

MALADAPTIVE BEHAVIOUR OF SECONDARY SCHOOL STUDENTS IN IMO STATE, NIGERIA.

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Abstract

This study investigated the influence of parenting styles and family status on proneness to maladaptive behaviour of secondary school students in Imo State, Nigeria. Two hypotheses were posed to guide the study. The design of the study is pre-test post-test quasi experimental design. Simple random sampling technique was used to select three secondary school II (SSS 2) and the same sampling procedure was adopted for the selection of 40 students from each Senior Secondary School II (SSS 2). The total number of 120 students participated in the study. Three instruments were used namely; Levenson Self-Report Psychopathy Scale (LSRPS), Parenting Style Questionnaire (PSQ) and Hare Psychopathy Checklist-Revised Scale (PCL-RS) with the reliability coefficient values of 0.89, 0.79 and 0.81 respectively. The data obtained were analysed using both Descriptive and Inferential Statistics for each hypothesis and tested at 0.05 level of significance. The result from the study revealed that one of the hypotheses was accepted whereas one was rejected. The study showed that there is no significant difference in proneness to maladaptive behaviour among participants based on family status. The result also revealed that there is a significant difference in parenting styles among participants in the three experimental groups. It has demonstrated that self-control intervention technique was more efficacious than the cognitive restructuring in handling issues of proneness to maladaptive behaviour. One of the recommendations was that parents should bring their teenagers much closer to themselves so that they would not be exposed to their peers who may negatively influence them.

Keywords: *Parenting styles, Family status, Experimental conditions, and maladaptive behaviour.*

Introduction

Cognitive restructuring and self-control are core techniques in cognitive behavioural therapy (Gladding, 2009). Cognitive restructuring and self-control are therapeutic processes used to identify and confront negative thought patterns and help people understand that these thoughts are ineffective or disruptive, with the goal to ultimately change negative behaviours (Gladding, 2009). Cognitive Restructuring Technique (CRT) is used to teach clients how to think differently by replacing adverse and illogical thoughts with more rational and positive types of thinking as well as positive adjustment of oneself (Okoli, 2002). Cognitive therapy is a psychotherapeutic approach that focuses on how one's thinking influences one's feelings and behaviours (Chapelle, 2015). In most cases, Cognitive Behaviour Therapy has been identified as a gradual process that helps a person take incremental steps towards a behavioural change, which demands its essentiality in handling cases related to maladaptive behaviour.

Similarly, self-control therapy could be applied when confronted with feelings that could lead one to committing negative behaviour such as stealing, rape, greed, depression, envy or jealousy. In other words, self-control has to do with the ability to control one's emotions and behaviour in the face of temptations and impulses which might make an individual exhibit traits that are maladaptive in nature.

Family status on the other hand is defined as “the **status** of being in a parent and child relationship.” This can also mean a parent and child “type” of relationship, embracing a range of circumstances without blood or adoptive ties but with similar relationships of care, responsibility and commitment. The family that one grew up with, as well as the family that the individual comes home with can have a profound effect on one's adaptive or maladaptive behaviour (Raboteg-Saric & Sakic, 2014). A parenting style is a psychological construct representing standard strategies that parents use in their child upbringing. Parenting styles are the representation of how parents respond and demand to their children. Parenting practices are specific behaviours, while parenting styles represent broader patterns of parenting practices (Spera, 2005). In the research of Baumrind (1967) which focused on the classification of parenting styles, found what was considered to be the four basic elements that could help shape successful parenting. Those basic elements are; Responsiveness versus irresponsiveness's and demanding vs. undemanding. Through her studies, Baumrind identified three initial parenting styles. They are; Authoritative parenting; Authoritarian parenting and Permissive parenting.

This is characterized by a child-centered approach that holds high expectations of maturity. Authoritative parents can understand how their children are feeling and teach them how to regulate their feelings (Deater-Deckard, 2016). With high expectations of maturity, authoritative parents are usually forgiving of any possible shortcomings (Santrock, 2007). They often help their children to find appropriate outlets to solve problems. Authoritative parents encourage children to be independent but still place limits on their actions (Santrock, 2007).

Authoritarian parenting is a restrictive punishment – heavy parenting style in which parents make their children follow their directions with little to no explanation or feedback and focus on the child's and family's perception and status (Santrock, 2007). This could be referred to as “strict father model”. Permissive Parenting Style is also called indulgent, non-directive, lenient or libertarian (Osorio, Alfonso, Gonzalez – Camara, Marta, 2015). Permissive parenting style is characterized as having few behavioural expectations for the child. Here, parents are very involved with their children but place few demands or controls on them (Santrock, 2007). permissive parents may tend to be more impulsive and as adolescents may engage more in misconduct such as drug use. Children never learn to control their own behaviour and always expect to get their way (Santrock, 2007).

In the widest sense, students' maladaptive behavior at school can be defined as “any type of behavior by students in a classroom or school environment that violates a written or unwritten social norm or school rule” (Koerhuis and Oostdam 2014). Maladaptivity can pertain to a wide variety of behavior,

ranging from outright delinquency to far more subtle forms of disruptive or antisocial behavior. In addition, maladaptive behavior can be aimed at specific people (e.g., supervisors, teachers, or peers), or more generalized, targeting anyone and anything. Finally, if behavior can also be an isolated event or recurring. This broad definition of maladaptive behavior is in accordance with several descriptions used in (Omoegun, Okoli & Oparaduru, 2019).

It is well known that maladaptive behavior increases with age and peaks during adolescence (Moffitt, 1993). Biological changes (hormonal changes and neurological development) could account for this, as could the influence of social environmental factors such as the growing importance of peers (Omoegun, Okoli & Oparaduru, 2019) and the widening gap between students' personal lives and interests and the school environment (Eccles & Roeser, 2009).

Maladaptive behaviour is an overwhelming issue around the whole world today though it varies based on its risk level from one place to another. In the opinion of Murphy (1985), behaviour such as theft, individuals taking materials and other resources such as property from another person without his or her knowledge, truancy, jumping the fence are associated with maladaptive behaviour. Over the years, efforts have been made by various governments in handling issues relating to maladaptive behaviour in Nigeria especially among school children. However, instead of having positive results, the reverse seems to be the case. Gottfredson and Hirschi (1993) posit that high self-control effectively reduces the possibility of maladaptive behaviour. In other words, the lower a person's self-control, the higher his or her involvement in maladaptive behaviour (Gottfredson & Hirschi, 1993).

This study in the first place investigates the general hypothesis that the extent to which family status meets their childrens` need to feel competent, autonomous, and relatedness is an important factor that decreases the likelihood that they will display maladaptive behavior in the classroom. In adolescence, students are developing rapidly and have a growing need to get confirmation that they are able to achieve something. Moreover, they increasingly want to make their own decisions. At the same time, they put great stock in their relationships with others who they are looking to for acceptance, respect, and understanding. Families who do not sufficiently meet these basic needs of their children could therefore be more confronted with maladaptive behavior as families who take these needs more into account.

Statement of the Problem

Nowadays, there has been a high increase in the incidence of students' involvement in maladaptive behaviour especially among the senior secondary school students. The majority of such behavioural manifestations are more pronounced among the secondary school students and some young adults in such a manner that everyone finds it disturbing and worrisome. Most secondary school students these days usually regard the advice from their teachers and elderly ones as that of the "old school". They would rather want to live their lives the way they feel like without placing much importance on its consequences. As a result of this mind set, many of them are involved in maladaptive behaviour such

as, stealing, rape, cheating in the examination, class cutting and many others in the school setting. However, most of maladaptive behaviours and tendencies found among some of the school children in Imo State could be attributed to some risk factors such as individual mind set, family, peer group, school and community factors.

It is worrisome to discover that this maladaptive behaviour emanated from unchecked behavioural deficiency patterns. As a result of the unchecked ugly development, there is increase in moral decadence among our students who may later make life difficult in their community. It then means that if this kind of life pattern is not checked, there would be high level of negative or maladaptive behaviours.

It is also not enough to say that the above risk factors are the only predisposing factors to maladaptive behaviour, but they also run the risk of encountering other factors indirectly related such as behaviour disorders and substance abuse (Becroft, 2009). Anxiety, mood, substance dependency, sexual and personality disorders are some of the disorders that can control him/her, making him/her a negative threat to the society and themselves (Becroft, 2009). Other contributing factors that are associated with the students` proneness to maladaptive behaviour include the urge for self-identity and independence (Latessa & Lowenkamp, 2005).

Therefore, this study focuses on using parenting styles which include cognitive restructuring and Self-control therapy, and family status as a panacea to address issues of proneness to maladaptive behaviour among secondary school students in Imo State, Nigeria.

Purpose of the Study

The purpose of the study is to investigate the effect of parenting styles and family status on proneness to maladaptive behaviour of secondary school students in Imo State. Specifically, this study is designed to:

1. assess the difference in proneness to maladaptive behaviour among participants based on family status.
2. determine if there is any parenting styles difference in the participants` post-test scores on the three experimental conditions.

Research Questions

1. Is there any significant difference in proneness to maladaptive behaviour among participants based on family status?
2. Would differences in parenting styles affect participants` post-test scores in the experimental groups?

Research Hypotheses

1. There is no significant difference in proneness to maladaptive behaviour among participants based on family status.

2. There is no significant parenting styles difference in the participants` post-test scores on the three experimental groups.

Methodology

This study employed quasi - experimental, pre-test, post-test control group design. The quasi-experimental design was used because of its appropriateness since it involves human behaviour and may not permit proper randomization of subjects and control of all variables. The descriptive survey was used to collect the baseline data on participants for qualification to participate in the training phase of the study. The target population for this study comprised all Senior Secondary School Two (SS2) students in the six Educational Zones in Imo State. The sample for this study was 120 Senior Secondary School Two (SS2) students consisting of 58 male and 62 female randomly drawn from three schools in Imo State, Nigeria. The procedure adopted by the researcher in the selection of the sample is as follows. Simple random sampling technique was used to select One Educational Zone out of six Educational Zones in Imo state. The names of all secondary schools in the selected educational Zone were written in pieces of paper and through simple random sampling, one school from each of three Local Government Areas in the Educational Zone II selected, two arms of a class in each school were selected bringing the total to six arms. A total number of 180 students were randomly selected. The selected students in the selected classes were subjected to baseline assessment using Hare`s Psychopathy Checklist-Revised Scale. Those who scored 30 and above out of a total of 40 marks, served as participants in the study. In all, 120 students who met the baseline assessment were selected as participants in the study. The selected schools were tagged schools A, B, and C for confidentiality. Three instruments were used to obtain relevant data for the study. All the instruments were adapted by the researcher. The instruments were adapted by rewording some items that do not suit the level of understanding of the participants. The psychometric properties of the instruments were re-established to ensure that their properties are acceptable for the study. Having got the instruments, their content validity were determined by the researcher`s supervisors and other experts in the field of Measurement and Evaluation. Using test-re-test reliability, the stability of the instruments during pilot study made the instrument appropriate for the study. They were used to collect data for the study. They are as follows: Levenson Self-Report Psychopathy Scale (LSRPS), Parenting Style Questionnaire (PSQ) and Hare Psychopathy Checklist-Revised Scale (PCL-RS). A pilot study was carried out in three schools which were not part of the main study but from same Zone in Imo State, Nigeria. Using simple random sampling technique, 30 students were selected to participate in the pilot study comprising 10 participants per school. The purpose of the pilot study was to carry out a mini study to make a tryout of the training conditions before the main study and to determine the psychometric properties of the instruments such as reliability and validity. To measure the reliability of the instruments, the instruments were administered to the 30 students randomly selected among SS2 students from the selected schools. The three instruments were administered to 30 students, after two weeks, it was re-administered to the same set of students. The results of the two tests were collated. Pearson Product Moment Correlation statistics was used to estimate the test-retest reliability coefficient of the instruments. The estimated values for the instruments are presented in Table 1.

Table 1: Estimated Value for Research instruments (Test-retest reliability, N=30)

Instruments	Instruments	No of Items	No of participants	Test	Mean	Sd	Rtt
Levenson Psychopathy Scale	Self-Report LSRPS	26	30	1 ST	50.66	1.98	0.89
				2 ND	50.76	2.45	
Parenting Styles Questionnaire	PSQ	17	30	1 ST	47.20	6.02	0.79
				2 ND	39.30	6.93	
Hare Psychopathy Revised Sc.	Checklist- PCL-RS	20	30	1 ST	49.64	4.07	0.81
			30	2 ND	43.24	3.76	

Evidence from the table, shows that the test-retest reliability indices of Proneness To Maladaptive Behaviour gives 0.89, Parenting Styles Instrument gives 0.79. Hare Psychopathy Checklist-Revised Scale instrument gives 0.81 which measures the level maladaptive behaviour as a baseline for the study. The values were proved to be high; therefore, they were suitable and reliable to be used for the study. The treatment package for the **Cognitive Restructuring** went through six sessions. In session one, the researcher established rapport with the participants through self-introduction of members using going round technique. The goals and objectives of the therapy as well as the rules guiding participants were made known to the participants. Group discussion centered on creating awareness of factors that underlie students` proneness to maladaptive behaviour were looked into such as; individual characteristics, family factors, school and association with peers. Session Three was devoted to strategies to changing participants` mode of thinking from illogical way to logical irrespective of the circumstances surrounding that particular individual at that particular time. At this stage, the participants were exposed to the principle of A-B-C-D-E-F of Albert Ellis in the concept of Rational Emotive Therapy as to mediate in their ways of thinking from illogical view to logical views respectively. Session four was used to engage the participants in many methods used in Cognitive Restructuring Therapy. In session five, the participants were exposed to the training through the four basic steps that are involved in cognitive restructuring therapy. Those steps are as follows: Identification of problematic cognitions known as “automatic thoughts” (ATs) which are dysfunctional or negative views of self, world and future; Identification of the cognitive distortions in the automatic thoughts; Rational disputations of ATs with the Socratic Method and Development of a rational rebuttal to the ATs. In session six, there was a review of all previous sessions and participants were able to appreciate the training received and how to transfer the acquired skills to actual ability to avoid issues of proneness to maladaptive behaviour through the therapeutic intervention received.

Self-Control Therapy (SCT). This therapy was developed to help participants acquire the ability to control one’s emotions and behaviour in the face of temptations and impulses. It is a cognitive process that is necessary for regulating one’s behaviour in order to achieve expected goals. The participants were exposed to six training sessions using this therapy in the study. In **Session One**, the

researcher established rapport with the participants through self- introduction of the members using the going round technique. The researcher explained the objectives of the counselling programme, its procedure, duration and roles of the participants; with emphasis on self-control. **Session Two.** The researcher took the participants through the counteractive principle. This has to do with the ability to work on one's desire. The researcher made the participants to appreciate the fact that, when one is presented with a dilemma, one should lessen the significance of the instant rewards while momentarily increasing the importance of the overall values. The researcher encouraged the participants to appreciate the fact that when challenges come, one should be steadfast in overcoming it gradually rather than looking for a short corner which might be tempting and lacks long term rewards and values. **Session Three,** the researcher introduced the participants to the knowledge of changing stimulus. He encouraged them to be conscious that; manipulating the occasion for behaviour may change behaviour as well. This goes by removing distractions that induce it. They are made to identify techniques of self-control through the knowledge of changing stimulus. In **Session Four,** the researcher held extreme view on operant conditioning. The researcher explained further that operant conditioning is sometimes referred to as Skinnerian conditioning which is the process of strengthening behaviour by reinforcing it or weakening it by punishing it. Similarly, a behaviour that is altered by its consequences is known as operant behaviour. The researcher also exposed the participants to the adopted multiple components of operant conditioning such as; positive reinforcers. Various questions and answers were entertained at this session. **Session Five,** here the researcher devotes this session to deprivation and satiation. He explained further that deprivation is the time in which an individual does not receive a reinforcer, while satiation occurs when an individual has received a reinforcer to such a degree that it will temporarily have no reinforcing power over them. If one deprives himself or herself of a stimulus, the value of that reinforcement increases. He further explained that, one may manipulate one's own behaviour by affecting states of deprivation or satiation and many others. In Session six, there was a review of all previous sessions and participants were able to regain perspective about challenging situations at hand.

Control Group. The participants in the control group did not receive any treatment. However, the participants in the control group completed the pre-test and post-test assessment measures. At the end, of the study, the participants in the control group were invited to participate in Self-Control Therapy. This gave them the opportunity to also benefit from the intervention programme in this study.

The data collected from various instruments were analysed using both descriptive and inferential statistics suitable for each hypothesis. The means and standard deviations for pre and post-tests assessment measures were computed while 3x2 Analysis of Covariance (ANCOVA) was used to test the hypotheses. All hypotheses were tested at 0.05 level of significance.

Results

Hypothesis One: Hypothesis one stated that, there is no significant difference in proneness to maladaptive behaviour among participants based on family status. The hypothesis was tested using

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Analysis of Covariance (ANCOVA) and the result of the analysis is presented in tables 2 and 3 below.

Table 2: Descriptive Data on Differences in Proneness to Maladaptive Behaviour based on Family Status.

Experimental Group	Family Status	N	Pre-test		Post-test		Mean difference
			Mean	Sd	Mean	Sd	
Cognitive Restructuring	Parents not living together	3	87.00	16.46	70.67	10.07	16.33
	Parents Divorced	0	00.00	0.00	0.00	-	-
	Parents living together happily	30	75.53	8.90	67.37	10.22	8.16
	Parents live together but quarrel often	4	87.00	9.63	70.50	13.08	16.50
	Parents live in different places	3	80.00	8.89	73.33	6.11	6.67
	Total	40	77.88	10.18	68.38	10.08	9.50
Self-Control	Parents not living together	2	84.00	9.90	77.00	2.83	7.00
	Parents Divorced	1	87.00	0.00	74.00	0.00	13.00
	Parents living together happily	29	83.83	7.71	70.55	10.77	13.28
	Parents live together but quarrel often	6	81.33	11.15	73.33	15.29	8.00
	Parents live in different places	2	87.50	12.02	75.00	0.00	12.50
	Total	40	83.73	8.17	71.60	10.81	12.13
Control	Parents not living together	5	84.00	11.02	79.20	6.06	4.80
	Parents Divorced	3	75.00	4.58	86.67	6.66	-11.67
	Parents living together happily	28	76.29	10.24	76.64	10.86	-0.35
	Parents live together but quarrel often	0	-	-	00.00	0.00	0.00
	Parents live in different places	4	80.00	11.28	76.00	5.72	4.00
	Total	40	77.53	10.17	77.65	9.89	-0.12
Total	Parents not living together	10	84.90	11.28	76.20	7.42	8.70
	Parents Divorced	4	78.00	7.07	83.50	8.35	-5.50
	Parents living together happily	87	78.54	9.66	71.41	11.17	7.13
	Parents live together but quarrel often	10	83.60	10.42	72.20	13.75	11.40
	Parents live in different places	9	81.67	9.82	74.89	4.81	6.78
	Total	120	79.71	9.89	72.54	10.89	7.17

Table 3: 3x2 Analysis of Covariance (ANCOVA) on Influence of experimental conditions and Family Status on Proneness to maladaptive Behavior.

Source of Variation	Sum of Square	Df	Mean Square	F-Cal	Significance of F
Corrected Model	3857.76	13	296.75	3.07	*
Main Effects	3605.13	7	515.02	5.33	*
Experimental Conditions	1719.98	2	859.99	8.90	*
Family Status	292.92	4	73.23	0.76	n.s
Covariate	1390.68	1	1390.68	14.38	*
Residual	10248.03	106	96.68		
Total	14105.79	119	118.54		

* Significant at 0.05, df = 2 and 106; critical F = 3.05, n.s. = not significant.

As shown in Table 3 the calculated F-value of 0.76 is less than the critical F-value of 3.51 given 4 and 106 degrees of freedom at 0.05 level of significance. Consequently, the null hypothesis one was accepted. This implies that the participants did not differ in proneness to maladaptive behaviour based on family status.

Hypothesis Two: There is no significant parenting difference in the participants` post-test scores on the three experimental groups.

To test the hypothesis, 3x2 Analysis of Covariance (ANCOVA) statistic was used and the result of the analysis is presented in tables 4 and 5.

Table 4: Descriptive Data on Differences in parenting styles Based on the experimental conditions and gender.

Variable				Pre-test		Post-test		Mean Difference
Experimental Group	Gender	N	MEAN	SD	MEAN	SD		
Cognitive Restructuring	Male	19	44.65	6.77	37.20	5.02	7.45	
	Female	21	41.50	7.76	38.30	5.93	3.20	
	Total	40	43.08	7.36	37.75	5.45	5.33	
Self-Control	Male	20	37.00	6.80	39.20	5.02	-2.20	
	Female	20	36.40	4.19	41.55	4.77	-5.15	
	Total	40	36.70	5.58	40.38	4.98	-3.68	
Control	Male	19	41.95	6.33	40.15	4.78	1.80	
	Female	21	39.10	6.35	41.05	4.62	-1.95	
	Total	40	40.53	6.42	40.60	4.66	-0.07	
Total	Male	58	41.20	7.26	38.85	5.01	2.35	
	Female	62	39.00	6.51	40.30	5.25	-1.30	
	Total	120	40.10	7.00	39.58	5.17	0.52	

Table 5: 3x2 Analysis of Covariance (ANCOVA) on Influence of experimental conditions on parenting styles.

Source of Variation	Sum of Squares	df	Mean of square	F-cal	Sig of F.
Corrected Model	277.55	6	46.26	1.80	n.s
Main Effects	264.60	4	65.15	2.58	n.s
Experimental Group/parenting styles	177.76	2	88.88	3.47	*
Gender	59.04	1	59.04	2.30	n.s
Covariate	0.67	1	0.67	0.03	n.s
Experimental Group/Gender	12.96	2	6.48	0.25	n.s
Residual	2897.77	113	25.64		
Total	3175.325	119	26.68		

* Significant at 0.05; df = 2 and 113; critical F = 3.47, * = significant

Table 5 shows that, the calculated F-value of 3.47 is significant since it is greater than the critical F-value of 3.05 given 2 and 113 degrees of freedom at 0.05 level of significance. Consequently, the null hypothesis four was rejected which implies that those counselling interventions the participants were exposed to significantly affected them positively. Based on the significant F-value obtained, further analysis of data was carried out using Fisher’s protected t-test (post-hoc) to carry out a pair-wise comparison of the group means to determine which group differed from the other on parental influence and the trend of the difference. The result of the analysis as presented below in Table 6.

Table 6: Pair-Wise Comparison of Mean Differences in Counselling Intervention and Participants` post-test scores on Parental Influence.

Experimental groups	Cognitive Restructuring n = 40	Self-control n = 40	Control n = 40
Cognitive Restructuring	37.75 a	-2.37	-2.57 *
Self-control	-2.63	40.38*	-0.20
Control	-2.85	-0.22 ^a	40.60 _a

a = Group means are in the diagonal; difference in group means are below the diagonal while protected t-test are above the diagonals.

* Significant at 0.05; df = 78; t - critical = 2.00.

From the table 6, it could be observed that the mean of participants exposed to cognitive restructuring was not significant when compared to those exposed to self-control treatment (t = -2.37; df = 78; critical t = 2.00; P < 0.05). On the other hand, participants exposed to cognitive restructuring significantly recorded less mean in parental influence than the control group (t = -2.57; df = 78; critical t = 2.00) P < 0.05). Similarly, participants exposed to self-control treatment manifested less mean in parental influence than the control group.

Discussion of Findings

The finding on hypothesis one which stated that there is no significant difference in proneness to maladaptive behaviour among participants based on family status, showed that teenagers who were exposed to self-control therapy had the highest level of mean-difference when compared with those exposed to cognitive restructuring; those in the control group had the lowest mean difference. The result also indicates that there is no significant difference in proneness to maladaptive behaviour among participants based on their family status. This indicates that, family status has no significant contribution in proneness to maladaptive behaviour.

This finding goes further to contradict what Inman, Howard, Beaumont & Waker, (2007) contended by saying that dysfunction homes typified by divorce or death of parents may predispose adolescents prone to participation in maladaptive behaviour. This made it quite imperative for some adolescents to succeed in life whether their parents are dead, divorced or separated. This is why the experimental conditions did not have any significant effect on the participants due to family status. This implies that, the experimental conditions did not significantly influenced the level of proneness to maladaptive behaviour based on family status.

The finding in hypothesis two which stated that there is no significant difference in the post-test scores in parenting styles among participants in the three experimental groups, showed that participants who are exposed to cognitive restructuring had the highest mean difference, and followed by those exposed to self-control while the control group had the lowest. Further analysis was made to determine whether significant difference in parenting styles exists due to experimental conditions on proneness to maladaptive behaviour.

The result shows that participants exposed to cognitive restructuring were not significant when compared to those exposed to self-control therapy. Participants exposed to cognitive restructuring significantly recorded less mean in parental influence than the control group.

These findings support that of Inman, Howard, Beaumont, and Waker, (2007) who stated that dysfunction homes typified by divorce or death of parents may predispose adolescents into behaving maladaptively.

This finding also supports that of Okpako (2004) who noted that a child well brought up will remain a source of joy and happiness for such family. The neglected adolescent gradually becomes a drug addict, hardened maladaptive person, aggressive, restive, arm robber, cultist, rapist and others.

Conclusion

From the discussion of the findings based on the data collected, the following conclusions are made: Maladaptive behaviour are exhibited among secondary school students. The study demonstrated that there was significant effect of experimental conditions on proneness to maladaptive behaviour among the secondary schools' students. The study established that secondary school students' proneness to

maladaptive behaviour is independent to their, family status. Finally, parenting styles can significantly affect the proneness to maladaptive behaviour of secondary school students.

Recommendations

Based on the findings of this study, the following recommendations are made:

- It is recommended that parents should bring their teenagers much closer to themselves so that they would not be exposed to their peers who may negatively influence them.
- School Counsellors and Community agencies should encourage the formation of counselling programmes designed to mitigate the unintended and negative outcomes of maladaptive behaviour to avoid the collapse of this important group of our generation and human society at large.

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