FAMILY RELATIONSHIP, SELF-ESTEEM, AND GENDER AS FACTORS IN SOCIAL MALADJUSTMENT OF IMO STATE UNIVERSITY STUDENTS

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Abstract

The study investigated the influence of family relationship, self-esteem, and gender on social maladjustment of Imo State University students. Three hypotheses were postulated to guide the study. Three hundred students were selected through a convenience sampling technique from Imo State University, Owerri. Their ages ranged from 16-25 years with a mean age of 18 years. The participants were administered the Index of Family Relations developed by Hudson (1982), and the Index of Self-Esteem developed by Hudson (1982). and the Social Maladjustment Scale developed by Wiggins (1966). A cross-sectional survey design was adopted, and chi-square statistics were used for data analysis. Results revealed that family relations are a significant determinant of social maladjustment among undergraduates of Imo State University. Self-esteem is a significant determinant of social maladjustment among undergraduates of Imo State University. Also, gender is not a significant determinant of social maladjustment among undergraduates of Imo State University. Recommendations' and suggestions were made based on the implications of the findings.

Keywords: *Family Relationship, Self-Esteem, Social Maladjustment, Undergraduate Students, Gender Differences*

Introduction

Family plays a fundamental role in shaping an individual's psychological, emotional, and social well-being. The nature of family relationships significantly influences the development of self-esteem, coping mechanisms, and social adjustment in young individuals. A supportive and nurturing family environment fosters positive social adaptation, while dysfunctional family dynamics may contribute to maladjustment, affecting academic performance, peer relationships, and overall mental health (Faizah, 2023). Family is the most basic and important social institution for human beings. The complexity of problems consuming modern families and concerning the phenomenon of social maladjustment is also reflected in the increase in the number of jobs in family history (Agashe & Tiwari, 2016).

The family is a part of social structures. The structure of a family includes not only the number of family members (size), but also the quality of relations within it. Although there may be many differences and typologies of families, they have some common features. For example, families have important functions in society, among which we can distinguish the following: socializing, caring, protecting, supporting, providing a sense of community and providing space for change (Rajan & Rema,2022) On the other hand, the shape and functioning of the family significantly depends on the rest of the social world. The definition of family may change according to someone's life experience; families come in all forms and may look slightly different for each person. Some examples of the different types of family include: a Nuclear family , which is a family unit consisting of two adults and any number of children living together. The children might be biological, step or adopted. An extended family is any family that extends beyond the immediate family, for example, grandparents,

aunts, uncles and cousins. A reconstituted family is a family unit where one or both adults have children from previous relationships. Also known as a step-family. A single-parent family is a family consisting of a parent not living with a partner, who has most or all of the day-to-day responsibilities for raising the children. The children will live with this single parent for the majority or all of the time, but may still have contact with their other parent. A same-sex family is a family consisting of two parents of the same sex or gender identity. A communal family is a group of people who live and bring up children together, but may not be related. They may be living together due to shared beliefs, religions or cultures, or due to benefits such as saving money and sharing care responsibilities.

Adjustment as an important psychological construct can be defined as "an index of integration between need and satisfaction". Adjustment is the process by which a living organism maintains a balance between its needs and the circumstances that influence the satisfaction of these needs. Adjustment is a process of dealing with the tensions, stress, conflicts and meeting the individual's needs. Students come from different backgrounds with their own norms and values, to join a new educational institution, they require moulding their behaviour to fit in the institution (Robinson, 2009). In the process of adjustment, the individual tries to develop and maintain a smooth relationship with their environment. Almost every new student in a university environment goes through an adjustment phase at their own pace of development.

Maladjustment is a term used in psychology to refer to the inability to react successfully and satisfactorily to the demands of one's environment. The term maladjustment, according to Missmer (2021), can refer to a wide range of social, biological and psychological conditions. Maladjustment can be both intrinsic and extrinsic. Intrinsic maladjustment is the disparities between the needs, motivations and evaluations of an individual, with the actual reward gained through experiences. Extrinsic maladjustment, on the other hand, is referred to when an individual's behaviour does not meet the cultural or social expectations of society (Bergman, 2018). The causes of maladjustment can be attributed to a wide variety of factors, including family environment, personal factors, and school-related factors (Shinde,2022). A lack of intervention for maladjusted individuals can cause negative effects later on in life (Shinde,2022). There are different types of maladjustment, namely: university maladjustment, social maladjustment, and marital maladjustment. Socially maladjusted behaviour is a conceptualised conduct problem where learners with maladjusted behaviour choose not to conform to socially acceptable rules and norms. Such learners would ordinarily demonstrate knowledge of school or social norms and expectations and consistently demonstrate a pattern of intentionally choosing to break rules and violate norms of acceptable behaviour. Learners with maladjusted behaviour perceive themselves as "normal", and even though they are capable of behaving appropriately, they choose to break rules and violate norms of acceptable behaviour. They consider rule-breaking as normal and acceptable. Thus, intentionality is the distinguishing feature for socially maladjustment.

Okoye (2023) sees social maladjustment as the inability to develop a satisfying relationship, lack of social finesse and tact, and breakdown in maintaining constructive social relationships. The Social Maladjustment construct encompasses the aspects understood as Antisocial Personality and Antisocial Cognition. The most common behaviours that were considered maladjusted include: stealing, fighting, drug abuse, truancy, homosexuality, lesbianism, bullying, hooliganism, verbal violence, as well as the use of dangerous objects to threaten others, such as knives and sharp broken bottles. Usman (2018) describes the socially maladjusted behaviour of a learner as one motivated by self-gain and strong survival skills. The five main causes of socially maladjusted behaviour of a young adult include: the family's socio-economic status, psychological needs, personal needs, school-related causes, and teacher and peer-related causes.

Social maladjustment is an educational concept. It is the process of antisocial behaviour, beginning with a lack of positive family interaction, leading to school failure and social rejection, then leading to membership in a deviant peer group. Every child faces emotional difficulties from time to time, as do adults. Feelings of sadness or loss and extremes of emotions are part of growing up. Conflicts between parents and children are also inevitable as children struggle from the "terrible twos" through adolescence to develop their own identities. Social maladjustment is conceptualised as a conduct problem, whereby maladjusted students choose not to

conform to socially acceptable rules and norms. Socially maladjusted students demonstrate knowledge of school/social norms and expectations, and consistently demonstrate a pattern of intentionally choosing to break rules and violate norms of acceptable behaviour. Maladjusted youth perceive themselves as "normal." Although these students are capable of behaving appropriately, they choose to break rules and violate norms of acceptable behaviour. Socially maladjusted students view rule-breaking as normal and acceptable. Thus, intentionality is the distinguishing feature between social maladjustment and emotional impairment. Social maladjustment tends to be an educational term which is frequently interchanged with the term conduct disorder in the Diagnostic and Statistical Manual of Mental Disorders, 5th edition.

Social maladjustment is a repetitive and persistent pattern of behavior in which the basic rights of others or major age-appropriate societal norms or rules are violated, as manifested by the presence of three (or more) of the following criteria in the past twelve months, with at least one criteria present in the past six months: 1. aggression to people and animals, 2. destruction of property, 3. deceitfulness or theft, 4. serious violations of rules. The disturbance in behaviour causes clinically significant impairment in social, academic or occupational functioning. Behaviour for the socially maladjusted student is motivated by self-gain and strong survival skills. Most of these students demonstrate a lack of age-appropriate concern for their behaviour and its effects on others. In addition, socially maladjusted youth display behaviour which may be highly valued within a small subgroup, but which may not be within the range of culturally permissible behaviour. Socialised or unsocialized forms of aggression may be a feature of social maladjustment. Anxiety is generally not related to the misbehaviour of socially maladjusted youth, unless it is due to the fear of being caught. The intensity and duration of behaviour demonstrated by socially maladjusted youth differ markedly from the prevailing behaviours typically associated with their peer group.

In a clinical view, social maladjustment includes those disorders that, by their very nature, tend to manifest in an externalised response. These are most commonly referred to as conduct disorders, oppositional disorders or antisocial disorders. Social maladjustment is manifested through actions that demonstrate little remorse for misbehaviour, blaming others for their own problems and may have a concomitant character or personality disorder (Goutam, 2017). In making a differential diagnosis for social maladjustment, clinical criteria may be taken into consideration. Disorders typically viewed as internalising, e.g. affective disorders, elective mutism, separation anxiety disorder, may qualify as Emotional Impairment (EI), whereas disorders viewed as externalising, e.g. conduct disorders, oppositional disorder or antisocial personality disorder, may indicate Social Maladjustment (SM). It is extremely important, however, when making a differential diagnosis to remember that the external behaviour may look the same, but the underlying reason, aetiology and intent of the behaviour may be very different.

Shaffer (2017) noted that socially maladjusted students display these behaviours: seen as unwilling to comply; generally low achievement; excessive absences; reject help, callous disregard for the rights/needs of others. They tend to dislike school except as a place for social contacts, rebel against rules and structure, choose to go truant, tend to dislike school except as a place for social contacts; frequently truant; rebel against rules and structures; frequently avoid school achievement, even in areas of competence.

Peer group-related causes: in school and around the neighbourhood, children tend to make friends among their peers; unhealthy and poor peer relationships may predispose the child to social maladjustment. The issue of social maladjustment is often defined in the context of an individual malfunctioning in society because of character disorders, certain personality traits formed by internal factors or related to developmental conditions and the immediate environment.

One of the settings that is central to the emergence and development of social maladjustment is the family environment. The family influences the child's development in the intellectual, emotional, moral and social dimensions, which is the reason why many studies focus on exploring the relationship between the family and maladjustment. The family relationship is a concept in social maladjustment of youths. Family relationship is a

protective factor that leads to more optimal developmental outcomes, while children with insecure family relationships are more prone to social maladjustment problems (Davies & Coe, 2019).

Hudson (1982) defined family relationships as the connections and dynamics between individuals within a family unit, typically involving parents, children, siblings, grandparents, and other relatives. These relationships can be based on blood ties, marriage, or adoption. It involves the emotional ties, shared experiences, and mutual support that bind family members together. These relationships can include: Parent-child: The relationship between parents and their offspring, often characterised by nurturing, guidance, and responsibility. Sibling: The relationship between brothers and sisters, often marked by sibling rivalry, competition, and shared experiences. Grandparent-grandchild: The relationship between grandparents and their grandchildren, often involving a sense of love, wisdom, and guidance. Spouse-spouse: The relationship between married individuals, typically characterised by love, commitment, and a shared life.

Ezunu and Nwankwo (2022) noted the issue of family conflicts in family relationships. According to Ezunu and Nwankwo (2022) the source of the child's conflict with the family can be differences in aspirations or the involvement of the child in the business of adults. Conflicts can also result from inadequate or incomprehensible demands made on the child. Apart from the conflict itself, the most relevant aspect of this for the child's development is the opportunity to participate in conflict resolution and have a say in the way a conflict is resolved. A positive resolution of conflict gives the child an experience of resolving demanding situations and allows them to prevent conflict in the future. It should be known that badly handled conflict resolution is one of the elements that make up the child's negative psychological development, leading to social maladjustment, which is a risk factor when it comes to family development. Family relationships broaden the development of an individual's mind and provide a strong foundation needed for self-esteem development and cognitive skills enhancement (Oguzie, Obi & Chigbu, 2020). Students are products of a family, and the relative behaviour they exhibit is a reference to the type of family relationship in existence. University age is a period where family relationship undergoes significant transformation. The adolescent child feels comfortable and emotionally connected more to members outside the family, and maladaptive behaviours are usually nurtured with this occurrence (Obiunu, 2015).

Another significant variable of note in this study is self-esteem. Self-esteem is a subjective sense of personal worth, encompassing an individual's opinion, beliefs, abilities, and overall value. Thoughts, relationships, and experiences can significantly impact the overall well-being, including how a person makes decisions, handles challenges, builds relationships and responds to the issues in the environment. Self-esteem may play a critical role in shaping personality, an individual's beliefs about issues in the family, and actions to be taken in particular situations. The goals students pursue in life, how they feel about life events and the way in which they cope with and adapt to a new environment are usually products of self-esteem. Practically, socially maladjusted students manifest maladaptive behaviours such as persistent violation of social norms, truancy, substance abuse and impulsivity (Nwosu & Chinweuba, 2021).

Self-acceptance stems from the realisation that there is no objective basis for determining the value of a human being. So with self-acceptance, the individual affirms who they are without any need for comparisons. With self-acceptance, a person feels satisfied with themselves despite external factors, as this sense of worthiness is not derived from meeting specific standards. Self-acceptance provides a secure and enduring positive relationship with the self (Safdar, Shabir & Khan, 2018). The mention of esteem may bring to mind the fourth level of Maslow's pyramid: esteem needs. While these needs and the concept of self-esteem are certainly related, Maslow's esteem needs are more focused on external measures of esteem, such as respect, status, recognition, accomplishment, and prestige (McLeod, 2017). There is a component of self-esteem within this level of the hierarchy, but Maslow felt that the esteem of others was more important for development and need fulfilment than self-esteem. McLeod (2017) explained that for one to self-actualise and grow, their need for inner-respect and esteem from others must be met. People with high self-esteem are unafraid to show their curiosity, discuss their experiences, ideas, and opportunities. Gender stereotypes, which are generalised beliefs about traits and roles associated with men and women, can negatively impact social maladjustment, particularly for those who

do not conform to traditional expectations. While internalised positive stereotypes can sometimes boost self-esteem, negative stereotypes are more likely to lead to lower self-esteem and potentially affect mental health. According to Nwosu and Chinweuba (2021) gender influences social maladjustment. While both males and females can experience social difficulties, research suggests that gender-specific social expectations and experiences can impact how individuals navigate social situations and the prevalence of certain social maladjustment symptoms. Nwosu and Chinweuba (2021) further reported that men who feel they do not conform to traditional masculine norms may experience stress and struggle with social maladjustment.

Statement of the problem

The issue of social maladjustment among university students has become a growing concern, particularly in the face of increasing academic pressures, economic instability, and shifting family structures. Many students struggle with low self-esteem, anxiety, and difficulty forming healthy social relationships due to adverse family backgrounds (Nworgu, 2015). Dysfunctional family environments characterised by parental neglect, divorce, or abusive relationships have been linked to increased risks of depression, antisocial behaviour, and academic failure (Ogundele, 2020).

Presently, there are high-level economic problems in Nigeria. Students are not exempt from the throngs of hardship being experienced in Nigeria. Walker (2004) states that the best approaches in the management of socially maladjusted behaviour include school-wide behaviour monitoring and behaviour management procedures that emphasise careful monitoring, clear instructions, and reward for desirable behaviour and non-violent negative consequences for behavioural infractions. Critics may claim that these represent consignment of learners to second-class citizenship or that they emphasise vocational skills when they should be focused on academic preparation for higher education. In fact, any schooling different from that of learners headed for college is vulnerable to changes because its expectations were too low. With the current social and economic fragmentation in Nigeria, students are most vulnerable as the fabric that ought to hold them together, which is strong family ties, is devastated by the general hardship. More so, gender differences in social adjustment have been widely debated, with some studies suggesting that female students are more emotionally expressive and likely to seek social support, whereas male students may adopt avoidance or aggressive coping mechanisms (Ozuome, 2020). However, the extent to which these factors interact remains unclear, particularly within the Nigerian university setting.

This research seeks to bridge this knowledge gap by investigating how family relationships, self-esteem, and gender influence social maladjustment among students at Imo State University. By identifying key risk factors, the study aims to inform policies and interventions that promote emotional resilience and academic success among young adults. The study will also address the lack of current literature in this area of study.

Purpose of the Study

The general aim of this study is to examine the influence of family relationships, self-esteem and gender on social maladjustment among students at Imo State University. Specifically, the study seeks to:

1. Assess the impact of family relationship on social maladjustment of Imo State University undergraduates.
2. Examine the impact of self-esteem on social maladjustment of Imo State University undergraduates.
3. Investigate gender differences in social maladjustment of Imo State University undergraduates.

Literature Review

Empirical Review

Several studies have examined the relationship between family relations, self-esteem, gender, and social maladjustment.

Family Relationships and Social Maladjustment

Edeh (2019) explored the connection between family bonds and adolescent behaviours. The study used a descriptive correlation design and was conducted across various inpatient units at Kafrelsheikh Governorate General Hospital. A purposive sample of 203 staff families and 81 extended families from the same setting participated. Data collection involved two tools: the family relation scale and the social misbehaviour scale. The findings were analysed at a 5% significance level. Qualitative data were described using counts and percentages, while quantitative data were summarised with measures such as range, mean, standard deviation, and Pearson's correlation coefficient. The results indicated a positive association between strong family bonds and better adolescent behaviour. The study concluded that there is a significant relationship between the quality of family relations and perceived misbehaviour tendencies (p=0.044), particularly highlighting the roles of economic matters and innovation within family dynamics.

Kelloway (2023) investigated societal awareness of family cohesion issues and social behaviour, especially within the ongoing structural economic challenges in parts of Europe. This has led to a great deal of research examining the occupational predictors and outcomes of social and economic maladjustment. The consequences of social maladjustment can be significant to society, whereas providing family relationship resources may offer a competitive advantage. This study provides a review of the definitions of social maladjustment, the costs of it to society as a whole, and the role of social cohesion in promoting positive mental health, preventing mental illness, intervening to address mental ill health, and accommodating family members experiencing social challenges.

Sasikumar (2018) investigated the relation between family unity and strength and social indiscipline among students of Tehran University. The information gathering method was correlational, descriptive, and in terms of the objective, it was practical. The statistical population consisted of 345 students in Tehran's education system. The data collection tools were two standard questionnaires: Goldberg and Hiller social indiscipline questionnaire with a reliability coefficient of 0.85, and the Gregory Sipeti family unity Questionnaire with a reliability coefficient of 0.86. Collected data analysed by SPSS-22 statistical software using K-S and multiple regressions. The results showed that there is a meaningful relationship between the family unity of students in Tehran and social discipline, which accounts for 65.7% of the changes in Tehran. Conclusion: Observing the principles and techniques of family unity, to increase social discipline, can be realised through educational programs.

Self-Esteem and Social Maladjustment

A study conducted by Emeji (2018) and published in the Journal of Adolescence explored the link between low self-esteem and social maladjustment in high school students Awka. The study examined how adolescents with lower self-esteem tended to exhibit more significant social difficulties, such as peer rejection, bullying, and conflict with authority figures. It involved 250 adolescents conveniently selected in Anambra State, Nigeria. The study was conducted using a cross-sectional survey design. The result indicated that higher self-esteem was positively associated with social adjustment and positive interpersonal outcomes. In contrast, in non-Western cultures, moderate self-esteem was more highly valued, with both excessively high and low self-esteem correlating with social maladjustment. This finding suggests cultural differences in how self-esteem is cultivated and its impact on social functioning.

Iwanski (2023) examined self-esteem and social adjustment conditions in relation to adolescents' mental health. A cross-sectional quantitative research design was adopted, using a self-administered questionnaire. A convenience sampling technique was used. Data were collected from a sample of 310 adolescents living in South Africa in the Eastern Cape province. Findings: the study found self-esteem to have a direct and positive association with social adjustment. Also, self-efficacy mediated the relationship between social indecency and misdemeanour behaviours. Recommendation: There is a need for the promotion of social skills for self-esteem development through psychological intervention in supporting adolescent wellbeing.

Yu (2022) explored whether self-esteem is related to mental health and well–being of secondary schools in China, and what role do families play in the relationship between adolescents and social inclusion, with evidence from urban schools in China. The study surveyed a sample of 281 adolescents from 35 schools in Zhejiang province in China, who agreed to participate in the study. A wide range of options, regarding their perception of self-esteem, mental health and well-being, were examined. Regression analyses and correlation analyses were used to test the hypotheses. The research found that self-esteem strategies promoted employees' social adjustment and well-being. At the same time, employees' self-efficacy also moderated the relationship between family unity and mental health and well-being. Therefore, schools, enterprises, and all enterprises should create a relaxed, friendly atmosphere, so that adolescents have the opportunity to express their opinions and find happiness in the environment.

Gender and Social Maladjustment

In a cross-sectional study conducted by Isah (2023) on whether life satisfaction and social maladjustment predict suicidal thoughts. It involved 100 Nigerian university students in Kaduna, Nigeria. The students were selected through a random sampling technique. The result showed that neither social maladjustment nor life satisfaction significantly predicted suicidal ideation, neither alone nor combined in gender. In a related study by Nielsen (2022) in Uganda, the study examined the ratio of men to women in committing drug-related crimes. The samples of the study were taken from the three major provinces in Uganda. The participants were 200 males and 200 females. The researcher ran a longitudinal analysis of the crime profile for 10 years. It was discovered that males have a higher tendency to commit crimes than females. The study observed that this is usually the reason why males are searched and harassed more in Uganda than females.

Hypotheses

Based on the literature, this study proposes the following hypotheses:

1. There is a significant association between family relations and social maladjustment of undergraduates
2. There is a significant association between self-esteem and social maladjustment of undergraduates.
3. There is a significant association between gender and social maladjustment of undergraduates

Method

Participants

The participants for the study comprised three hundred (300) students of Imo State University. The students were sampled from 4 randomly selected faculties in the university, namely the faculty of social sciences, education, management and law. A convenient sampling technique was adopted in selecting the students who were available and who were willing to participate in the study. The participants were made up of 109 males and 191 females. The ages range from 18 years to 25 years, with a mean age of 21.37 (SD 2.03)

Instruments

Three instruments were used for data collection. They are the Index of family relations. Index of Self-esteem and Social Maladjustment Scale.

The Index of Family Relations (IFR), developed by Hudson in 1982, is a widely used 25-item Likert scale designed to assess the severity of interpersonal relationship issues among family members. It measures aspects such as family distress, discord, and the impact of disharmony on individuals within the family unit. Respondents rate each item from 1 to 5, where 1 signifies 'rarely or none of the time" and 5 indicates "most or all of the time.' Higher scores reflect poorer family relationships. The scale boasts a high internal consistency, with Hudson reporting a Cronbach's alpha of .95, and similar reliability coefficients have been obtained in subsequent studies. The IFR includes both direct (positive) and reverse-scored items to ensure balanced assessment. Examples of sample statements include: "The members of my family care about each other," and "My family gets on my nerves." According to Hudson's established norms, a score of 30 or above suggests clinically significant family relationship problems, whereas lower scores denote healthier, more harmonious family interactions. Overall, the IFR is a reliable and insightful tool for understanding family dynamics, supporting both research and clinical assessments.

The Index of Self-Esteem: The Index of Self-Esteem (ISE), was developed by Hudson (1982). It is a 25-item inventory designed to measure self-perceived and self-evaluative components of self-concept. It assesses both positive and negative feelings about the self, making it a one-dimensional measure of self-esteem. The ISE is a widely used tool for assessing self-esteem, particularly in research and clinical settings. Hudson (1982) reported a Cronbach's alpha coefficient of .93 and a two-hour test-retest coefficient of .92, suggesting strong reliability over a short period. Onighaiye (1996) provided the Nigerian reliability index of 0.93 and a coefficient of concurrent validity of .46. The response options are Strongly Agree, Agree, Disagree, and Strongly Disagree. These options allow individuals to express their level of agreement or disagreement with statements about their self-worth and self-perception. Items include: I feel that others get along much better than I do. I feel that I am a beautiful person. A score of 30 or above on the scale indicates clinically significant problems with self-esteem. Below 30: Generally regarded as non-clinical.

Social Maladjustment Scale: The Wiggins Social Maladjustment Scale (SMS) was developed by Wiggins (1966). It is a psychological instrument used to assess an individual's level of social adjustment. It focuses on measuring an individual's perceived difficulties or dissatisfaction with their social interactions and relationships. The scale is part of the broader MMPI (Minnesota Multiphasic Personality Inventory) content scales. SMS is designed to measure those behaviour characteristics which make an individual unable to adjust adequately to social situations because he/she is too self-conscious, introverted and lack necessary social skills. Wiggins (1966) provided the original psychometric properties for American samples, while the properties for Nigerian samples were provided by Adekunle(2002) and Bolaji (2002). The Cronbach alpha internal consistency reliability coefficients reported by Wiggins (1969) are .86 and .84 for males and females, respectively. The reliability coefficients obtained by Bolaji (2002) are 21-day test-retest = .55. split–half = .81. Wiggins (1969) obtained a concurrent validity coefficient of .90 by correlating SMS with the MMPI scale (social introversion). The response options are True/False. Examples of sample options include: I am a good mixer. I do not mind being made fun of. The norm for the scale is standard scores (mean = 50, SD = 10) based on age and gender; percentiles are also frequently used. A T-score above 70 is often considered clinically significant.

Procedure

The researchers obtained an approval letter from the Research Ethics Committee of Imo State University, Owerri. They approached students across various faculties, explaining that the study was purely academic and assuring them of the confidentiality of their responses. A total of 400 questionnaires were distributed. With the assistance of two research assistants, the researchers handed out three questionnaires to willing participants

along with a letter of informed consent. After completing the questionnaires, the students returned them for collection. In total, 382 questionnaires were retrieved; however, 82 were discarded due to incomplete responses, leaving 300 questionnaires for data analysis.

Design and Statistics

The design used for the study was a cross-sectional survey design; this is because a segment of a large population cutting across different demographic factors was sampled. The statistics employed is the chi-square test. The chi-square test was used because it is appropriate for assessing the relationship between categorical variables and determining whether observed frequencies differ significantly from expected frequencies under the assumption of independence.
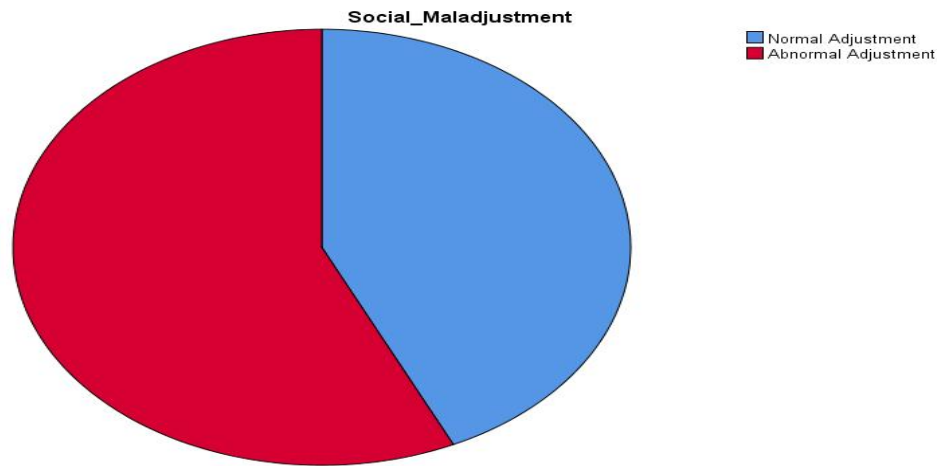
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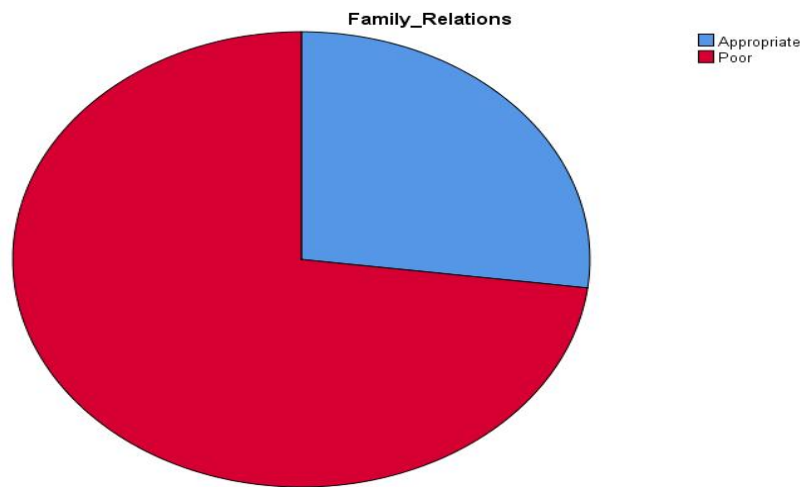
Figure 1: Pie chart representation of Family Relations

Figure 1 above shows that the majority of the participants (73%) had poor family relations, while only 27% had appropriate family relations.
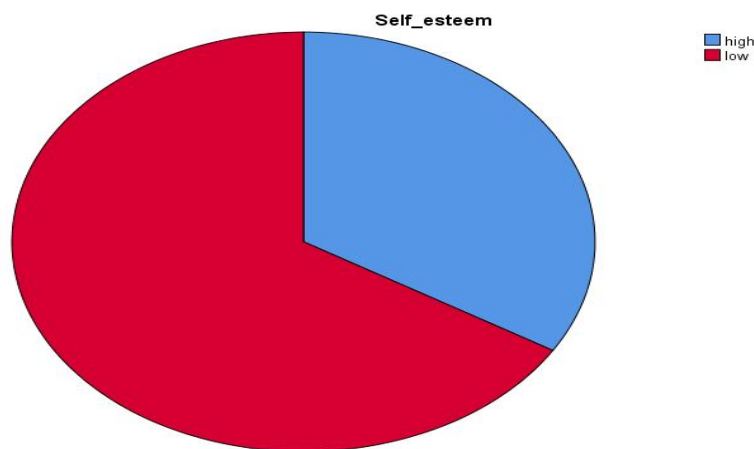
Figure 2: Pie chart representation of Self-esteem

For figure 2, the majority of the participants (66.3%) had low self-esteem, while 33.7% had high self-esteem.

Social_Maladjustment
- Normal Adjustment
- Abnormal Adjustment

Figure 3: Pie chart representation of Social maladjustment

Figure 3 also shows that students who adjusted abnormally are in the majority (57%), while 43% adjusted normally.

Table 1: 2 x 2 Chi-Square Cross Tabulation result showing the Association between Family Relations and Social Maladjustment of Undergraduates

	Appropriate Family Relations	Poor Family Relations	Total	X^2	df	Sig.
Normal Adjustment	74(57.4%)	55(42.6%)	129 (100%)			
				105.87	1	.000
Abnormal Adjustment	7(4.1%)	164(95.9%)	171 (100%)			
Total	**81(27%)**	**219(73%)**	**300(100%)**			

The above table shows the chi-square result that tested hypothesis one, which stated that there is a significant association between family relations and social maladjustment of undergraduates. Based on the result, the hypothesis is upheld [$X^2(1) = 105.87$, P <.01]. From the analysis, the majority of the students (57.4%) who adjusted normally had appropriate family relations. Similarly, the majority of the students (95.9%) with social maladjustment (abnormal adjustment) had poor family relations. This, therefore, implies that a good/appropriate family relation promotes normal social adjustment of undergraduates, while poor family relations foster social maladjustment.

Table 2: 2 x 2 Chi-Square Cross Tabulation result showing the Association between Self-Esteem and Social Maladjustment of Undergraduates

	High Self-esteem	Low Self-esteem	Total	X^2	df	Sig.
Normal Adjustment	75(58.1%)	54(41.9%)	129 (100%)			
				60.70	1	.000
Abnormal Adjustment	26(15.2%)	145(84.8%)	171 (100%)			
Total	**101(33.7%)**	**199(66.3%)**	300(100%)			

Similarly, the second hypothesis, which stated that there is a significant association between self-esteem and social maladjustment of undergraduates, is accepted [$X^2(1)$ = 60.70, P <.01]. The table further revealed that out of the 129 students who adjusted normally, the majority [75(58.1%)] had high self-esteem, while a lesser number [54 (41.9%)] had low self-esteem. For those who adjusted abnormally (that is, those who exhibited social maladjustment), the majority of them [145(84.8%)] had poor self-esteem. Thus, low self-esteem is linked to social maladjustment, whereas high self-esteem promotes normal social adjustment.

Table 3: 2 x 2 Chi-Square Cross Tabulation result showing the Association between Gender and Social Maladjustment of Undergraduates

	Male	Female	Total	X^2	Df	Sig.
Normal Adjustment	53(41.1%)	76(58.9%)	129 (100%)			
				.137	1	.086
Abnormal Adjustment	56(32.7%)	115(67.3%)	171 (100%)			
Total	**109(36.3%)**	**191(63.7%)**	300(100%)			

Contrary to the two findings above, the third hypothesis, which stated that there is a significant association between gender and social maladjustment of undergraduates, is rejected [$X^2(1)$ = .137, P =.086]. The percentage of males who had normal (41.1%) and abnormal (32.7%) adjustments did not differ much. Similarly, the percentage of females who had normal (58.9%) and abnormal (67.3%) social adjustment did not differ much. This implies that gender has no significant association with social maladjustment of undergraduates.

Summary of Results

  i.   Family relations is a significant determinant of social maladjustment among undergraduates of Imo State University
 ii.   Self-esteem is a significant determinant of social maladjustment among undergraduates of Imo State University
iii.   Gender is not a significant determinant of social maladjustment among undergraduates of Imo State University.

Discussion

The study investigated family relationship self-esteem and gender as factors in social maladjustment of undergraduates of Imo State University, Owerri. The research is anchored in both theoretical and empirical frameworks; the findings provide robust evidence that family relationships and self-esteem are significant determinants of social maladjustment of undergraduates of Imo State University, Owerri. The study also revealed that gender is not a significant determinant of social maladjustment behaviour. The result, as presented in Table 1, showed that there is a significant association between family relations and social maladjustment of undergraduates. Table 2 result indicates that low self-esteem is linked to social maladjustment, whereas high self-esteem promotes normal social adjustment.

The first finding clearly indicates a strong association between family relations and social maladjustment of undergraduates. This means that a good/appropriate family relation is instrumental to the normal social adjustment of undergraduates.

This result is consistent with previous studies such as Phang et al (2018). In the study, the researcher found that different parenting styles affect depression levels in adolescents. According to the study, adolescents with less parental contact have a higher risk of suicide and students from single-parent families are twice as likely to be depressed as those from two-parent families. In a related study by Ingram (2020) on the impact of quality family relationships on the development of adolescents in Malaysia. The study selected 350 adolescents from various family relationship settings. The result of the study showed that adolescents from fractured homes found it difficult to adjust to various social demands of the environment.

Every family has its own experience in living its life. Be it experience in social, cultural, economic, or religious relations. Trigger factors in social relations often result from a lack of interaction between family members. The interactions that are formed will foster various attitudes that are not in accordance with what is expected by other family members. This discrepancy will later become a gap and cause problems in the family. The experience of social interactions within the family also determines ways of behaving towards other people in social interactions outside the family, and in society in general.

The result from the second hypothesis indicated that self-esteem is a significant determinant of social maladjustment among undergraduates of Imo State University. Thus, low self-esteem is linked to social maladjustment, whereas high self-esteem promotes normal social adjustment. This result is in line with the studies Oladunmoye (2024) in his work on social support, self-esteem, age, gender and psychological adjustment among young people diagnosed of cancer in Uganda: A mediation-moderation analysis noted that young people who were bruised by the impact of cancer developed low self-esteem which affected their level of interaction in the community and invariably their social adjustment capability. The result indicated that an adolescent with low self-esteem, as confirmed by this research, is likely to have social maladaptive behaviour.

The third hypothesis, which states that there is a significant association between gender and social maladjustment of undergraduates, is rejected. This contradicts the position of Praça (2024), who found that males usually show less self-regulation of emotions and behaviour than females in social maladjustment. This goes to show that both males and females can have social maladjustment depending on the situation.

Implications of the Study

The findings of this study have important implications for university administrators, education policy makers and youth organisations.

Universities should design counselling programs that focus on family-related issues, such as parental conflict, divorce, emotional neglect, or overprotection. Institutions could screen for family-related stress during admissions or orientation to identify at-risk students. Counsellors might consider involving family members in

therapy where appropriate or offering parent-student workshops. University mental health policies should account for the role of family background in student well-being. Institutions should integrate family dynamics into broader wellness programs, promoting a systemic approach rather than treating social maladjustment as purely individual.

Also, efforts should be made at all times to enhance the self-esteem of individuals. Individuals with high self-esteem tend to function effectively in society than individuals with low self-esteem. Therefore, efforts must be made to provide opportunities that improve the self-esteem of undergraduates.

Also, the issue of stereotyping a particular gender in terms of social maladjustment should not be accepted. No gender is more inclined to social maladjustment.

Limitations of the study

The research does not provide information on the causality of the outcomes. This is usually the problem with self-report measures. Participants (especially children or adolescents) may underreport or overreport their experiences with peers or maladjustment due to social desirability or memory issues. A small or non-diverse sample reduces the statistical power and limits generalizability.

Suggestions for further studies

Further research can track how family relationships influence social adjustment over time, especially through key transitional periods (e.g., first year vs. final year). Studies can explore how family relations interact with socioeconomic status, peer relationships, or academic pressure in affecting social adjustment.

The study should be extended to involve more faculty and undergraduate students to make it more representative. Longitudinal studies are recommended in order to properly determine the cause-and-effect relationship on social maladjustment.

Conclusion

The study explored the family relationship, self-esteem, and gender as factors in social maladjustment of undergraduates of Imo State University. The results revealed that family relations are a significant determinant of social maladjustment. The result further showed that Self-esteem is a significant determinant of social maladjustment. Also, gender is not a significant determinant of social maladjustment. These findings have far-reaching implications for university administrators, policy makers and youth organisations in their policy formulation and development of operational guidelines. Providing opportunities that enhance family bonds and the creation of training in building self-esteem will help to reduce issues of social maladjustment in society.

Recommendations

It is essential to increase awareness among families regarding the impact of their interactions and support systems on their children's adjustment to university life. Implementing programs that promote healthy communication between students and their families, particularly during school breaks or periods of crisis, can be beneficial. Additionally, establishing peer support groups and mentorship programs can serve as buffers against the negative effects of poor familial relationships by providing emotional and social reinforcement. Campus organisations and clubs should cultivate inclusive environments that foster a sense of belonging, especially for students from unstable or unsupportive family backgrounds.

Strengthening family bonds to ensure secure attachments is crucial in reducing social maladjustment among students. Efforts should also focus on enhancing self-esteem in undergraduates through the integration of psychology courses and educational initiatives aimed at improving self-perception. Furthermore, gender

equality initiatives must be supported to enable all students to realise their full potential, with a clear stance against the perpetuation of stereotypes in any form.

References

Agashe, C. D., & Tiwari, P. K. (2016). Self-concept of secondary student athletes and non-athletes with physical disability: A comparative study. *Indian Streams Research Journal, 6*(5).

Bahrami, A. M. (2013). The relationship between organizational climate and psychological well-being of hospital employees. *World Journal of Medical Sciences, 9*(1), 61–67.

Bem, S. L. (1981). Gender schema theory: A cognitive account of sex typing. *Psychological Review, 88*(4), 354–364.

Bergman, M. M. (2018). The century of migration and the contribution of mixed methods research. *Journal of Mixed Methods Research, 12*(4), 371–373.

Bowlby, J. (1969). *Attachment and loss: Vol. 1. Attachment*. Basic Books.

Bronkhorst, B. (2014). Organizational climate and employee mental health outcomes: A systematic review of studies in health care organizations. Paper presented at the IRSPM Conference, Prague, Czech Republic.

Cameron, J. J., & Stinson, D. A. (2019). Gender (mis)measurement: Guidelines for respecting gender diversity in psychological research. *Social and Personality Psychology Compass, 13*(11), Article e12506.

Cooke, D. J. (2019). An examination of Psychopathy Checklist–Revised latent factor structure via exploratory structural equation modeling. *Psychological Assessment, 31*(5), 581–591.

Deci, E. L., & Ryan, R. M. (1985). *Intrinsic motivation and self-determination in human behavior*. Springer Science & Business Media.

Davies, P. T., & Coe, J. L. (2019). Family relationship dynamics: A developmental perspective. In B. H. Fiese, M. Celano, K. Deater-Deckard, E. N. Jouriles, & M. A. Whisman (Eds.), *APA handbook of contemporary family psychology: Foundations, methods, and contemporary issues across the lifespan* (pp. 165–185). American Psychological Association.

Edeh, F. G. (2019). Causes of low self-esteem and poor academic achievement among secondary school students in Orumba South local government area of Anambra State (Unpublished undergraduate project). Nnamdi Azikiwe University.

Ezunu, E. N., & Nwankwo, C. A. (2022). Relationship existing between self-concept of students and their social adjustment in Nnamdi Azikiwe University, Awka, Nigeria. *Unizik Journal of Educational Research and Policy Studies, 13*(1), 126–136.

Faizah, S. N. (2023). The role of the family in forming children's social identity: A family sociological perspective.

Farrington, D. P., & Jolliffe, D. (201). Empathy, convictions, and self-reported offending of males and females in the Cambridge Study in Delinquent Development. *Journal of Developmental and Life, 3*, 990–997.

Forsgren, L., & Sillanpää, M. (2020). Social adjustment. *ScienceDirect*. http://www.sciencedirect.com/topics/agricultural-and-biological-sciences/social- adjustment

Ghorbani, N. (2018). Self- compassion, mental health and work ethics: Mediating role of self- compassion in the correlation between work stress and mental health. *World Family Medicine, 16*(1), 113–120. https://doi.org/10.5742/MEWFM.2018.93209

Goutam, P. (2017). *Meaning, aims and process of education*. Government College of Education, Banipur.

Hudson, T. (1982). The effects of induced schemata on the "short circuit" in L2 reading: Non- decoding factors in L2 reading performance. *Language Learning, 32*, 1–33.

Jack, L. (2020). War and its metaphors: News language and the prelude to war in Iraq, 2003. *Journalism Studies, 5*, 179–190.

Jouali, Y. (2024). Strengthening resilience and coping through coaching: The impact of behavioral, cognitive and emotional skills. *Environment and Social Psychology, 9*(8).

Kelloway, E. K., Dimoff, K. J., & Gilbert, S. (2023). Mental health in the workplace. *Annual Review of Organizational Psychology and Organizational Behaviour, 10*, 363–387.

Leary, M. R. (2003). Individual differences in self- esteem: A review and theoretical integration. In M. R. Leary & J. P. Tangney (Eds.), *Handbook of self and identity* (pp. 401–418). Guilford Press.

Manichander, T. (2016). *Evaluation in education*. Laxmi Book Publication.

Mariamma, M. (2020). Relationship between social adjustment and self- concept of secondary students of Kerala, India. *IOSR Journal of Research and Method in Education, 10*(3), 12–15.

Mehboob, S., & Shahzad, S. (2019). International students' social adjustment and self- esteem: Are they interrelated? *Global Regional Review, 4*(1), 186–193.

McLeod, J. (2017). Science and psychotherapy: Developing research- based knowledge that enhances the effectiveness of practice. *Transactional Analysis Journal, 47*(2), 82–101.

Missmer, S. A. (2021). Impact of endometriosis on women's life decisions and goal attainment: Cross- sectional survey of members of an online patient community. *Obstetrics & Gynecology, 116*, 223–236.

Nkwocha, P. C. (2019). *Basics of education measurement and evaluation* (Rev. ed.). Mercy Divine Publishers.

Njoku, J. U., & Akaninwor, A. N. (2019). Parenting styles as correlates of social adjustment among students with physical disabilities in Port Harcourt City Local Government Area of Rivers State. *International Journal of Innovative Psychology & Social Development, 7*(3), 33–41.

Nworgu, B. G. (2015). *Educational research: Basic issues and methodology*. University Trust Publishers.

Nwosu, N. C., & Chinweuba, N. H. (2021). Family climate as correlate of social adjustment among secondary school students in Enugu State. *The Educational Psychologist, 13*(1), 112–122.

Obiunu, J. J. (2015). Relationship between confidentiality and empathy on the openness of clients in a counselling session. *Journal of Counselling and Family Therapy, 3*(1), 6–11.

Ogundele, O. J. (2020). Socioeconomic inequalities in reproductive health care services across Sub- Saharan Africa: A systematic review and meta- analysis. *Sexual & Reproductive Healthcare, 25*, 100536.

Oguzie, E. F., Obi, M., & Chigbu, P. (2020). The roles of counselling education in the rehabilitation of teachers with psychopathic issues in Enugu State, Nigeria. *Asian Journal of Education and Social Studies, 43*, 234–255.

Okoye, R. O. (2023). Issues in educational assessment in Nigeria. *International Journal of Studies in Education, 19*(1), 13–24.

Onighaiye, M. A. (1996). The impact of length of time in the university on ego- identity, self- esteem and stress manifestation in students (Unpublished undergraduate thesis). University of Lagos.

Ozuome, C. C. (2020). Locus of control as a correlate of secondary school students' academic achievement in Imo State, Nigeria. *Journal of Guidance and Counselling Studies, 4*(2), 374–385.

Plaza- González, S. (2022). Psychological and sociocultural determinants in childhood asthma disease: Impact on quality of life. *International Journal of Environmental Research and Public Health, 19*(5), 2652.

Rajan, O., & Rema, M. K. (2022). Influence of perceived parenting style on self-esteem among adolescents. *International Journal of Recent Scientific Research, 13*(4), 932–935.

Safdar, G., Shabir, G., & Khan, A. W. (2018). Media's role in nation building: Social, political, religious and educational perspectives. *Pakistan Journal of Social Sciences, 38*(2), 387–397.

Sasikumar, J. (2018). Emotional intelligence and social adjustment among adolescent students. *American Journal of Social Science Research, 4*(1), 16–21.

Shaffer, F. (2017). An overview of heart rate variability metrics and norms. *Frontiers in Public Health, 5*, Article 258.

Satheeshkumar, P. S. (2024). Impact of mental health on burden of illness, septicemia and mortality among patients hospitalized for cancer. *PLOS Mental Health, 1*(6), e0000005.

Tayal, R., & Prakash, R. (2019). Understanding mental health in relation to organizational climate. *International Journal of Multidisciplinary Research and Development, 6*(9), 80–87.

Usman, V. I. M. (2018). Evaluation of continuous assessment strategies for effective teaching and learning of economics in Nasarawa State University, Keffi- Nigeria. *International Journal of Strategic Research in Education, Technology and Humanities, 5*(1), 48–55.

Wiggins, J. S. (1966). Substantive dimensions of self- report in the MMPI item pool. *Psychological Monographs: General and Applied, 80*(22), 1–42.

Yu, C. (2022). Impact of organizational climate on mental health and well- being at work: Evidence from China. *Forest Chemicals Review, 6*, 408–416.

Zheng, D., Witt, L. A., Waite, E., David, E. M., van Driel, M., & McDonald, D. P. (2015). Effects of ethical leadership on emotional exhaustion in high moral intensity situations. *The Leadership Quarterly, 26*(5), 732–748. https://doi.org/10.1016/j.leaqua.2015.01.006 sciencedirect.com+8tarjomefa.com+8scirp.org+8

Zhang, Y. (2020). The impact of artificial intelligence and blockchain on the accounting profession. *IEEE Access, 8*, 110461–110477.