, Ibadan, Nigeria
Email: gswillmichaeloyenka@gmail.com

Abstract

The cause of aggressive behaviour in adolescent students is largely related to the family environment. Awareness regarding family functioning and parenting styles is crucial in modern day parenting, and relevant in the prevention of aggression in adolescent students. This study adopted a descriptive cross sectional design, and four hundred senior secondary II (SS 2) students, selected from four secondary schools in Ibadan participated in it. Aggressive behaviour, family functioning and parenting styles were measured by the Aggression Questionnaire (AGQ), the McMaster Family Assessment Device (FAD- GD) and the Parenting Style Inventory (PSI-II) respectively. Data were analyzed using SPSS version 16, and the level of significance was set at p < 0.05. Students who perceived their family to be healthy had significantly, lower mean scores on the measure of aggression than students who perceived their family as unhealthy. Responsiveness and autonomy granting parenting styles had negative influence on aggressive behaviour in the students, while demandingness parenting style was positively related to aggression. The mean score on aggression scale was significantly higher in male than female students. Perceived healthy family, responsive parenting, and autonomy granting had significant negative relationship with aggressive behaviour in students, while demandingness and male gender predicted aggressive behaviour in them. These findings suggest that the family plays important protective and risk

functions in the development of aggressive behaviour in students. The implication of these findings for preventive intervention was discussed.

Keywords: Adolescence, Students, Aggression, Family functioning, Parenting styles.

Introduction

Researchers and scholars have conceptualised aggressive behaviour from different perspectives: psychological, social and moral perspectives; this suggests that aggression is by no means an unequivocal construct. However, a common theme is that human aggression refers to any behaviour directed towards another individual that is carried out with the immediate intent to cause them harm. Usually, the perpetrator believes that the behaviour will harm the target, and that the target is motivated to avoid the behaviour (Bush & Anderson, 2001; Green, 2001). Aggression appears to be the most prevalent and disturbing among deviant human behaviours in the society. Sadly, students in secondary schools are not exempted from the menace of aggressive behaviour. The secondary level of education is a very fundamental stage in the educational career of students and it coincides with the adolescent stage of human development. Shekarey and Rostami (2013) observe that aggressive behaviours are common in schools. Aluede (2011) claims that violence in schools was an issue that had become prominent in the last years as news articles about violent deeds within the school setting are now on the increase. Izuchi and Anetoh (2014) report that aggression against persons or properties takes place very frequently and has become one of the major problems associated with adolescents in secondary schools today in Nigeria. Onukwufor (2013) observes that aggression in Nigeria has been a perturbing issue due to the frightening increase in violent demeanor. He reported a prevalence rate of 20.8% among a sample of 360 secondary school students in Rivers State, Nigeria. Egbochukaru (2007) cited in Aluede (2011) found that four in every five secondary school participants (78%) in their study, reported being bullied and 85% of the respondents admitted bullying others at least once.

Various manifestations of aggressive behaviour have been identified by researchers. The manifestation is usually overt and varies from mild to severe. In its extreme form, they are considered part of antisocial behaviour, and morally, ethically and legally

unacceptable (Moeller, 2001). According to Sameer and Jami (2007) cited in Onukwufor (2013), physical aggression includes kicking, fighting, biting, pursuing, torturing, destruction, gangsterism, stabbing and shooting. Verbal aggression includes threatening, intimidation and engaging in malicious teasing and name calling (National Youth Violence Prevention Center, 2002) cited in Onukwufor (2013). Moeller (2001) describes warning signs of imminent aggressive behaviour to include physical fight with peer or family member, destruction of properties, severe anger for seemingly minor reasons, self-injurious behaviour or threats of suicide. Risk factors of aggressive behaviour, as well as factors that maintain it have been described by various authors; prominent among these factors are: childhood neglect (Kotchet al., 2008); psychological maltreatment (a repeated pattern of damaging interactions between parent and child, including belittling, rejecting, denying emotional attachment, modeling of inappropriate behaviour, as well as witnessing intimate partner violence (Imhonde, Aluede & Oboite, 2009); exposure to violence in the media or violent television viewing during childhood (Huesmann, Moise-Titus, Podolski, & Eron, 2003; Omoera, Edemode, & Aihevba, 2017).

Huesmann, Moise-Titus, Podolski, & Eron (2003) further report that violent media preferences (past and present) among high school students significantly correlated with reports of violent behaviour and aggression in students. The role of biological factors in determining aggressive behaviour has been explored. Nelson (2006) contends that individual biological differences related to genetics. neurotransmitters and so forth lead humans to aggressive behaviour according to their environmental contexts. Importantly, significant disruptive behaviours in students often are associated with psychiatric disorder such as Attention Deficit Hyperactivity Disorders (ADHD) (Ostrov & Godleski, 2009). Depression, oppositional deviant disorder and anxiety disorder (Zahrt & Melzer-Lange, 2011). This underscores the importance of adequate screening for psychiatric morbidity in students, especially those who exhibit constant aggressive behaviour. Engaging in aggressive behaviour portends grave consequences for the student. It increases the likelihood of further aggression, maladjustment, academic and social failure (Lokovi, 2015). In its extreme form, aggressive behaviour could involve destruction of properties and could be intended to hurt or kill (Myers, 2005).

Family functioning refers to the activities that the members of a family perform to satisfy their needs and maintain their status (Amanian, Vesali, Darabi, & Asadi, 2012; Dabaghi, Sheikhuleslami, MitraChehrzad, & Kazem Nezhad Leyli, 2017). The functions or activities include problem solving, communication, roles, affective responses, affective involvement and behavioural control (Nazif, Ahmadi & Ahghar, 2012, Dabaghi et al., 2017). The family is the first institution to which the individual belongs, and family functioning is, therefore, a major factor in the incidence of aggressive behaviour in adolescents (Reese, Vera, Simon & Ikeda, 2000; Dabaghi et al., 2017). Different aspects of family functioning have been found to correlate positively or negatively with aggressive behaviour in students and adolescents generally. Dabaghi et al. (2017) conducted a study to determine the relationship between family functioning and different types of aggression in students aged 14-18 in Rasht, Iran and found a significant relationship between family functions and the total aggression score(p < 0.000). Henneberger, Varga, Moudy & Tolan (2016) examined the longitudinal relationship between family cohesion, parental monitoring and physical aggression among middle school students and reported that family cohesion was significantly negatively related to physical aggression.

A parenting style is a psychological construct representing standard strategies that parents use in rearing their children (Reena, 2018). Parental strategy in rearing children has a significant impact in developmental outcomes (Sangawi, Adams & Reissland, 2015). The findings of a number of studies reveal an association between the quality of parenting styles and children behavioural problem (Aunola & Nurmi, 2005; Sangawi et al., 2015). Barnes and Farrell (1992) found that parenting styles were significant predictors of behavioural outcomes, their findings suggest that positive parenting techniques such as high level of parental support and monitoring tended to have children who were less likely to exhibit misconduct in school and deviant behaviour in general. Parental support predicts a strong sense of self- worth and security, greater psychological well-being and other positive outcomes (Steinberg, 2001; Coplan, Hastings, Lagace-seguin, & Moultaon, 2002). Chao and Willms (2012) found that positive praxis from the parents (sensitive, rational, strong parenting) has positive effects in reducing the levels of behavioural problems and increasing pro-social behavior.

Conversely; numerous studies demonstrated that negative praxis from the parents: excessive control, extreme permissiveness, negligence have a negative effect on the emotional development of the children prompting, in part, behavioural problems and aggressive behaviour(Richard, 2010; Calvete, Gamez-Guadix,& Orue, 2014; Llorca-Mestre, Samper-Garcia,Malonda-Vidal, & Cortes-Tomas, 2017b).Empathy in adolescents is greatly influenced by early experiences of interpersonal relationship (Chao &Willms, 2002).Thus, the development of aggressive behaviour in high school students to a large extent, has origin in childhood experiences and parenting styles; this resonates Sigmund Freud'semphases on the significance of infant-mother attachment for virtually all aspects of subsequent personality development (Lokoyi, 2015).

Macoby and Martin (1983) described three types of parenting styles: authoritative, authoritarian and permissive parenting styles. Authoritative parenting allows extensive verbal give-and-take with their children; the parents display high level of both responsiveness and demands (high responsiveness, high demandingness); they are warm, nurturing and sensitive to their child's needs and maturity when forming behavioural expectations (Rothrauff, Cooney, & An, 2009). Authoritarian parenting, on the other hand, is restrictive and primitive, it insists on rigid adherence to rules (high demandingness) but lacks warmth (low responsiveness). Regarding permissive parenting style, the parents exhibit inconsistency in their use of rules (low responsiveness, and low demandingness), thus are generally uninvolved in the lives of their children (Baumrind, 1991). It is important to note that, parenting styles, as a construct, represents a broad pattern of parenting practices, far beyond authoritative, authoritarian and permissive styles. According to Joseph and John (2008), there are many parenting styles as there are parents; individual parents probably combine elements of two or more of these styles. Generally, the construct (parenting style) captures two important elements: "responsiveness" and "demandingness". Other parenting styles derive from the combination of various degrees of these two basic elements (Maccoby & Martin, 1983). The focus of this study is on the following parenting styles: parental responsiveness, parental demandingness, and psychological autonomy granting:

Parental responsiveness: The parent demonstrates high responsiveness to the child's needs, maintains strict behavioral supervision with high degree of emotional support (Maccoby &

Martin, 1983). Children from such homes are reportedly self-relevant, socially responsible and have socially competent behavior ((Rothrauff et al., 2009). According to Maccoby & Martin (1983), cited in Lokoyi (2015), parental responsiveness predicts social competence and psychosocial functioning.

Parental demandingness: The parent demonstrates high level of expectation from the child, setting expectations of behaviour and consequences for non-compliance, but are less responsive to the child's needs; he/she may utilize love withdrawal to gain compliance from the child. Although the parent may exhibit some degree of warmth, demandingness dominates her parenting practices (Reena, 2018). Consequently, children from such homes acquire socially incompetent behaviours (Baumrind, 1991). Maccoby and Martin (1983) observed that demandingness is associated with problem behaviour.

Psychological autonomy granting: The parent makes few or no demands for household responsibility and orderly behaviour. Although children should be granted some degree of autonomous reasoning, overly permissive autonomy allows the child toregulate his/her activities as much as possible and does not encourage him to obey externally defined standards (Reena, 2018). The concepts of 'responsiveness', 'demandingness' and 'autonomy granting' resonate with authoritative, authoritarian and permissive parenting styles respectively.

The grave consequences that could be associated with aggressive behaviour in students and the important roles that family functioning and parenting style play to moderate this aggressive behaviour, as well as the need to increase knowledge base and advance preventive measures, all underscore the relevance of this study. Although the relationship of family functioning and parenting style with adolescent aggression has been well established there is paucity of data in Nigeria and, perhaps, sub-Sahara Africa regarding this topic. Much of what is known about student aggressive behaviour and the influence of family function and parenting style comes from studies that were conducted in western countries. Thus, more investigation concerning family functioning among nonwestern countries are essential. Building on previous research on the role of family functioning and parenting styles, we formulated the following hypotheses: (1) students who perceive their family to be healthy (functional) will exhibit significantly lesser aggressive behaviour than students who perceive their family to be unhealthy (dysfunctional); (2) parenting styles will each have independent and joint significant effects on aggressive behaviour in the students; (3) male students will have significantly higher scores than female students on the measure of aggression; and (4) family functioning, parenting style and gender will jointly have significant influence on the aggressive behaviour of the students.

Methods

Study Design and Location

The study was descriptive, cross sectional in design conducted in four secondary schools situated in Ibadan North Local Government Area (LGA), Ibadan, Oyo State. Ibadan is a cosmopolitan Nigerian city, reputed to be the largest in Nigeria.

Participants/Sampling

The participants were 400 senior secondary school students (males and females). In Nigeria, secondary education is divided into two levels; Junior Secondary School (JSS), where students are expected to spend three years (JSS 1-3) before graduating to the next level; Senior Secondary School (SSS), where they spend another three years (SSS 1-3). The secondary schools in Ibadan North Local Government Area were stratified into two categories: public and private secondary schools. For reasons of financial and other logistic constraints, four schools (two public and two private) were selected by balloting from among all the secondary schools in the LGA, namely: International School, Ibadan (ISI), Abadina Grammer School, Ibadan (AGSI); Maverick College, Ibadan (MCI) and Emmanuel College, Ibadan (ECI). In each of the selected schools, the Senior Secondary School 2 (SSS 2) class was randomly (balloting) selected for recruitment of participants. Thus, the purpose of the study was explained to all the students in the class and anonymity was assured, after which informed written consent was obtained from students who were 18 years old and above, and willing to participate. Students who were less than 18 years of age and willing to participate were requested to take the consent forms home and obtain consent from their parents. A return rate of 91% was

achieved. In each of the four classes, the first 100 students to give consent and return consent forms were recruited into the study and requested to fill the self-report questionnaires.

Research Instruments

A questionnaire consisting of four sections was used to collect information from the participants:

Section A: Aggression Questionnaire (AGQ) (Bosh & Warren, 2002)

The 34-item AGQ consists of five scales: physical aggression (physical expression of anger), verbal aggression (argumentative and hostile language), anger (agitation and loss of sense of control), hostility (resentment, social isolation and paranoia), and indirect aggression (expression of anger without direct confrontation). Items are answered on a five- point Likert-type scale with a total score ranging from 34 to 170. Higher scores indicate more self-reported aggressive behaviours. Previous reports of reliability (coefficient alpha) suggest good to moderate reliability: Physical Aggression (r = .88), Verbal Aggression (r = .76), Anger (r = .78), Hostility (r = .82), Indirect Aggression (r = .71) and the Total Scale (r = .94) (Buss & Waren, 2000). These coefficient alphas suggest good reliability. For this study, a coefficient alpha of 0.87 was established.

Section B: General family Functioning Scale (Epstein, Baldwin & Bishop, 1993)

This is a subscale of the Mc Master Family Assessment Device (FAD-GF). It comprises 12 short statements, for example, "in times of crisis we can turn to each other for support", to which participants indicate the extent of their agreement using a 4-point scale: strongly agree (1) to strongly disagree (4). Six items are phrased to reflect healthy functioning (as in the example above), whist the remaining six screen for unhealthy characteristics (for example, "we don't get along well together). A higher mean scale score (possible range 1.0-4.0) indicates greater level of family dysfunction with scores > 2.0 reflective of clinically unhealthy functioning (Miller et al., 1985). Internal consistency of the FAD-GF is good (N = 503; a = 0.92) its test-retest reliability over a 7-day period, r = .71 and FAD scores have successfully differentiated between clinical and non-clinical

unhealthy families (Epstein et al., 1983; Miller et al., 1985). The internal consistency of the scores obtained in the current sample was .72.

Section C: The Parenting Style Inventory II (Darling &Toyokawa, 1997)

Parenting Style Inventory II (PSI-II) is a 15-item questionnaire consisting of three subscales: emotional responsiveness, demandingness and psychological autonomy granting. The PSI-II asks participants to select an answer that corresponds to their perceived parental practice for each of the 15 items, on a five-pointscale (1 'strongly disagree' to 7 'strongly agree'). Items were responded to with respect to participant's most influential parent (father or mother). It is designed to give a final score on each subscale and the higher the score on each subscale the higher the level of the parenting style measured by the subscale. In the PSI-II for this study, items 1-5 measure emotional responsiveness (sample item: "I can count on my most influential parent to help me out if I have a problem"); items 6-10 measure psychological autonomy granting (sample items: "my most influential parent gives me a lot of freedom", "my most influential parent really lets me get away with things"); and items 11-15 measure demandingness (sample items: "my most influential parent hardly praises me if I do well", "if I don't behave myself my most influential parent will punish me). Items 1, 2, 6, 9, 12, and 15 should be reverse scored. According to the author, all alphas reached acceptable levels (demandingness, α =.72; responsiveness, α =.74; autonomy-granting, α =.75).

Section D: A Socio-demographic data collection sheet, which obtained information on some socio-demographic characteristics of participants and their most influential parent, such as age, sex, religion, ethnicity, and so forth.

Ethical Issues/Procedure

Before the commencement of the study, permission was obtained from the authorities of each of the participating schools and ethical approval was obtained from the research committee of the affiliated institution. At the commencement of data collection, potential participants were approached in their class and the nature and purpose of the study explained to them. They were told that

participation was voluntary and declining to participate will not attract any penalty. Anonymity was assured and they were encouraged to ask questions or raise any concerns they may have about the study. Written informed consent was obtained from willing students and the questionnaires were administered, the participants were able to complete them with ease in 20-30mins. No incentive was offered. Retrieved questionnaires were checked for correctness and coded. All procedures contributing to this work complied with the ethical standards of the institutional committee on human research and with the Helsinki declaration of 1975 as revised in 2008.

Statistical Analysis

Data were analyzed using version 21.0 of SPSS. Descriptive and inferential statistics were employed. Hypothesis one and three were tested using t-test for independent sample, while hypothesis two and four were tested using multiple linearregression analysis with aggression as the outcome variable. Reliability assessments of independent and dependent scales (Cronbach's alpha) were also done. Statistical level of significance was set at p = 0.05.

Results

This study adopted inferential statistics to test the four research hypothesis and the results and interpretations are presented in tables.

Dependent Variable	Independent Variables	N	\overline{X}	SD	df	Т	Ρ
	Family Functioning						
	Unhealthy	182	84.55	20.08	354	5.305	.000
Aggressive Behaviour	Healthy	174	73.19	20.31		0.000	
	Gender						
	Male	126	86.90	16.80	354	5.899	.000
	Female	230	74.67	21.75	554		

Table 1: Summary of t-test Showing the Effect of Family Functioning and Gender on Aggressive Behaviour

The first hypothesis was tested using an independent sample ttest (Table 1). Students who perceived their family to be healthy hadlower mean scoreson measure of aggressive behaviour than students who perceived their family to be unhealthy ($\overline{\Box}$ = 73.19 and = 84.55 respectively) and the difference was statistically significant(t =5.305; df = 354, *P* =0.001).

Table 2: Summary of Regression Showing the Joint and Relative Contributions of parenting Styles (Responsiveness, Autonomy and Demandingness) on Aggressive Behaviour

Variables	R	R^2	F	Р	β	Т	Р
Responsiveness					-0.217	-3.339	.001
Autonomy	0.396	0.156	21.77	.000	-0.300	-5.907	.000
Demandingness					0.037	0.575	.565

The second hypothesis was tested using multiple logistic regressions (Table 2).Responsiveness and autonomy granting independently,were negatively related to aggressive behaviour (\hat{a} = -0.217; t = -3.339, p = 0.001 and \hat{a} = -0.300, t = -5.907, p < 0.001 respectively).Further analysis revealed that all the variables jointly had significant influence on aggressive behaviour (F (3,352) = 21.77, p < 0.001)). The coefficient of determination, R² = 0.156 (adjusted R² = 0.151). Thus, the variables jointly determined 15.6% (adjusted = 15.1%) of the variation in aggressive behaviour (outcome measure).

The third hypothesis was tested using independent sample ttest (Table 1). Male students scored higher (= 86.90) than female students (= 74.67) on aggression scale and the difference was statistically significant (t = 5.899, p = 0.000). Thus, gender significantly influenced aggressive behaviour in students.

Table 3: Summary of Regression Showing the Joint and Relative Contributions of Family Functioning, Parenting Styles (Responsiveness, Autonomy and Demandingness) and Gender on Aggressive Behaviour

Variables	R	R ²	F	р	В	Т	Р
General Family Functioning					-0.001	-0.027	.978
Responsiveness					-0.192	-2.868	.004
Autonomy	0.454	0.206	18.20	.000	-0.309	-6.230	.000
Demandingness					0.129	1.954	.051
Gender					-0.248	-4.681	.000

The fourth hypothesis was tested using multiple regressions (Table 3). The three independent variables: family functioning, parenting styles (responsiveness, autonomy and demandingness) and gender, jointly have significant positive influence on aggressive behaviour (F (3,353) = 18.20, p< 0.001). The coefficient of determination was $R^2 = 0.206$. Thus, the variables jointly accounted for 20.6% of the proportion of variation in aggressive behaviour.Responsiveness, autonomy and gender were found to have independent significant negative relationship with aggressive behaviour ($\hat{a} = -0.192$, t = -2.868, p = 0.004; $\hat{a} = -0.309$, t = -6.230, p = 0.001 and $\hat{a} = -0.248$, t = -4.681, p = 0.000 respectively).

Discussion

Based on a cross sectional observation, the present study examined the influence of family functioning, parenting style and students' gender on aggressive behaviour in adolescent secondary school students.Students who perceived their family as healthy (functional family) had significantly lower mean score than students who perceived their family as unhealthy (dysfunctional) on the measure of aggression. This finding suggests thata functional family has a protective effect against aggressive behaviour in the students, and it is consistent with reports from some previous studies: Gary (2014) examined the relationship between adolescent aggression and family functioning found that the family atmosphere is significantly related to incidence of aggression. The more difficult it is for the family members to establish relationship with each other, the more likely is the incidence of aggression due to suppressed emotion. Sanni,Nsisong, Abayomi, Felicia &Leonard, (2010) in their study, found that a cohesive family environment reduces the chances of aggressive behaviour. Similarly, other authors: Andreas & Watson (2009); Gorman-Smith *et al.* (1996); Lucia & Breslau (2006) reported significant relationship between family functioning and aggressive behaviour in later life.

The risk literature on youth aggression and violence indicates that the family is one of the most influential risk factors for student aggression. This influence could be attributed to the fact that the family is the first institution to which the individual belongs, and desirable as well as undesirable behaviour of family members affect one another in the family (Dabaghi et al., 2017). Thus, the role of healthy/functional family in preventing aggressive behaviour in students cannot be over emphasized. Although various theoretical approaches have emphasized different aspects of family functioning, these aspects are all related. Dabaghi et al. (2017) suggested that, among other factors, elements of maintaining a healthy family functioning include: setting of proper behavioural patterns in the family, fair division of family task and satisfaction with roles and responsibilities, understanding of each other's value and interest, and appropriate response to each other's emotions. However, it is worthy of note that the relationship between family functioning and aggressive behaviour could be bidirectional; aggressive behaviour could be a consequence of a dysfunctional family and vice versa.

Among the parenting styles, parental responsiveness was associated with reduced aggressive behaviour in the students. Students who perceived that their parents demonstrated high responsiveness with adequate control, in rearing them had significantly decreased risk of aggressive behaviour. This finding resonates with the behavioural outcome of authoritative parenting style and is consistent with previous reports by some other researchers: Steinberg, Mounts, Lamborn, & Dornbusch (1991) correspondingly reported that high degree of responsiveness and emotional support with behavioural supervision is associated with lesser aggressive behaviour in adolescents, and that such adolescents demonstrate high degrees of psychological adjustment. The parents exercise parental control with warmth, love and compassion, thereby inculcating similar attributes in the children. Adolescents from such homes may imbibe characteristics of

compassion, responsibility, and a sense of security which may militate against aggressive behaviour.

Psychological autonomy granting was also negatively related with aggressive behaviour in the present study. Findings of previous researchers concerning the relationship between psychological autonomy granting and aggressive behaviour are mixed. A substantial body of literature suggests a positive relationship between autonomy granting and aggressive behaviour in adolescents (Mestre, Samper, Nacher, Cortes & Tur, 2004; Samper, Aparici, & Mestre, 2006; Fili, 2016). Similarly, Raya, Pino, Ruiz-Olivares & Herruzo, (2013) found that a combination of high scores in autonomy with low scores in responsiveness had a significant influence on increased probability of aggressive behavior. Such findings are at variance with the findings of this study. However, in keeping with our finding, Reena (2018) reported that moderate autonomy granting is negatively related with aggressive behaviour. It would appear that autonomy granting may present different behavioural outcomes for adolescents depending on the level of autonomy. It is possible that most of the participants in this study perceived that their parents granted them reasonable level of autonomy, hence the negative relationship of autonomy with aggression in this study. Moderate autonomy granting prepares the child for pro-social behaviour in later life, wherein he or she is able to regulate his/her behaviour from within and do a self-evaluation by personal standards. According to Baumrind (1989), a degree of autonomy that allows the child to reason autonomously about moral problems, and learns to think independently is associated with low risk of aggressive behaviour in adolescent. Therefore, these findings imply that when children and adolescents are allowed to exercise some level of autonomy in their regular activities, with appropriate guidance by the parents, they may develop the needed sense of selfworth, confidence, self-control and assertiveness to develop prosocial behaviour.

This study found that demandingness is positively related to aggressive behaviour in secondary school students. Students who perceived their parents to have demonstrated high demandingness, little emotional support, and minimal responds to their needs had significantly increased risk of aggressive behaviour. This finding resonates with reported behavioural outcome of authoritarian parenting style and tallies with some other researchers' report (Niditch & Varela, 2012; Yap,Pilkington, Ryan &Jorn, 2013).The low responsiveness and lack of emotional support that characterize the demandingness style of parenting may foster anger and frustration in children and adolescent leading to high levels of aggressive behaviour. While responsiveness and autonomy had negative relationship with aggressive behaviour in this study, demandingness had a positive relationship with it. All the variables had a significant joint influence on aggressive behaviour of the students, a finding that supports the second hypothesis which stated that parenting styles (responsiveness, autonomy, and demandingness) will jointly have significant influence on aggressive behaviour in students.

This study found that male students had higher mean score than female students on aggression scale. Gender plays an important role in human aggression (Lindenfors & Tullberg, 2011) and sex difference in aggression is one of the most robust and oldest findings in psychology (DelGiudice, 2015). Across many cultures, males are historically believed to be generally more physically aggressive than females from an early age (Bjorkqvist, 1994). Many empirical studies support this finding (Batrinos, 2012). Theories that seek to explain gender differences in aggression have emphasized the roles of; 1) testosterone: aggressive behaviour tends to increase with testosterone and it is present to a lesser extent in females (Dabbs, Frady, Carr & Besch, 1987; Chichinadze, Domianidze, Matitaishvili, Chichinadze & Lazarashvili, 2010; Batrinos, 2012). 2) Genetics: Gender difference in aggression is likely to result from the action of a large number of genes which interact with each other and the environment through development and life (Batrinos, 2012).

This study has highlighted the relationship between the family (family functioning and parental style) and aggressive behaviour in adolescent secondary school students. The findings have important implication for the prevention of aggressive behaviour in students. By maintaining healthy family and using good parenting methods, the family is likely to make significant contribution to preventing or reducing aggressive behaviour in students. Although currently there appears to be an emphasis on providing aggression prevention programmes in school environments, such programmes are still at infancy in Nigeria, and there is little involvement of the family. It is crucial to recognize the influence of the family on students'

aggression and enhance its role as partof prevention programmes. Interventions that include a focus on family functioning have been shown to be effective in preventing or reducing behavioural problems, including aggression (Bradshaw, Zmuda, Kellam &Ialongo,2009; Kumpfer & Alvarad, 2003). Although this study and some previous ones have provided empirical support for the relationship between family functioning and parenting styles in the development of student aggressive behaviour, it is important to note that the literature suggests that these factors always operate in interaction with the environment; ecological factors, social stressors, such as poverty, large family size, family loss/illness and inadequate housing are important factors. It is advocated that future studies attempt to elucidate the role of these factors in the incidence of student aggression. In conclusion, a healthy family and parenting styles characterized by high parental responsiveness and reasonable autonomy granting have protective role against aggressive behaviour in adolescent students, while parental demandingness and male gender increase the risk of aggression. Families have important role to play in controlling aggression in students and their inclusion in prevention programmes may enhance the effectiveness of such programmes.

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