Chapter One
Introduction

1.1 Background to the Study

Psychosocial adjustment among early adolescents could affect every aspect of their life due to the central role that adjustment plays in goal achievement, mental functioning and wellness. This may be why counselling psychologists adjudged personal and social adjustment to be the goal of life. Psychosocial adjustment could signal the optimal capacity of individuals for sufficient adaptation, adequate response to the demands of the environment, good feelings, social integration and goal achievement. Therefore, for early adolescents, adapting to their biological and physical developmental milestones and pubertal changes is very sacrosanct. The different emotions adolescents experience which may result in heightened emotionality may happen due to the biological workings of hormones for both secondary and primary sexual characteristics of pubescence. Early adolescents equally should be adjusted in terms of being able to respond adequately to the demands of the environment. The micro and macro social environments that early adolescents live in demand response.

Responding to one's environment may be as little as knowing one's role even in that environment. Essentially, adolescence could be a period of identity or role confusion. The home and school as social systems within which early adolescents operate may require that their development be commensurate with response to stimuli in terms of attainment of functional capabilities. Good feeling, happiness, optimism, and subjective wellbeing also indicate personal adjustment. Further, social skills development that foster smooth relationship with family, friends and members of the school translates to social adjustment[1,2]. Overall, the ability to achieve goals among these early adolescents is a great indicator of psychosocial adjustment[1].

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For goal achievement, early adolescents may have goals regarding academic performance in school subjects and achievement of developmental tasks. The nature of early puberty as a delicate period for psychosocial advancement emphasise the significance of moving forward methodologies for recognising youth at hazard of encountering long-term alteration issues[3].

Psychosocial adjustment among early adolescents is crucial as it impinges on their present and even future behaviour. For instance, scholars have highlighted the benefits of psychosocial adjustment in future expectations among early adolescents. Essentially, it is submitted that psycho-social adjustment has an impact in future expectations among early adolescents[4]. Future expectations are an important protective factor for healthy development in adolescence, as thinking about the future motivates everyday behaviour and influences choices, decisions and future activities. These scholars emphasised the need to recognise the adjustment needs of the individual student in the school as it is a crucial aspect of educational outcomes[4].This is because students' psychosocial adjustment has been linked to academic engagement and performance.

Adjustment is so important in students' lives that authors have even studied it among students with special needs in a tertiary institution of learning with a clear relationship with a sense of personal worth and emotional intelligence[5]. It was remarked that all categories of students may have adjustment issues, special needs students included under their peculiar challenges[5]. For early adolescents, their psychosocial adjustment needs may form the basis for developmental milestones in the future. These future developmental milestones could be marriage, family life, workplace, and the society at large. Interestingly, early adolescence psychosocial adjustment may be implicated in ageing in the older adulthood stage of life. Psychosocial adjustment among individuals transiting to the adulthood stage of life may be hampered due to biological, cognitive and psychosocial developmental milestones challenges. For many early adolescents in schools,

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they are even still adjusting to the secondary school system depending on their ages and maturational levels. The striving to contend with developmental tasks can also mount pressures on youngster thereby in disruptive tendencies, the expectation to attain high academic performance may make some early adolescents academically anxious and maladjusted in school. These events can militate against school connectedness and overall adaptation. Worst still may be the lot of early adolescents in these categories if the home front is not supportive and nurturing to assist adolescents navigate these experiences.

Attachment and sense of belonging in the family is observed to support healthy development for all family members especially if the individuals are still growing as in the case of early adolescents. Early socialisation in the family appears to help children grow up being integrated into their environment and make the best of their interactions. This also may have to do with adjustment as early adolescents find meanings and answers regarding how the world operates while knowing their place in the macro and microenvironment. The first social environment for a child is the family and the socialisation in the family continues till adolescence stage and for as long as the individual is at home. Education, training, and nurturing on healthy behaviours, social etiquette, and life skills are given to children by parents and significant others in the family. This is expected to influence their psychosocial adjustment and overall development.

Psychosocial adjustment of contemporary adolescents in Nigeria has been submitted to be poor with varied causative factors[6]. Exposing four major elements of psychological adjustment, the researchers submitted that persistence and change, perception, motivation and emotion have poor levels among Nigeria adolescents who are transiting from childhood into adulthood[6]. During the adolescent age, adjustment is most drastically observed and tend to be related with the stages of development and growth particularly the physiological needs of sexual maturation, the social

needs of interpersonal connections, the cognitive needs of academic advancement and the mental needs of the concept of self[6]. Adolescence seems to be a critical time related to some degree of psychosocial vulnerability or challenges compared to childhood and adulthood.

Psychosocial adjustment is critically important in the lives of early adolescents because, ultimately to counselling psychologists, it is the goal of life. As adjustment is regarded as both an achievement and a process, individuals are expected to meet their needs while still finding balance in the environment. Psychosocial adjustment which describes people's capacity to adapt to the environment, feel great, feel integrated, respond appropriately environmental demands, and accomplish objectives require adequate components[8]. In early adolescence, psychosocial adjustment may majorly connote adaptation and functioning in some of the main areas that charaterise the stage, which are the self, family and school settings. The maturing individual would have to go through building blocks of self-discovery, and eventual self-identity, relate with family and thrive in the school environment with teachers and friends/peers. The journey of self-discovery indeed could take a process, one which may have many trajectories, like the growing self versus the old self, the ideal self versus the real self and the projected self if the individual struggles with social comparison. Psychosocial adjustment issues may come up if problems with the self are not managed, which may culminate into self and body image disturbances. Body image issues may be common among adolescents because one of their developmental tasks is to accept their physique.

Functioning in another main area of family relationships among early adolescents may pose a threat to psychosocial adjustment. School-going youngsters are observed to constantly have trouble getting along with parents and or siblings. Understandably, adolescents have another

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developmental task of attaining emotional autonomy[6]. Nevertheless, they need family bond, cohesion and support in order to be able to successfully navigate the early teen years. Early adolescents need to adapt to some traits that may not be modifiable in the family. Some family identities that are almost indelible, and the fact that they have their family to live and relate with for a long time. These realities are hard to take and adapt to especially among adolescent s who believe that the world should be as they think and feel it should be. This indeed may alter the utopian view of the world by adolescents. There could be issues surrounding parenting such as single parenting, separation, divorce and bereavement. Other issues in the family may be socio-economic problems, some issues could be disabilities, while another problem could revolve around culture. Dealing with various family issues may impinge on normal functioning among adolescents and adversely affect psychosocial adjustment.

For the school setting, psychosocial adjustment may be influenced by dynamics of school life, including peer relationship, making friends, student-teacher relationship, school connectedness, quality of school life, school engagement and school safety[8]. How these early adolescents adapt and function in schools may make or mar their psychosocial adjustment levels. There is an expectation for mature relations with both people of the same sex and people of the opposite sex, with choosing friends in the school during the adolescence period. Early adolescents are also required to get along with the school climate, classroom rules, and overall practices in the school system. They are to function in the area of developing meaningful and healthy relationship with teachers and other adult members of the school as well. Healthy social relationship is a milestone for adolescents generally and it should begin from the early adolescence stage. This is because relationships in later years will consolidate the gains or ruins at the early adolescence stage.

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Thus, early adolescence needs a lot of support from family teachers and significant other to develop social adjustment.

Psychosocial adjustment among early adolescents appears to be beneficial to their education, social functioning, psychological wellbeing and overall wellness. Psychosocial adjustment being the accommodation of life-altering transitions and events is both a process and an achievement with positive outcomes. Observably, adjustment plays a crucial role in the psychological well-being and social competence of emerging adults. The ability to have ideal intra and inter personal relationship while pursuing goal achievement for oneself and others is associated with positive psychosocial adjustment. Additionally, psychosocial adjustment may help in emotional regulation and enhanced social skills which are key ingredients to preventing adjustment disorder symptoms in the face of life stressors. Researchers have outlined that psychosocial adjustment is a protective factor for weight status stability and change from being obese among early adolescents[9]. To some scholars, psychosocial adjustment is an important process for quality of life[10]. Also psychosocial adjustment has been linked to happiness among adolescents[11]. Psychosocial adjustment has been reported to be correlated with academic achievement among secondary school students[12].

Regarding the implications of lack of psychosocial adjustment among early adolescents, it is safe to establish that maladjustment may be inescapable among these group people mainly because they are setting out in life and carrying many roles along even in their development trajectory. As a scholar has referred to early adolescence as a stage adolescent's role is not clearly pictured, thus, confusion is bound to set in, resulting in possible psychosocial maladjustment[13]. With this in mind, early adolescents can become maladjusted and the implications can be catastrophic. Traditionally, adolescence is defined as commencing at the onset of puberty and concluding with

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the assumption of significant social roles"[14]. From the period of adolescence, individuals are no seen as children. They are perceived as emerging adults who should be saddled with responsibilities, albeit, age-appropriate.

Rapid transformations in biological, cognitive, social, and emotional domains during early adolescence render this stage particularly vulnerable to the onset of emotional and behavioural challenges. [15]. The surge of hormones, new sense of self, social perceptions, and forward-increasing physical growth may present undue pressure and expectations. These pressures including impulses toward bullying or victimization, can yield enduring effects, particularly considering that many adult mental health issues have their origins in early adolescence.[16]. There is a paucity of evidence from early adolescents living in low and medium income countries like Nigeria in terms of risk behaviour that could result in psychosocial adjustment vulnerability. Thus, a researcher advocated for evidence on psychosocial development among early adolescents in low and medium income countries since this group of people have heightened vulnerability to psychosocial risks[3]. Furthermore, research should encompass critical developmental transition periods, such as the onset of adolescence and emerging adulthood, which are marked by extensive changes in psychosocial adjustment.[17].

There are claims that parental involvement, sexuality education and learning motivation could influence psychosocial adjustment among early adolescents due to the research reports of how these variables stand as evidence-based causes of psychosocial adjustment. In this study, these independent variables are selected in order for the researcher to establish their contribution to psychosocial adjustment especially among early adolescents who are dependent on their parents, are maturing sexually and are in school with issues on learning effectiveness geared towards academic achievement. The manner in which parents are involved in their children's lives is

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worthy of focus in research so as for the researcher to make infer and make recommendations for parental involvement at the secondary school level. Sexuality education is the primary role of parents although may be taken up in the school as well. The researcher is interested in the possible influence of sexuality education on psychosocial adjustment of early adolescents. Again, learning motivation in of pivotal interest to researchers who are concerned about transiting individuals from childhood to adulthood with possible varied issues with motivation towards learning.

Parental involvement functions as a critical social asset, aiding children in overcoming challenges related to learning and social communication while significantly shaping both their developmental trajectories and adolescents' psychological adjustment.[18,19]. Parental involvement encompasses a range of activities carried out by parents both at home and in school settings to promote their children's academic and social development.[20]. Parental involvement in this study is considered as assistance rendered to children during homework and participating in school activities such as Open Day and Parent-Teachers Association/Forum. Research indicates that parental involvement is associated with enhanced social skills, reduced experiences of loneliness and anxiety, and more positive peer relationships, all of which are instrumental in fostering improved psychological adaptation and facilitating successful transitions in children[21,]. It has also been established that parental involvement aids academic achievement, social emotional skill development, and overall psychological adjustment[22].Since parental involvement is considered influential regarding all aspects of children's lives, it is expected to have visible and tangible effect early adolescents' overall development, including psychosocial adjustment.

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Parental involvement is highly needed for ideal for development in young people as some authors have asserted that parents have an important influence in adolescence[23].Parental trust is positively associated with psychosocial adjustment in early adolescence [24]. Also, research finding suggests that early autonomy around puberty has negative consequences for psychosocial adjustment among people just entering into the adolescence stage of life[24]. According to authors, who found that parenting styles characterised by warmth, such as indulgent and authoritative approaches, were linked to more favourable psychosocial adjustment outcomes compared to the authoritarian and neglectful styles [25]. Parental involvement is a form of positive parenting which has beneficial outcome for positive behaviour among adolescents [25]. Research indicates that both paternal and maternal parenting practices are significantly correlated with every measure of psychosocial adjustment [26]. According to the author, parenting is a critical factor in adolescent development and adjustment, with parental warmth, involvement and communication highly influencing the wellbeing of adolescents[26].

Parental practices have been submitted to influence developmental outcomes including psychosocial adjustment among adolescent children[27]. The authors posited that parental warmth, rather than strictness, may be more effective in safeguarding against psychosocial maladjustment [27]. Involvement of parents in their children's life usually comes with warmth, support and responsiveness to immediate needs. Substantial evidence indicates that parental attributes, such as psychiatric conditions, professional specializations, and distinctive parenting practices, are closely linked to the mental health and broader socio-emotional outcomes of their offspring[28,29,30,31]. It is suggested that parents' psychological and behavioural responses have a significant influence on their children's adjustment in stressful situations. This includes factors such as the parents' overall emotional states, psychopathology, cognitive appraisal, coping

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strategies, and level of support.[32]. Reports on roles of parental involvement in psychosocial adjustment of early adolescents in Nigeria are scarce. This is a gap this study seeks to fill in order for the researcher to make recommendations for parents and early adolescents and also point researchers to professional practice and development.

Understanding sexuality as a concept play a crucial aspect of healthy adolescent development, with positive outcomes for young people. The favourable implications for the lives of early adolescents includes: reducing the risk of sexually transmitted diseases (STDs), ability to make rational, logical and informed decisions, being able to establish meaningful and healthy relationships, ability to develop self-esteem, identity and confidence, knowledge about preventing teenage/unwanted pregnancies, and building a foundation for fulfilling and responsible relationships[33,34]. It is important that adolescents have access to accurate, objective and current information about sexuality to enable them to make informed choices[33,34,35]. Sexuality in this regard goes beyond sexual relation or sexually gratifying activities. For early adolescents, sexuality education may have to include information about their appearance, choice of style, lifestyle practices, the way they want people to perceive them and identification with groups, sects and beliefs.

Sexuality education goes beyond simply imparting knowledge and information regarding reproduction and sexual matters, it encompasses information about favourable self-presentation and health implications[36]. There is therefore, need to tailor the sexuality education to the needs of early adolescents for sake of specificity. It is reported that some secondary school students are ignorant of the differences between sex and gender which are the basic knowledge of sexuality[37]. Sexuality is very important discourse among early adolescents because of its implications for

health and wellness. In particular, during adolescence, unfavourable sexual experiences may result in physical and mental problems both in the present and future times[38]. Sexuality education equips adolescents with various tools conceptual, attitudinal, communicative-participatory, and evaluative, that empower them to make informed and responsible decisions about their sexuality[39]. Promoting and preventing health issues among adolescents is essential for ensuring that they participate in safe and low-risk sexual activities, particularly when no other alternatives are available or in the case of early adolescents who may already be sexually active[36]. Insufficient knowledge about sexuality during adolescence can have serious consequences, resulting in risky sexual behaviours, emotional and psychological difficulties, and long-term effects that may persist into adulthood[40]. Sexuality education is crucial for adolescents, as research has shown that those who recognize its importance tend to exhibit more positive attitudes, enhanced knowledge, and healthier sexual behaviours[41].

Thus, Education on health-related behaviours significantly influences the quality of life in adulthood. Research examining the effects of sexual empowerment on decision-making among adolescent girls revealed that an empowerment-based training program resulted in increased self-control, enhanced preventive behaviours, and improved sexual health, contributing to better overall adjustment[43,44]. Sexuality education has been affirmed as an intervention and social adjustment programme among the youth in the secondary schools in Nigeria[45]. Reports on sexuality education or discussions around sexual activities among young people transiting to adulthood may not fashionable in the recent past. It is hoped that researches in this area are coming up and would gain presence in the Nigerian literature soon enough. Researches in the areas of sexuality education and psychosocial adjustment among early adolescents are scarce and this leaves gaps in literature for practice of counselling and human development. This study

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seeks to fill this gap in literature and make recommendations that will advance the frontiers of knowledge in the thematic area of sexuality education.

Learning motivation is one of the emerging areas of interest to stakeholders. Learning s observed to be less fashionable and distasteful to some learners. Distractions from social media appearsto be the order of the day as many early adolescents are seen to secretly own social media accounts. The drive to learn and achieve may be dwindling as some students have wrong models who constantly tell them that there is no advantage in being educated. The link between learning motivation and psychosocial adjustment has not been well reported in research, but observations and experiences with young people may affirm a motivation for learning, especially among young people. For early adolescents, school is a critical activity for them, and learning effectiveness should be their goal towards overall academic performance. Learning-related motivational processes should be topical among early adolescents in school. This is because the stage of life requires activities to point to intellectualising and cognitive functioning. Learning is an indicator of attainment of the cognitive domain of development in the early adulthood period of life. This is where adolescents are expected to theorise, engage in abstract thinking, hypothesise and develop higher-order cognitive skills.

Motivation, encompassing cognitive, emotional, and behavioural elements, plays a pivotal role in a student's engagement with and commitment to education. It significantly influences learning stimulation and academic achievement [46,47]. This report by scholars points to the fact that motivation is multidimensional, and a process for school life and optimal learning. The emotional and behavioural dimensions of motivation, therefore, can be said to have links with psychosocial adjustment. This is because there are both personal and social dimensions of

adjustment that could be predicated upon the emotional and behavioural component of motivation. For early adolescents, school is a major life event that they are preoccupied with. Thus, any issues with the drive for learning, quest for knowledge, skills and attitudinal change may affect their adjustment both personally and socially. Learning motivation and success from the school activities therefore may be a gauge for their psychosocial adjustment.

Goal achievement which is part of the indicators of adjustment is expressed as a propelling force for motivation. It is therefore safe to say that learning motivation may be a huge influencing factor for psychosocial adjustment among early adolescents in secondary schools. Whatever happens with learning, drive for success in school may impact mental wellness. There is sadly, a paucity of empirical research in the establishing links between learning motivation and psychosocial adjustment as learning cannot be overlooked as a major phenomenon among early adolescents. This major gap in literature need to be filled and this study is stepping in to fill this gap. The presence of links between learning motivation and psychosocial adjustment in hugely needed in literature so that mental health experts and educational psychologists can find the recommendations useful for practice and sustainable human development and overall quality of life.

Motivation which describes the process whereby goal-directed activities are initiated and sustained as in the case of learning. This kind of motivation, learners decide to be engaged with school and their academics, study, attend classes, continue to study and develop a lifestyle of learning and schooling. Learning motivation will be considered in this study in two dimensions, the intrinsic and extrinsic learning motivation. Intrinsic motivation pertains to early adolescents' inner drive and satisfaction for the joy of learning. Extrinsic motivation is regarding early

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adolescents' motive of appearing good to others by maintaining status of a committed learner, getting reward and some form of recognition for learning, For instance, an intrinsically motivated individual views college tasks as enjoyable and fulfilling, even in the face of academic challenges, whereas extrinsic motivation represents the opposite approach. Both intrinsic and extrinsic motivations are predictors of learning outcomes, performance, experiences, and psychological well-being[48].

In this study, biological differences of being either a male or a female could make early adolescents have differing psychosocial adjustment level, as well as sexuality education and learning motivation levels. Sex which is the biological difference of being either a male or a female is used as gender in this study as a moderating variable. This is because among early adolescents there could be some peculiar experiences by virtue of being either a male or a female. Both early adolescent boys and girls may be nurtured and socialized in the same way, however, these youngsters may have differing behavioural manifestations backed up by sex differences. In line with the principles of development, sex difference is on the ways humans are different. Girls for instance may be more expressive in terms of language use, but may have more internalizing behaviours in terms of mental illness. On the other hand, boys may show more strength in digital wellness, sports and confidence but may show less awareness in terms of pubertal experience and biological make-up.

Gender could influence the development and sustenance of psychosocial adjustment in the area of male and female early adolescents contending with the same biological, cognitive, social and emotional developmental milestones, but with different behaviour outcomes. For instance, both male and female early adolescents have the same developmental task of accepting their physique.

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However, it is observed that girls have more problems with body image acceptance and appearance appreciation. This could affect the adjustment of girls and result to psychosocial maladjustment. Gender-differentiating beliefs have been particularly harmful to the psychosocial adjustment of girls and younger adolescents, while the effects on boys' adjustment have shown more variability. Additionally, these gender beliefs are thought to moderate the relationship between perceived typicality and adjustment outcomes[49]. Some researchers reported gender differences in psychosocial adjustment[50]. According to these researchers, boys have higher psychosocial adjustment than girls. The researchers gave probable justification for their finding in the sense that girls have more internalising behaviours than the boys and this could be the reason girls have more psychological maladjustment than boys[50].

Gender could have influence on the way early adolescent boys and girls receive sexuality education. Interest in sexuality education to begin with, may even differ, followed by the way the education is received, internalized and applied in everyday lifestyle. From observation female youngsters are given more se-related education, with even more intensity. The female early adolescents appear to be given fear appealed messages about consequences of illicit sexual experiences, menstruation and ovulation, reproductive and sexual health. The information given to girls on sexuality education observably may be even fictitious, exaggerated or embedded with superstitious beliefs. Gender difference in sexuality education in literature is scare. However, researchers have suggested that gender-specific approaches to family sex education can lead to different impacts on the sexual debut of boys and girls[51]. Other researchers reported that boys receive lower sex-related education than girls, also, girls are given early sexuality education than boys[52].

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Gender differences in learning motivation may have implication for gender-based motivational training and how critical stakeholders help young people with learning readiness and support in the educational system. Regarding reports on gender difference in learning motivation, there appears to be mixed results. Female students tend to exhibit lower levels of extrinsic motivation and higher levels of intrinsic motivation compared to their male counterparts[53,54]. To some researchers, male students have more extrinsic motivation than the female students[55]. Other scholars reported female students being more academically motivated than the male students[56]. In courses that utilise active learning strategies, the motivational response profiles of both women and men tend to be more similar and overall more positive[57]. Based on their findings, the researchers emphasised that educators should take motivations into account across their academic systems to fully harness the benefits of internalized motivation for both male and female students. Similarly, another study found no gender differences in institutional or contextual motivations, such as academic or learning motivation[58]. Additionally, research directly measuring intrinsic versus extrinsic or autonomous versus controlled motivations by gender remains notably limited[57].

Several variables have been pointed out in the literature to have an influence on psychosocial adjustment among early adolescents. Parent roles remain important in children's adjustment for health support and educational attainment[59]. This can also be expressed in sexuality education and extrinsic motivation. This study therefore, explores the influence of variables selected in this study on parental involvement, sexuality education and learning motivation as determinants of psychosocial adjustment among early adolescents in Oyo State, Nigeria

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1.2 Statement of the Problem

Psychosocial adjustment challenges may be inimical to the present and future behaviours of early adolescents. This is because maladjustment issues could be implicated in mental wellness, quality of school life, smooth transition from childhood to adulthood, successful navigating and contending with developmental task, career development challenges and overall life functioning. Early adolescents are expected to develop physically/biologically, cognitively, socially and emotionally in a normal way. This is because the later adolescence period would consolidate on the gains of the preceding years. Thus early adolescents require all the professional help they could get for this critical phase of life for school and societal adaptation.

Challenges with psychosocial adjustment can result to school problems like academic anxiety, lack of academic engagement, poor academic performance, and difficulty in exploration with career paths towards solidifying career choices. Other challenges with lack of psychosocial adjustment could be lack of emotional stability, poor psychological wellbeing, poor social skills, social withdrawal, feeling of inadequacy, disorientation, family problems, poor school connectedness, poor identity and role confusion. The consequences of poor adjustment are complex with implications on self, family, school and societal integration. Unfortunately, there is a dearth of empirical researches in psychosocial adjustment among early adolescents[3]. Other areas as parental involvement, sexuality education and learning motivation also lack empirical evidences in literature in Nigeria. To fill these gaps therefore, this study seeks to investigate parental involvement, sexuality education and learning motivation as determinants of psychosocial adjustment among early adolescents in Oyo State, Nigeria.

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1.3 Aim and Objectives of the Study

This study aims to investigate parental involvement, sexuality education and learning motivation as determinants of psychosocial adjustment among early adolescents in Oyo State, Nigeria. The objectives were to:

i. identify the level of psychosocial adjustment among early adolescents in Oyo State, Nigeria;

ii. assess the level of perceived parental involvement among early adolescents in Oyo State, Nigeria;

iii. ascertain the level of sexuality education among early adolescents in Oyo State, Nigeria;

iv. assess the level of learning motivation among early adolescents in Oyo State, Nigeria

v. determine the significant joint influence of parental involvement, sexuality education and learning motivation on psychosocial adjustment among early adolescents in Oyo State, Nigeria;

vi. examine the significant relative influence of parental involvement, sexuality education and learning motivation on psychosocial adjustment among early adolescents in Oyo State, Nigeria;

vii. determine the significant gender difference in psychosocial adjustment among early adolescents in Oyo State, Nigeria;

viii. examine the significant gender difference in sexuality education among early adolescents in Oyo State, Nigeria; and

ix. determine the significant gender difference in learning motivation among early adolescents in Oyo State, Nigeria.

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1.4 Research Questions

The following research questions guided this study:

1. What is the level of psychosocial adjustment among early adolescents in Oyo State, Nigeria;

2. What is the level of perceived parental involvement among early adolescents in Oyo State, Nigeria;

3. What is the level of sexuality education among early adolescents in Oyo State, Nigeria;

4. What is the level of learning motivation among early adolescents in Oyo State, Nigeria

1.5 Hypotheses

The following null hypotheses were tested in this study at 0.05 level of significance:

$H_0$1: There will be no significant joint influence of parental involvement, sexuality education and learning motivation on psychosocial adjustment among early adolescents in Oyo State, Nigeria;

$H_0$2: There will be no significant relative influence of parental involvement, sexuality education and learning motivation on psychosocial adjustment among early adolescents in Oyo State, Nigeria;

$H_0$3: There will be no significant gender difference in psychosocial adjustment among early adolescents in Oyo State, Nigeria;

$H_0$4: There will be no significant gender difference in sexuality education among early adolescents in Oyo State, Nigeria; and

$H_0$5: There will be no significant gender difference in learning motivation among early adolescents in Oyo State, Nigeria.

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1.6 Significance of the Study

This study would be beneficial to the following stakeholders:

Early adolescence, it fosters healthy development by providing knowledge, skills and values needed to make informed decisions about sexual and reproductive health, prevent unintended pregnancies and STIs, develop respectful relationships and understand concepts like puberty, body image and gender equality.

Parents, to equip them to protect their children from sexual abuse, unintended Pregnancies and Sexually transmitted infections (STIs) and helps children to develop a healthy understanding of their bodies.

Teachers, this study tends to equip them to combat negative Stereotypes and harmful myths about sexual health, provide them with accurate information to promote healthy relationships and responsible sexual behaviour among students and empowers them to teach students life skills for decision making, self-care and assertiveness, thereby deducing unwanted pregnancies, STIs and HIV infections.

Counselling Psychologists, This study also tends to enhance their ability to provide clients with accurate information, offer emotional Support for Sexual concerns and advocate for sexual rights. Also helps to address client issues effectively regardless of the presenting problem and create a more sex-positive clinical environment leading to better overall client wellness.

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Mental Health Professionals, this study tends to improve their ability to provide holistic, non judgemental care, increases comfort in discussing sensitive topics and enables them to effectively address client sexual health need leading to better patient outcomes and more informed decision-making for clients. It also helps to recognise the link between sexual health and overall mental well-being.

Social Workers, It enables them to support clients sexual health, well-being, and rights, it also equipping them to address issues like gender inequality, violence and exploitable within their communities. It provides essential knowledge to counsel clients on informed decision-making.

Future researchers in the field of counselling and behavioural studies, It empowers young people with knowledge, skills and values to make informed decisions, fostering better health outcomes, promoting gender equality, and reducing risks like unintended pregnancies and STIs. It helps on how to address challenges like misinformation and unequal access to resources ensuring Comprehensive rights-based sexuality education is available to all.

1.7 Scope of the Study

This study is focused on investigating the parental involvement, sexuality education and learning motivation as determinants of psychosocial adjustment among early adolescents in Oyo State, Nigeria. The Study will be conducted in public junior secondary schools, it involves both male and female students, aiming to shed light on the key determinants of psychosocial adjustment during this critical phase of development.

1.8 Limitation of the Study

One significant limitation of this study is its geographical focus on early adolescents in Oyo State, Nigeria, which may limit the generalizability of the findings to other regions. The socio-

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cultural, economic, and educational contexts of Oyo State may differ from those in other areas, making it difficult to apply the results to diverse populations with varying experiences of parental involvement, sexuality education, learning motivation, and psychosocial adjustment. Additionally, the study relied on questionnaire for data collection, which may have introduced social desirability bias, as participants might have provided responses that they believed were expected rather than accurate reflections of their actual experiences. This could particularly affect findings related to psychosocial adjustment and sexuality education, where sensitive topics may lead to underreporting or misinterpretation of personal experiences.

Moreover, constraints in sample size and participant diversity may have influenced the study's outcomes. Differences in socio-economic status, gender, and school type were not fully accounted for, which may have affected variations in learning motivation, sexuality education awareness, and parental involvement across different subgroups. A more diverse sample could have provided a broader perspective on these key factors. Finally, the descriptive nature of the study limits its ability to establish causal relationships between parental involvement, sexuality education, learning motivation, and psychosocial adjustment. While the study identifies trends and associations, it does not explore how these factors influence one another over time. Future longitudinal research is needed to better understand the long-term effects of parental engagement, sexuality education, and motivational factors on adolescents' psychosocial development.

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1.9 Operational Definition of Terms

The following terms are defined in this study according to their contextual use:

Psychosocial Adjustment: This refers to early adolescents' degree of balance and adaptation to their intra and inter personal competence in relation to optimism, dysfunction, behaviour and relationship.

Parental Involvement: This is early adolescents' perception of their parent's active participation in their personal and social lives, and assistance in being capable of personal and social relations.

Sexuality Education: This is referred to as training regarding early adolescents' awareness, information and knowledge regarding healthy self-orientation and sexual behaviour.

Learning Motivation: This is early adolescents' driving force propelling them to learn and gain competence in the school towards achieving academic goals. In this study learning motivation is considered in two dimensions-intrinsic and extrinsic learning motivation.

Intrinsic Learning Motivation: This refers to early adolescents' learning motivation characterised by innately driven by personal desire and interest in learning.

Extrinsic Learning Motivation: This refers to early adolescents' learning motivation characterised by external forces and pressures from parents, teachers, friends and significant others and the external rewards for achievement.

Early Adolescents: These are male and female students in junior secondary school II (JSS 2) in public junior secondary schools in Oyo State, Nigeria.

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Endnotes

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Chapter Two

Literature Review

This chapter explains views, ideas, opinions and thoughts of different scholars, authors, and theorists on parental involvement, sexuality education, learning motivation and psychosocial adjustment. These bodies of knowledge considered relevant to the subject matter of this research topic were reviewed and divided into main segments: the conceptual, theoretical, empirical reviews, conceptual framework and summary of the literature review using the following outline:

2.1 Conceptual Framework

2.1.1 Psychosocial Adjustment

2.1.2 Parental Involvement

2.1.3 Sexuality Education

2.1.4 Learning Motivation

2.1.5 Early Adolescence

2.2 Theoretical Framework

2.2.1 Erikson's Psychosocial Theory of Human Development

2.2.2 Bowlby's Attachment Theory

2.2.3 Bandura's Social Cognitive Theory

2.3 Review of Empirical Studies

2.3.1 Parental Involvement and Psychosocial Adjustment

2.3.2 Sexuality Education and Psychosocial Adjustment

2.3.3 Learning Motivation and Psychosocial Adjustment

2.4 Conceptual Model

2.5 Summary of the Literature Reviewed

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2.1 Conceptual Review

2.1.1 Psychosocial Adjustment

Adjustment refers to the process of acclimating to life's evolving circumstances; it is conceptualised by how individuals evaluate their adaptation to the conditions of retirement and the corresponding lifestyle changes. Adjustment is a dynamic process that shapes our responses to life's challenges and opportunities[1]. By understanding the psychological, socio-cultural, neurobiological, and developmental factors that influence adjustment, individuals can cultivate resilience and adaptability in the face of change. By embracing proactive coping strategies and fostering supportive environments, we can navigate transitions with grace and resilience, emerging stronger and more resilient on the other side[1]. Adjustment is the continual process of adapting to new circumstances, environments, or conditions. It is a fundamental aspect of human experience, integral to personal growth, resilience, and well-being. Throughout life, individuals encounter various situations that demand adjustment, whether it is transitioning to a new task, relocating to a different city, or coping with unexpected challenges[2]. Understanding the mechanisms and strategies of adjustment empowers individuals to navigate change effectively, fostering greater adaptability and success in the face of adversity[2].

According to the scholar, individuals engage in cognitive appraisal processes when confronted with stressors, assessing the significance of the event and their ability to cope with it. Positive adjustment depends on the use of effective coping strategies, including problem-solving, seeking social support, and reinterpreting one's perspective[3]. Moreover, resilience as in the capacity to bounce back from adversity plays a vital role in successful adjustment. Resilient individuals possess inner strength and flexibility, enabling them to withstand setbacks and thrive amidst change[3].

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Adjustment occurs within a socio-cultural context, shaped by societal norms, values, and expectations. Cultural psychologists emphasise the role of cultural influences in shaping individuals' adjustment patterns. Cultural variations in coping styles, communication norms, and familial structures impact how individuals adapt to change. Moreover, migration studies highlight the challenges and resilience of immigrants adjusting to new cultural environments. Acculturation, the process of integrating into a new culture, poses unique adjustment demands, requiring individuals to negotiate their cultural identity while navigating unfamiliar social landscapes[4].

Neuroscience offers insights into the neurobiological basis of adjustment. Neuroplasticity, the brain's ability to reorganise and adapt in response to experiences, forms the basis of our ability to adjust to new situations. Neuroplasticity enables individuals to form new neural connections, learn new skills, and adapt to changing environments. Moreover, research indicates that neurotransmitters such as dopamine and serotonin are crucial for mood regulation and resilience, significantly shaping an individual's capacity to cope with stressors. Understanding the neural mechanisms of adjustment provides avenues for intervention and support, such as mindfulness practices and neuro-feedback training[4].

Developmental psychologists study how individuals navigate transitions across the lifespan. Erikson's psychosocial stages of development highlight the challenges and tasks associated with different life stages, from infancy to old age. Each stage presents unique adjustment demands, such as forming attachments in infancy, establishing identity in adolescence, and finding meaning in later life. Moreover, life course theory emphasises the cumulative impact of life experiences on adjustment trajectories, underscoring the importance of early interventions and supportive environments in promoting positive adjustment outcomes[2].

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Psychosocial adjustment, also known as adaptation, denotes an individual's ability to cope with and integrate into their environment. This concept implies that a person possesses adequate mechanisms to experience well-being, effectively respond to environmental demands, and attain personal goals. In childhood, this adjustment is commonly evaluated in primary contexts such as the family and school. As a multidimensional construct, it encompasses a range of psychological and social attributes. Moreover, research comparing adolescents across African countries has revealed that Nigerian youth exhibit a notably higher rate of internet addiction than their counterparts in other regions[3].

Furthermore, research indicates that some Nigerian adolescents exhibit more intensive smoking behaviours compared to their peers. Given these observations and the potential acculturation challenges faced by youth, these individuals may be more vulnerable in terms of psychosocial functioning than other adolescents. Despite this, many studies have traditionally employed a variable-centered approach, which does not easily accommodate the identification of distinct constellations of psychosocial outcomes. Consequently, the current study adopts a person-centered approach to delineate potential psychosocial adjustment profiles among Nigerian and other African adolescents, offering nuanced implications when characterising specific subgroups within these populations. For example, prior research on Chinese left-behind adolescents identified three psychosocial profiles, an adequate adaptation profile, an internalizing problem profile (marked by depressive symptoms, loneliness, subjective happiness, and life satisfaction), and an externalizing problem profile (characterised by rule-breaking behaviour, aggressive behaviour, and prosocial behaviour). Building on these insights, we conceptualise psychosocial adjustment as an integration of internalizing indicators (including depression, loneliness, life

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satisfaction, positive effect, and negative affect) and externalizing indicators (including prosocial and antisocial behaviours)[4].

Scholars conceptualise psychosocial adjustment as the interplay between school commitment and overall subjective well-being, reflecting an individual's ability to meet the demands of their social context. In recent years, there has been a notable increase in behavioural and adaptive challenges among children in family and school environments, raising concerns for educational institutions and society at large[7].

Psychosocial adjustment is a critical aspect of adolescent development, encompassing emotional, social, and behavioural dimensions. Secondary school adolescents encounter numerous challenges as they navigate this phase of life, which can significantly impact their psychosocial well-being. Adolescence is widely regarded as a pivotal developmental phase, distinguished by substantial transformations in physical, cognitive, and psychosocial domains[3]. Psychosocial adjustment, defined as the ability to adapt effectively to the demands and challenges of life, plays a pivotal role in adolescent development. During the secondary school years, adolescents encounter a myriad of experiences and responsibilities that shape their psychosocial well-being[2].

Factors Influencing Psychosocial Adjustment

Family Dynamics: Family relationships serve as the primary context for psychosocial development during adolescence. The quality of parent-child relationships, parental monitoring, and family cohesion significantly impact adolescents' adjustment outcomes. Supportive family environments characterised by open communication, warmth, and parental involvement foster positive psychosocial adjustment[2] [3]. Conversely, family conflict, parental neglect, or dysfunctional dynamics can lead to maladaptive behaviours and emotional distress among adolescents[1].

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Peer Relationships: Peer interactions play a central role in adolescents' socialization and identity development. The need for peer acceptance and belongingness intensifies during the secondary school years, influencing adolescents' self-esteem and emotional well-being. Positive peer relationships provide social support, companionship, and opportunities for skill-building, contributing to healthy psychosocial adjustment[4]. Conversely, peer rejection, bullying, or involvement in deviant peer groups can undermine adolescents' adjustment and lead to social withdrawal or internalizing problems[5]

Academic Stress: The academic demands of secondary school can pose significant challenges to adolescents' psychosocial adjustment. Academic stressors, such as excessive workload, performance pressure, and high-stakes examinations, contribute to anxiety, depression, and burnout among students[3]. Moreover, concerns about future educational and career prospects can exacerbate stress levels and impact adolescents' self-concept and motivation[3]. Effective coping strategies and academic support systems are essential for promoting resilience and adaptive adjustment in the face of academic stressors.

Identity Formation: Adolescence is a stage marked by identity exploration and self-discovery, during which young individuals confront questions related to self-concept, values, and future aspirations[7]. Identity formation encompasses various domains, including ethnic, gender, and sexual identity, which may intersect and influence adolescents' psychosocial adjustment[5]. Adolescents who experience identity confusion or conflict may exhibit internalizing symptoms or engage in risk-taking behaviours as they strive to establish a coherent sense of self[4]. Supportive social environments that validate diverse identities and provide opportunities for exploration facilitate healthy identity development and psychosocial adjustment.

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Mental Health Issues: Mental health challenges, such as depression, anxiety, and substance abuse, are prevalent among adolescents and significantly impact their psychosocial adjustment[3]. The interplay between genetic vulnerabilities, environmental stressors, and developmental factors can increase adolescents' susceptibility to mental health disorders[6]. Untreated mental health issues impair adolescents' functioning in various domains, including academic performance, social relationships, and emotional well-being. Early identification, access to mental health services, and destigmatization efforts are critical for promoting positive psychosocial adjustment and preventing long-term impairment.

Ways for Promoting Psychosocial Adjustment

School-Based Programs: Schools play a vital role in supporting adolescents' psychosocial adjustment through targeted interventions and supportive environments. Social-emotional learning (SEL) programs, which incorporate skills such as self-awareness, emotional regulation, and interpersonal communication, enhance adolescents' coping abilities and resilience[4]. Peer mentoring programs and support groups provide opportunities for peer support, positive role modelling, and skill-building, fostering a sense of belongingness and connectedness among students. Additionally, promoting a positive school climate characterised by inclusivity, respect, and safety contributes to adolescents' overall well-being and psychosocial adjustment[3].

Counselling Services: Access to mental health support services in schools is crucial for meeting the psychosocial needs of adolescents. School counsellors, psychologists, and social workers play crucial roles in providing assessment, counselling, and referral services for students experiencing emotional or behavioural difficulties. Individual and group counselling interventions focus on enhancing adolescents' coping skills, self-esteem, and problem-solving abilities, thereby promoting adaptive psychosocial adjustment. Collaborative efforts between

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school-based mental health professionals, families, and community agencies facilitate comprehensive support for adolescents with diverse psychosocial needs[5].

Community Initiatives: Community-based initiatives complement school-based interventions by extending support networks and resources for adolescents. Youth development programs, extracurricular activities, and community service opportunities provide adolescents with positive outlets for self-expression, skill development, and social engagement. Mentoring programs connect adolescents with supportive adult mentors who provide guidance, encouragement, and advocacy, fostering positive developmental outcomes and psychosocial adjustment. Community partnerships involving schools, families, local organisations, and healthcare providers enhance the availability and accessibility of resources to promote adolescents' holistic well-being.

Psychosocial adjustment is a multifaceted process influenced by various factors, including family dynamics, peer relationships, academic stress, identity formation, and mental health issues. Secondary school adolescents navigate these challenges as they strive to develop a coherent sense of self and establish fulfilling social connections. Understanding the complexities of adolescent development and implementing targeted interventions are essential for supporting positive adjustment outcomes among secondary school students.

2.1.2 Parental Involvement

The concept of parental involvement lacks a universally accepted definition, encompassing various types and dimensions, such as home-based activities, school participation, and academic socialization. This diversity in conceptualisation has contributed to inconsistent findings in the literature regarding its impact on children's psychosocial adjustment. Given these inconsistencies, there is a growing need for meta-analytic studies to synthesize existing research

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and clarify the relationship between parental involvement and psychosocial outcomes. While some meta-analyses have been conducted, further research incorporating recent studies is essential to deepen our understanding of how different forms of parental involvement influence children's development[8].

Parental involvement encompasses the active engagement of parents in various activities and behaviours that support their children's early learning and development. Participation in play, educational activities, and daily routines is essential for fostering this development[9]. In this context, parental involvement in literacy activities, such as reading and storytelling, is widely recognized as advantageous for children's linguistic and cognitive development during the preschool years, as well as for their long-term psychosocial adjustment. However, parental participation encompasses a wider array of activities beyond just reading to children, including any actions that provide opportunities for learning or cognitive stimulation[10]. Parental involvement plays a crucial role in children's psychosocial adjustment and is associated with practices such as providing educational toys, responding to questions, and engaging in discussions about their experiences. Additionally, access to a computer at home and belonging to a family that is moderately to highly engaged in out-of-home activities, such as visiting libraries, have been linked to favourable developmental outcomes for children[11]. Considering the significance of parental involvement in enhancing children's psychosocial adjustment, it is not surprising that there has been considerable interest in identifying the factors that affect the type and frequency of parents' engagement in activities with their children. Additionally, lower levels of cognitive stimulation in the home have been associated with single parenthood and unstable employment[12]. These findings provide valuable insights into how economic disadvantage impacts parental involvement.

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Parental involvement refers to the extent of a parent's active engagement in their child's academic endeavours and psychosocial development. From an educational standpoint, it is critical that parents actively and consistently participate in their children's schooling. Traditional perspectives hold that higher levels of parental engagement are closely linked to greater academic success for their children.[13]. Empirical research has proposed various definitions and dimensions for the concept of parental involvement. Some scholars distinguish between parental involvement and parental engagement by defining the former as the active participation of parents or guardians in a range of school-related activities, while the latter pertains to the support and assistance that parents provide directly to their children in their educational endeavors[14]. Other studies conceptualise parental involvement as the commitment of resources or an investment in education that parents make to support their children's academic development, as noted by various scholars[15].

Some scholars eschew broad definitions of parental involvement, instead delineating it contextually, differentiating between practices that occur at home and those at school[16]. Both dimensions are characterised as parental behaviours that support their children's learning and psychosocial adjustment. Home-based involvement encompasses activities such as assisting with homework, discussing school-related matters, setting high expectations, fostering social relationships, and creating a structured environment conducive to learning. In contrast, school-based involvement includes contributions such as volunteering at school, participating in school events and groups, and engaging with teachers and staff.[17].

Parental involvement is characterised by the active engagement of parents in regular, two-way, and meaningful communication regarding their child's academic progress and other school-related activities. This concept encompasses ensuring that (a) parents play a crucial role in

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supporting both their child's learning and psychosocial development, (b) they are actively encouraged to participate in the educational process at school, and (c) they are considered full partners in their child's education, being included, when appropriate, in decision-making processes and advisory committees to foster their child's psychosocial adjustment. Scholars have noted that there is no single, universally effective strategy for parental involvement; rather, it exists as a broad and multifaceted phenomenon.[18]. Parental involvement significantly contributes to both academic performance and psychosocial adjustment in students, and can be manifested through various actions such as attending parent-teacher meetings, engaging in extracurricular activities, monitoring academic progress, assisting with homework, instilling moral values, and motivating their children[18].

Parental involvement is shaped by aspirations that are moderated by external drivers and barriers to participation, in addition to the influences of other factors such as risk[19] perceptions and the personality traits of students [20]. A child's present academic achievement is the foremost predictor of their potential progression to higher education, and thus plays a significant role in shaping the level of parental involvement. Recent research on parental involvement in Australia, along with studies in diverse contexts[22], indicates that the predominant factor influencing parental engagement is the parents' own evaluation of their child's school performance. However, the connection between parental perceptions of academic capability and their involvement in facilitating the transition to higher education is reciprocal. Scholars have found evidence of a mutually reinforcing relationship, where increased parental engagement is associated with enhanced psychosocial adjustment in their children[23]. This is further supported by substantial evidence indicating a significant association between parental involvement and both the psychosocial well-being and academic achievement of children[23]. Significantly, parents who

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foresee their children pursuing higher education tend to invest more in their secondary schooling. Research further indicates that schools contribute to reinforcing educational aspirations and advantages, which are often influenced by the institutional context and the socioeconomic backgrounds of the students[24]. This is especially relevant in Australia, where approximately 34.4% of students are enrolled in private (non-government) schools, with about 56.5% of these attending Catholic institutions, while the remainder attend other independent schools or engage in home-based education[24].

Consequently, research has increasingly focused on parental background characteristics. International literature consistently demonstrates that parents with higher socioeconomic status, as indicated by factors such as educational attainment, occupational prestige, wealth, or cultural capital, tend to have elevated aspirations for, and greater involvement in, their children's educational achievements and psychosocial development[22 25]. Furthermore, research indicates that residing outside major metropolitan areas significantly impacts parental involvement, primarily due to financial constraints and the challenges associated with relocating for educational purposes. These participation barriers are likely to moderate parental aspirations and influence engagement in regional settings. In Australia's nationally funded and regulated higher education system, disparities in expectations and participation between metropolitan and regional areas within individual states and territories are more pronounced than the differences observed between states and territories themselves.[25].

The literature on parental involvement is marked by its complexity and contradictory findings, largely because it encompasses a diverse range of behaviours and practices[26]. Scholars conceptualise parental involvement as the commitment by parents to dedicate their resources in support of their children"[27]. Scholars have characterised parental involvement as the allocation of

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parental resources, such as time, attention, and support, toward their children's educational development[27]. Parental involvement is also characterised by parents' participation in activities that promote their children's learning, performance, and psychosocial adjustment. In this context, the current study views parental involvement as the efforts made by parents to support their children's academic, social, and emotional development. More important than the definition of the concept is the focus on the specific behaviours that are recognized as parental involvement[27].

Parental involvement is characterised by various behaviours, including parents' aspirations for their children's psychosocial development, communication with their children, participation in school activities, interactions with teachers, and the establishment of rules, among others[27]. Scholars categorise types of parental involvement into several areas, including parenting, communication, volunteering, learning at home, decision-making, and community collaboration[27]. Additionally, one researcher identifies home-related aspects of parental involvement as parenting style, discussions about school activities, homework supervision, aspirations and expectations, and reading at home. School-related involvement encompasses contacting school personnel, participating in parent-teacher organisations, and volunteering at the school[28].

The variations in definitions of parental involvement arise from researchers emphasising different aspects of the concept. For instance, one scholar distinguishes parental involvement into two categories. The first is home-based involvement, which focuses on providing essential support and establishing an environment for reinforcing what children learn at school[29]. The second category is school-based involvement, which encompasses communication with teachers and participation in school activities[29]. One scholar discusses a distinct type of involvement known as academic socialization[30]. According to this perspective, effective psychosocial

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adjustment involves clear educational expectations within the family. It includes discussions between parents and children about educational processes, connections between current events and academic subjects, conversations about learning strategies, and support for the child's educational aspirations and future plans[30].

Research has indicated that parental involvement is linked to positive school attachment among children and contributes to fostering a positive school climate. Additionally, studies have shown that programs aimed at enhancing parental engagement in education yield beneficial effects for children, families, and school communities[31]. Parental involvement plays a crucial role in bridging the gap between school and home, facilitating better adjustment for children in both environments. This involvement underscores the importance of active and meaningful participation by parents in their child's educational journey. It can be broadly defined as parents collaborating with schools and engaging with their children to enhance their psychosocial adjustment and future success. Parental involvement is not a fixed process; it can occur at various levels, ranging from active listening to participating in decision-making. According to one scholar, there are two main types of parental involvement: school-based involvement, which includes activities that foster direct interaction between parents and teachers, and home-based involvement, which encompasses activities and interactions that parents engage in at home to support their children's education and adjustment[32].

Parental involvement in education is a multifaceted concept that includes a diverse range of practices and behaviours related to students' learning and educational experiences. There is no agreement on a singular definition of this construct, leading to various approaches to conceptualising parental involvement over time. Another scholar broadly defines it as "parental participation in their children's educational processes'[33]. Typically, parental involvement is

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viewed as a multifaceted phenomenon that takes place in two primary contexts: the school and the home [34]. Consequently, parental involvement in their children's education can significantly impact students' psychosocial adjustment and academic achievement. However, research indicates that the extent of involvement and participation varies greatly based on parents' social and economic resources[35].

Parents are vital in their children's daily lives, significantly influencing their educational experiences and adjustment processes. Parental involvement is a multifaceted concept. While the term seems intuitive, there is no consensus on its precise definition. Some researchers define parental involvement broadly as the investment of resources by parents or caregivers in their children's education and adjustment. In contrast, others emphasise specific types of involvement[15], such as home-based activities (e.g., assisting with homework) and school-based interactions (e.g., participating in parent-teacher conferences).

For instance, some studies have shown that parental involvement is positively correlated with adolescents' psychosocial adjustment and academic performance. However, other research has found no significant relationship or even a negative correlation between parental involvement and adjustment. Fortunately, a meta-synthesis of nine meta-analyses has addressed this issue, indicating that parental involvement consistently has a positive relationship with psychosocial adjustment, regardless of the definition used for "parental involvement."[36]. Only a limited number of longitudinal studies have explored the reciprocal relationship between parental involvement and psychosocial adjustment, and the findings from these studies suggest a significant reciprocal connection. However, the longitudinal evidence primarily derives from research conducted within a Western cultural context, with relatively few studies focusing on this issue in China. In Western cultures, parents often emphasise fostering a sense of autonomy in

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children, reflecting their cultural orientation toward independence, which they consider crucial for learning[37].

Parental involvement is characterised by the commitment and active participation of parents in their child's education[38]. The lack of consensus surrounding the definition of parental involvement has led to ambiguity in its practical application. Despite its intuitive meaning, the effective use of the concept has not been clear or consistent[39]. Researchers provide varying interpretations of parental involvement, and the study suggests defining it as "the allocation of resources by parents to their child within a specific context"[40]. Additionally, some researchers define family involvement as "the investment made by parents or caregivers in their children's education"[41]. A more specific perspective defines parental involvement as "the behaviours of parents in both home and school environments aimed at supporting their children's educational development"[42].

Scholars argue that inadequate parenting is a significant issue[43] [44]. In essence, parents who engage in their children's education may not need to verbalize their involvement; it is evident through their actions. By employing various strategies and engaging both directly and indirectly, they demonstrate their commitment to their children's educational progress.

2.1.3 Sexuality Education

Sex education is understood as a comprehensive program designed to establish a robust foundation for lifelong sexual health by equipping individuals with essential information as well as attitudes, beliefs, and values related to their identity, relationships, and intimacy. According to the World Health Organisation, sexual health is defined not merely as the absence of disease or

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infirmity but as a state of complete physical, emotional, mental, and social well-being in relation to sexuality[45].

Sex education broadly refers to teaching topics related to human sexuality, encompassing emotional relationships and responsibilities, sexual anatomy, sexual activity, reproduction, legal age of consent, reproductive health and rights, safe sex practices, birth control, and abstinence. Comprehensive sex education that covers these aspects should be integrated into school curricula because of its numerous benefits for teenagers[46]. By implementing such programs, schools can equip adolescents with accurate information, thereby enabling them to make informed decisions. While some contend that sex education might inadvertently encourage sexual activity and prove ineffective, a substantial body of research demonstrates that it reduces teen pregnancy rates, improves the accuracy of sexual health knowledge, and lowers the incidence of HIV, AIDS, and other sexually transmitted diseases among youth. Ultimately, sex education promotes healthy sexual development in teenagers[45].

Sex education is defined as an age-appropriate, culturally relevant approach to teaching about sex and relationships by delivering scientifically accurate, realistic, and non-judgmental information[47]. This definition emphasises that the objective of sex education extends beyond simply conveying facts about human physiology, the reproductive system, or the prevention of sexually transmitted infections. Instead, it adopts a holistic perspective aimed at empowering young people to better understand their sexuality and interpersonal relationships, thereby enhancing their sexual health and overall quality of life[45]. This approach is consistent with the World Health Organisation's description of sexual health as a state of physical, emotional, mental, and social well-being in relation to sexuality, not merely the absence of disease, dysfunction, or infirmity. WHO further asserts that sexual health requires a respectful and

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positive stance towards sexuality and sexual relationships, as well as the opportunity for safe and satisfying sexual experiences free from coercion, discrimination, and violence[46]. Additionally, for sexual health to be achieved and sustained, it is crucial that the sexual rights of all individuals are respected, protected, and fulfilled"[47].

Generally, sex education aims to provide information about sexual and reproductive health. However, the content, messages, and methods of delivering sex education differ significantly between countries. In both Western and non-Western contexts, including China, the implementation of sex education remains a contentious issue in public health and educational policy for several reasons. First, there is a deeply ingrained perception of sex as a "taboo," particularly in many Asian cultures. Some critics argue that sex education may promote promiscuity among young people and believe it is best to avoid the topic to prevent "awakening the sleeping bear." Second, while policymakers, educators, and parents acknowledge that adolescent sexual behaviour is becoming increasingly "out of control," they disagree on how to address problematic sexual behaviours among youth. Finally, there is contention over whose responsibility it is to regulate young people's behaviour in this area[48]. Sex education programs can be school-based, led by teachers, social workers, health professionals, or peers; community-based; or family-based. Moreover, there are various approaches to sex education, including abstinence-only, abstinence-only-until-marriage, abstinence, and comprehensive sex education[49].

Sex education is a lifelong endeavour aimed at establishing a solid foundation for sexual health. It involves cultivating attitudes, beliefs, and values, as well as acquiring the information, motivation, skills, and critical awareness necessary to enhance sexual well-being and mitigate adverse sexual outcomes. Beyond sexual development and reproductive health, sex education also addresses dimensions such as interpersonal relationships, affection, intimacy, body image,

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values, and gender roles. Moreover, the sources of sexual education are diverse, ranging from the home and school environments to peers, media, and religious institutions [49].

Sex education is a systematic, intentional, and structured learning process focused on human sexuality. It is designed to provide young people with the necessary skills and knowledge to foster positive attitudes toward sexual issues and to make informed, rational decisions that align with societal expectations. Importantly, this educational approach goes beyond the simple acquisition of academic knowledge; it aims to help young individuals develop attitudes, values, goals, and practices based on sound information. Consequently, it enables them to express their sexual and mating impulses in ways that are both socially and ethically appropriate and personally fulfilling[50].

Historically, sex education was primarily imparted by a child's immediate family. However, the influence of modernization, Western cultural norms, and the deterioration of traditional family structures have undermined this practice, leaving adolescents vulnerable to external sources that might not provide accurate or reliable information to aid their transition into adulthood. Consequently, schools have assumed the responsibility of addressing this gap through the implementation of comprehensive sex education programs[50].

Sexuality is a fundamental aspect of human development, particularly during adolescence, and it significantly influences both physical and mental health. Negative sexual experiences can result in adverse outcomes, such as sexually transmitted infections, including gonorrhea, syphilis, and HIV, unintended pregnancies, maternal complications, intimate partner violence, as well as depression, suicidality, and anxiety. One of the primary preventative strategies to address these challenges is sexuality education, which can be administered in person, via remote

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communication (e.g., computer or text messages), or through a blended approach to help adolescents adapt to new situations[50].

Moreover, sexuality constitutes a central dimension of human existence, encompassing aspects such as biological sex, gender identities and roles, sexual orientation, eroticism, pleasure, intimacy, and reproduction. It is expressed through a wide range of modalities including thoughts, fantasies, desires, beliefs, attitudes, values, behaviours, practices, and relationships, although not all dimensions are always experienced or expressed by every individual. Sexuality is shaped by a complex interaction of biological, psychological, social, economic, political, ethical, legal, historical, religious, and spiritual factors[51]. Additionally, sexuality education addresses all facets of the subject, covering topics such as family planning, reproduction, body image, sexual orientation, sexual pleasure, values, decision making, communication, dating, relationships, and strategies for preventing sexually transmitted infections. The alarming rate of teenage pregnancy, attributed to factors such as adolescent curiosity, peer group influence, and media exposure, further underscores the importance of such comprehensive education, given its associated consequences like school dropout, inadequate care for children born to teenage mothers, and various health issues[51].

Sexuality education encompasses age- and gender-appropriate instruction on relationships and sex, providing realistic, scientifically accurate, and non-judgmental information about sexual relationships, reproductive health, psychosocial adjustment, and the physiological changes accompanying puberty [52]. As one of the most sophisticated interventions in the field of sexual and reproductive health (SRH), it is often viewed as comprising multiple interacting components[53].

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Despite its comprehensive scope, the concept of sex education has generated controversies and misconceptions. Critics have sometimes argued that it promotes sexual immorality rather than fostering healthy sexual awareness[54]. However, research shows that whether provided in or out of school, sexuality education does not encourage increased sexual activity, risky sexual behaviours, or higher rates of STI/HIV infections. In Nigeria, for instance, discussions of sexual matters are infrequent and, when they occur, are usually shrouded in secrecy. Importantly, sexuality education goes beyond teaching the anatomy and physiology of sex organs; it also addresses gender roles, sexual abuse, and issues of equality[55].

The long-term benefits of sexuality education on psychosocial adjustment have also been documented. Notably, it leads to improved sexual and reproductive health knowledge, higher self-esteem, and enhanced skill development, as well as reductions in the incidences of STIs and sexual violence [56]. Additionally, scholars emphasise that young people, especially young women, require explicit, trustworthy, and clear communication regarding sexuality within the home, particularly given the multiple sources of sexualized messaging they encounter [57]. Empirical findings from some European countries support this perspective, revealing that the implementation of sexuality education is associated with lower rates of teenage pregnancy, STIs (including HIV/AIDS), and abortions among young adults aged 15 to 24[58]. Moreover, with the increasing incidence of sexual assault, the purpose of sexuality education should extend beyond merely reducing pregnancy and STIs, to also address harmful traditional practices and rigid gender and sexual norms[59].

The effectiveness of sexuality education is most pronounced when guardians, educators, schools, and youth-focused services work in tandem with educational institutions. This collaborative approach is essential for fostering proper sexual development, as it ensures that schools and

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families jointly address adolescents' needs for accurate and comprehensive knowledge about human sexuality[60].

Sexuality education is an instructional approach rooted in a curriculum designed to equip students with the knowledge, attitudes, skills, and values necessary to make informed and healthy decisions regarding their sexual lives. According to scholars, sexuality education provides young people with precise, age appropriate information about sexuality and sexual and reproductive health, which is crucial for their overall well-being and survival[61]. This educational approach involves disseminating information on bodily development, sex, sexuality, and relationships, as well as imparting skills that enable young individuals to communicate effectively and make informed decisions about sex and their sexual health. By furnishing a comprehensive toolkit of knowledge, attitudes, and skills, sexuality education empowers young people to protect their health, assert their rights, and maintain their dignity, thus facilitating the exercise of full bodily autonomy, which not only entails the right to make decisions about one's body but also requires the necessary information to do so meaningfully. Anchored in human rights principles, these programs promote gender equality and advance the rights and empowerment of young individuals. Topics covered under sexuality education, also referred to as life skills education, psychosocial adjustment education, or family life education, include, but are not limited to, families and relationships; respect, consent, and bodily autonomy; anatomy, puberty, and menstruation; contraception and pregnancy; as well as sexually transmitted infections, including HIV[62].

Sexuality education is a vital component of education systems worldwide, encompassing a wide array of topics related to human sexuality, relationships, and sexual health. It is a fundamental aspect of holistic education, aiming to equip individuals with accurate information, skills, and

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values necessary to make informed decisions about their sexual health and well-being. Comprehensive sexuality education (CSE) goes beyond the mere dissemination of biological facts to address broader aspects of sexuality, including gender identity, sexual orientation, consent, and reproductive rights. Comprehensive sexuality education is grounded in a rights-based approach, recognizing sexuality as a fundamental aspect of human life and acknowledging individuals' right to accurate, age-appropriate information and education regarding their sexuality. UNESCO defines comprehensive sexuality education as "a curriculum-based process of teaching and learning about the cognitive, emotional, physical, and social aspects of sexuality"[63]. It emphasises respect for diversity, gender equality, human rights, and the promotion of healthy relationships.

Key Components of Sexuality Education

Anatomy and Physiology: Providing accurate information about reproductive organs, sexual development, and the biological aspects of reproduction.

Relationships and Communication: Teaching skills for establishing and maintaining healthy relationships, effective communication, and conflict resolution.

Sexual and Reproductive Health: Addressing topics such as contraception, sexually transmitted infections (STIs), HIV/AIDS prevention, and menstrual hygiene management.

Gender and Sexual Identity: Exploring concepts of gender identity, sexual orientation, and the spectrum of human sexuality in a non-judgmental and inclusive manner.

Consent and Rights: Emphasising the importance of consent, bodily autonomy, and respect for individual rights in sexual interactions.

Sexual Behaviour and Decision Making: Encouraging critical thinking and responsible decision-making regarding sexual behaviour, including delaying sexual debut and practicing safer sex.

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Culture, Values, and Ethics: Discussing cultural norms, values, and ethical considerations related to sexuality and relationships, while promoting tolerance and understanding of diverse perspectives.

Benefits of Comprehensive Sexuality Education

Empowering Individuals: CSE equips individuals with accurate information, skills, and self-confidence to make informed decisions about their sexual health and relationships.

Reducing STI/HIV Rates: By promoting condom use, STI prevention, and HIV/AIDS awareness, CSE contributes to reducing the incidence of sexually transmitted infections and HIV transmission.

Preventing Unintended Pregnancies: Education on contraception and family planning helps individuals make choices that can prevent unintended pregnancies, thereby reducing the need for unsafe abortions.

Fostering Gender Equality: CSE challenges traditional gender norms and promotes gender equality by addressing issues such as gender-based violence, discrimination, and unequal power dynamics.

Promoting Healthy Relationships: By teaching communication skills, conflict resolution, and mutual respect, CSE fosters the development of healthy and respectful relationships.

Enhancing Mental Health: By addressing issues such as body image, self-esteem, and peer pressure, CSE contributes to promoting positive mental health outcomes among young people.

Challenges and Controversies

Resistance from Conservative Groups: Some religious or conservative groups oppose CSE, viewing it as promoting promiscuity or conflicting with their cultural or moral values.

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Lack of Teacher Training: Many educators feel ill-equipped to teach comprehensive sexuality education due to inadequate training, discomfort, or cultural taboos surrounding sexuality.

Cultural Sensitivity: Adapting CSE to diverse cultural contexts while respecting local norms and values can be challenging, requiring careful consideration and community engagement.

Political Interference: In some cases, political agendas may interfere with the implementation of comprehensive sexuality education, leading to censorship or restrictive policies.

Funding and Resources: Limited funding and resources for sexuality education programs pose significant barriers to their implementation and sustainability in many regions.

Comprehensive sexuality education is essential for promoting sexual health, empowering individuals, and building inclusive and equitable societies. By providing accurate information, fostering critical thinking, and promoting respect for diversity and human rights, CSE plays a crucial role in addressing the complex challenges of sexuality and relationships in today's world. To maximize its impact, it is imperative to overcome challenges, invest in teacher training and curriculum development, and advocate for policies that prioritize comprehensive sexuality education as a fundamental component of education systems worldwide[64].

2.1.4 Learning Motivation

Motivation is defined as the psychological process that initiates, guides, and sustains goal-directed behaviour [65]. It may be intrinsic, stemming from an inner desire for personal gratification, or extrinsic, driven by the pursuit of external rewards [65]. This process plays a crucial role in students' academic endeavors and contributes to their psychosocial adjustment [66]. Fundamentally, motivation embodies the drive to achieve objectives and the sustained effort required to maintain this drive; it is essential for various cognitive tasks such as planning,

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organising, decision-making, learning, and assessment [66]. In essence, motivation represents the individual's commitment to fulfilling responsibilities by effectively allocating and sustaining energy, thereby significantly influencing academic and overall life success. Moreover, it equips individuals with the resilience needed to overcome challenges encountered during the learning process [67].

Motivation can also be understood as the inner desire that compels a student to excel, evident in active class engagement, task completion, persistent study efforts, and academic performance, providing intrinsic rewards rather than external incentives [67]. Scholars broadly describe motivation as "the reason someone does or acts in a particular way," and it is often compared to the fuel that powers an engine [68]. However, human motivation is a multifaceted concept that encompasses a variety of elements including personal beliefs, expectations, principles, desires, behaviours, and the influence of cultural backgrounds[68].

Recent research has increasingly focused on uncovering the factors that drive learners' motivation and how these motives relate to educational outcomes, often regarded as the "golden key" for educators to unlock student potential. Scholars have argued that learning motivation critically shapes both the effectiveness and the results of educational endeavors[68]. Unlike merely memorizing for tests or acquisition of problem-solving skills, motivation also reflects deeper goals of personal growth and life purpose, which can be gauged through learners' psychosocial adjustment during their studies. Consequently, variations in motivational profiles lead students to adopt distinct learning strategies and exhibit divergent capabilities; those with clear, well-anchored motivations tend to engage more actively, uphold academic integrity, and pursue skill development and independent study, thereby fostering the competencies needed for future success[68].

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Motivation itself is influenced by a constellation of personal and contextual factors. Subjective determinants include self-confidence, enthusiasm for one's chosen profession, a sense of responsibility, and self-regulation, while objective influences encompass the social milieu, the learning environment, and the support provided by family and peers [69]. For example, in a case study at Hanoi University of Science and Technology.A scholar found that students' self-assertion motives were strongly shaped by their personal sense of responsibility alongside external factors such as peer relationships and the broader educational setting[69]. However, early analyses did not clarify how different motives interrelate or which motive predominates in guiding behaviour "[70]. Later research addressed this gap by demonstrating that graduate students typically exhibit stronger intrinsic motivation, driven by the intellectual excitement of grappling with challenging coursework and the joy of discovery, than extrinsic motivation, which is tied to external rewards[71].

Recent scholarship has increasingly focused on identifying the factors that drive learning motivation and its relationship to educational outcomes, often deemed the "golden key" for unlocking student potential. It is posited that learning motivation critically shapes both the effectiveness and the results of most pedagogical activities[68]. Unlike rote test preparation or mere problem-solving drills, motivation reflects deeper aspirations and life-purpose goals, which can be assessed via students' psychosocial adjustment throughout their academic journey. Accordingly, students with well-defined motivational orientations adopt distinct learning strategies and demonstrate superior capabilities; those guided by clear motives engage more actively with coursework, uphold integrity in assessments, and pursue skill development and independent study, thereby fostering competencies essential for future success[68].

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Learning motivation itself arises from the interplay of subjective factors, such as self-confidence, vocational excitement, a sense of responsibility, and self-regulation, and objective influences like the social environment, learning context, family support, and peer relationships[69]. For example, a case study at Hanoi University of Science and Technology found that students' self-assertion motives were strongly shaped by their personal sense of duty alongside external conditions such as peer networks and institutional climate[69]. Early analyses, however, did not clarify the interrelations among different motives or identify which motive assumes a guiding role[70]. Subsequent research remedied this by showing that graduate students exhibit stronger intrinsic than extrinsic motivation: they derive intellectual excitement from challenging assignments and the process of discovery[71].

Educational psychologists further distinguish between "learning motivation" and "learning motive." One definition frames learning motivation as "the desire to engage with and fulfill the requirements of a course or curriculum"[72] while another emphasises its explanatory power in accounting for why individuals initiate, sustain, and complete tasks[73]. Empirical studies corroborate that robust motivation positively influences students' psychosocial adaptation during learning[74,75], enhancing critical thinking, self-control, enthusiasm, and active participation, core ingredients for both academic success and healthy psychosocial adjustment. As such, contemporary investigations prioritize the determinants of learning motivation rather than discrete motives.

Motivation is typically categorised as either internal (driven by personal interest or enjoyment) or external (driven by rewards or recognition)[76]. Across both face-to-face and online modalities, learning motivation has been shown to correlate negatively with burnout and directly promote sustained learning intentions, engagement, positive affect, psychosocial adjustment, and

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academic performance[77]. In sum, motivation functions as the vital force that propels learners to invest time and energy, navigate obstacles, and persist in goal-directed behaviours throughout the educational process.

At its core, motivation reflects an individual's reasons for action. It originates from a physiological or psychological need that activates behaviour toward specific goals, earning its description as "the reasons underlying behaviour"[78]. In the classroom, this translates into students' choices of tasks, the effort and persistence they devote to them, and their capacity to overcome learning challenges[69]. Simply put, motivation is the "fuel" that moves us: an internal impetus or drive to act in pursuit of personal and academic objectives[79].

Motivation to engage in activities can manifest in various ways. It may originate from personality traits or a lasting interest in a particular domain. Importantly, achieving a high level of motivation in the classroom correlates with increased understanding, creativity, productivity, and psychosocial adjustment[68].Collectively, these positive outcomes position motivation as one of the most critical components of learning[80]. One author explains that the motivation to learn is driven by both internal and external impulses, prompting individuals to act and leading to behavioural changes[77]. This author further argues that the essence of motivation to learn involves both internal and external encouragement for students as they strive to alter their behaviour[81].

Students' motivation during the learning process can be observed through their behaviours. Those with high motivation are typically diligent in their tasks, resilient when facing challenges, interested in a range of topics, prefer independent work, and do not easily lose interest in their activities[79]. Furthermore, another author notes that highly motivated students often exhibit traits such as initiative, diligence, active participation in learning, a desire for high standards, punctuality, and discipline, consistently striving for optimal results[81]. Additionally, motivated

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students achieve academic success by engaging in behaviours such as studying, asking questions, seeking advice, and participating in classes, labs, and study groups[81].

Several authors have identified key factors that influence learners' motivation. One author highlights that the most significant factors affecting the teaching and learning process include teaching methods, age, aptitude, and learner attitudes[82]. Among these, attitude is particularly impactful, as it directly pertains to the educational context shaped by teachers, peers, and family[77]. Another author outlines four primary motivating factors as crucial.

Activities in the Teaching/Learning Process: This aspect is vital since a large portion of a learner's interest in a subject hinges on the types of activities conducted in class.

Final Results: Positive outcomes are perceived as rewards, while negative results act as punishments. Therefore, motivation is influenced by these outcomes; students who achieve good results tend to be more motivated than those who do not[83].

Internal Motivation: This refers to the intrinsic drive a student possesses regarding a subject, which is shaped by prior experiences and the relevance of the subject to their daily lives.

Extrinsic Motivation: This involves the effect of external stimuli, such as rewards or punishments.

Another author categorises motivational sources into three main types[80].

Course-specific Components: This includes the syllabus, teaching materials, teaching methods, and learning tasks.

Teacher-specific Components: This encompasses the teacher's behaviour, personality, and teaching style.

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Group-specific Components: This pertains to the dynamics within the learner group.

Additionally, motivation is influenced by both intrinsic and extrinsic factors[79]. Intrinsic factors include students' attitudes, interests, and intelligence, while extrinsic factors involve elements beyond the students, such as their social lives, teacher influences, and the broader environmental context, including family, school, and community.

Internal (intrinsic) factors that impact motivation include needs, interests, and enjoyment[79]. Meeting students' needs can engage them in achieving their learning goals. Interest also plays a critical role in enhancing motivation, while enjoyment is essential for maintaining engagement. When a learner's needs, interests, and enjoyment are addressed within a subject, the likelihood of high motivation increases. Conversely, extrinsic factors influencing students' motivation may include their social interactions, teaching methods, and the overall learning environment[78]. Societal perceptions of a subject can shape students' attitudes toward studying it, and the strength of these attitudes significantly affects their motivation levels[77].

Another crucial aspect of student motivation is the teacher's role. The level of student motivation can be significantly influenced by the teacher as a motivator. Research has shown that teachers' behaviours and instructional practices are vital in fostering students' motivation to learn[81]. Teachers can enhance the learning experience by creating engaging classroom environments that inspire students. The choice of teaching methods also plays a significant role: appropriate methods can make students feel more comfortable and facilitate easier attainment of learning objectives. Lastly, the learning environment itself can impact motivation; well-decorated classrooms and thoughtfully arranged seating can contribute to a more comfortable learning experience[78].

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Importance of Learning Motivation

Motivation significantly accelerates the effort a learner invests in achieving a goal. In the educational context, motivation acts as a determinant of the extent to which learners reach their objectives[79]. When motivation is lacking, learners often struggle to engage and may see little value in learning, resulting in minimal progress. Thus, motivation provides the necessary effort and energy for learners to complete tasks, placing them in the right mindset for learning. It focuses a learner's attention and energy on the specific activity or knowledge to be acquired. Motivation ultimately dictates whether a student approaches a task, regardless of its difficulty, with enthusiasm or apathy.

ii. Motivation is a crucial factor for academic success and psychosocial adjustment from childhood through adolescence[74]. Inspiring learners to engage in their education is a fundamental concern in any instructional setting. Fostering motivation is one of the primary responsibilities of educators, who should embed motivational strategies in every lesson. Motivation should be introduced at the lesson's start to pique learners' interest and guide their focus on the material to be learned. This motivation should persist throughout the entire lesson.

iii. The motivation behind learning activities enables learners to concentrate on their tasks, leading to greater satisfaction. Ongoing motivation is essential for helping learners maintain focus on the lessons. When motivated, individuals typically experience a sense of satisfaction, which contributes to their self-development.

iv. Motivation directs learners' behaviours towards specific goals, influencing the choices they make. For instance, motivation can determine whether a student opts to enroll in an art class or a science course, or whether they choose to attend a school football game during the week instead of completing an assignment due the next day.

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v. Motivation boosts the initiation and persistence of learning activities, increasing the time students spend on tasks, which is a significant factor in their overall learning and achievement.

vi. Motivation enhances cognitive processing by influencing how information is absorbed and understood. Motivated students are more inclined to pay attention and strive to comprehend the material, rather than merely going through the motions of learning superficially.

vii. Motivation shapes the perception of what consequences are reinforcing or punishing. For example, students who are highly motivated to achieve academically and maintain high GPAs feel rewarded by receiving an 'A' and experience a sense of punishment if they receive an 'F.'

Motivation represents an emotional state that predisposes individuals toward action, particularly in relation to learning84. It is considered a primary determinant of academic performance, relevant across the entire educational experience, and is a shared responsibility among all participants in the educational process[85]. Motivation is closely linked to task completion and depends on factors such as self-efficacy, procrastination, and fear of failure, which are predictors of psychosocial adjustment[84]. It serves as the driving force that directs change towards success, playing a vital role in fostering coherent actions that contribute to positive interactions within the social and cultural development of each individual, ultimately shaping their personality[86].

Motivation exists on a continuum, with intrinsic and extrinsic motivation positioned at opposite ends. Intrinsic motivation drives actions based on the pursuit of intellectual stimulation and a desire to learn new concepts, while extrinsic motivation is oriented towards achieving goals through external efforts[87].

Both types of motivation are essential in the teaching-learning process, as motivated students set objectives, enhance their knowledge, and develop their potential. Therefore, implementing

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motivational strategies in the classroom that encourage active participation is crucial[88]. Conversely, a lack of motivation leads to poor performance, highlighting the necessity of creating a supportive classroom environment that fosters enthusiasm and ignites interest[89].

2.1.5 Early Adolescence

Adolescents, according to the World Health Organisation, encompass individuals aged 10 to 19 years, whereas "youth" refers to those between 15 and 24 years; collectively, these groups are often termed "young people" (10–24 years). Young people represent a substantial demographic cohort, approximately one fifth of the global population, and continue to grow in absolute numbers. They possess distinct characteristics and developmental needs, facing challenges unique to their stage of growth and the social contexts in which they live. Throughout the shift from childhood to adulthood, adolescents establish behavioural patterns and make lifestyle decisions that influence both their immediate and future health. Moreover, serious health and safety concerns, such as engagement in deviant behaviours, can negatively impact adolescents and young adults. This period of life is marked by profound physiological and anatomical transformations that culminate in reproductive maturity[90].

Adolescence itself is the transitional phase between childhood and full adulthood, involving concurrent physical and psychological maturation. These changes span biological, social, and mental domains, though the latter two are often more readily quantified through objective measures. Traditionally, the onset of puberty aligned closely with the beginning of adolescence in the teenage years; however, recent trends show puberty commencing earlier, in preadolescence, and extending past the late teens, rendering the boundaries of adolescence increasingly fluid. While the teenage years (13–19) serve as a common reference, the precise end of adolescence and entry into adulthood vary across countries, and even within communities,

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where the age at which an individual assumes social responsibilities differs. Typically, adolescence is also associated with growing independence and reduced supervision relative to the preadolescent stage[90].

Adolescence encompasses a period of swift physical and psychological transformation, commonly referred to as puberty. This process typically begins around age 11 in girls and 13 in boys, though the onset of puberty has trended earlier, likely influenced by improved nutrition. Hormonal fluctuations precede visible bodily changes and can manifest as mood swings or restlessness. Girls enter menstruation and develop underarm and pubic hair, whereas boys experience voice deepening, growth of body, facial, and pubic hair, and the onset of spontaneous erections and nocturnal emissions. Both sexes undergo rapid height and weight gains that can, by age 17, outpace even their parents' stature. During this stage, concerns about body image often arise; adolescents who face teasing about their weight may become withdrawn or develop unhealthy eating patterns, potentially leading to dieting behaviours that exacerbate their physical and emotional distress[90].

Simultaneously, adolescents begin to think and feel in markedly new ways. They seek greater autonomy from their families, forging friendships and romantic relationships that supersede parental influence. This shift often leads to more frequent disagreements with parents as young people form their own viewpoints. Peer interaction, whether in person or via phone and social media, becomes predominant, and expressions of personal identity emerge through clothing choices and grooming styles. Despite this push for independence, many adolescents retain core family values even as they experiment with new behaviours. This is a time of rapid exploration: young people eagerly immerse themselves in learning about the world and testing boundaries, sometimes encountering situations for which they lack prior experience. Such experiments can

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lead to sudden swings in self-confidence, feeling mature one moment and overwhelmed the next[91].

Adolescence is a phase marked by extensive physical, emotional, and psychological transformations, serving as the bridge between childhood and adulthood [92]. During this time, individuals generally exhibit the initial indicators of sexual maturation, which often coincide with a burgeoning sense of autonomy. Unfortunately, despite an increasing trend toward earlier sexual activity among young people, many remain unprepared for its implications[93].

While the notion of adolescence dates back to Plato and Aristotle, it was only in the early 20th century that this period was recognized as a distinct developmental stage [90]. Hall famously characterised adolescence as one of "storm and stress," arguing that its inherent struggles were not merely incidental but integral to healthy maturation [90]. However, subsequent empirical research in the latter half of the century challenged this monolithic view, emphasising adolescence as a time of both vulnerability and opportunity [92]. In 2014, Lawrence Steinberg reframed this era as an "Age of Opportunity," spotlighting its potential rather than its pitfalls[94].

Throughout their educational journey, adolescents encounter multiple school transitions that can disrupt academic performance[95]. In Brazil, the move in the 6th grade from a single- or two-teacher model to the multi-teacher structure of Ensino Fundamental II often precipitates declines in motivation, self-esteem, and perceived social support, alongside heightened contextual stress [96]. Yet this same period can also fortify students' self-efficacy beliefs, presenting a critical window for positive development[93].

Adolescents do not navigate these changes in isolation; their interactions with family, peers, and educators profoundly shape their trajectories[95]. Positive parent–child relationships bolster

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motivation, academic self-efficacy, and overall well-being, thereby enhancing school performance[93]. Consequently, the quality of interpersonal connections and individual biopsychosocial attributes can yield diverse socio-emotional outcomes during this formative stage[97].

2.2 Theoretical Framework

2.2.1 Erikson's Psychosocial Theory of Human Development

Erik Erikson, born in Frankfurt, Germany, in 1902, must be understood within the context of the historical period in which he lived. His interest in the sociocultural dimensions of identity likely stems from his mixed heritage; his biological father was Danish and his stepfather was Jewish. According to one author, Erikson may have experienced feelings of alienation due to being perceived as a gentile by the Jewish community, while also being identified as a Jew and Dane by Germans. After immigrating to the United States in 1933, Erikson worked as a clinician throughout his life and actively shared his perspectives on various public issues[98]. His books achieved significant popularity, selling hundreds of thousands of copies, and his image graced the covers of prominent publications like Newsweek and the New York Times Magazine, which is an uncommon recognition for a personality theorist. His work on the foundations of militant nonviolence, titled *Gandhi's Truth*, earned him a Pulitzer Prize, and he attained this level of prominence without ever having earned a university degree. Erikson passed away in 1994[98].

Erik Erikson's psychosocial theory of human development continues to be one of the most influential frameworks for understanding how individuals navigate different stages of life, confronting both internal conflicts and external challenges. Developed in the 20th century, Erikson's theory suggests that human development occurs in a series of stages, each marked by a

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distinct psychosocial crisis that must be effectively addressed to promote healthy personality development[99].

Trust vs. Mistrust (Infancy): The initial stage of Erikson's theory occurs during infancy, where the primary conflict is between trust and mistrust. Infants develop trust when their needs for care, warmth, and affection are consistently met by their caregivers. Conversely, inconsistent or neglectful caregiving can result in mistrust and insecurity. Recent studies highlight the essential role of early attachment relationships in shaping an individual's psychological well-being[98].Secure attachment in infancy establishes a foundation for healthy relationships and emotional regulation in later life.

Autonomy vs. Shame and Doubt (Toddlerhood): During toddlerhood, children begin to assert their independence and autonomy. Erikson argued that the conflict at this stage is between autonomy and shame/doubt. Encouraging exploration and providing opportunities for self-expression are vital for fostering autonomy. However, overly restrictive or critical parenting can lead to feelings of shame and doubt. Contemporary research emphasises the significance of supporting children's autonomy while maintaining appropriate boundaries[100]. Parenting styles that balance warmth with structure are crucial for healthy autonomy development.

Initiative vs. Guilt (Preschool): Preschool-aged children start to assert control and initiative in their activities. Erikson proposed that the conflict at this stage lies between initiative and guilt. Encouraging children to pursue their interests and take on responsibilities fosters a sense of initiative. Conversely, harsh criticism or excessive control can induce feelings of guilt and inadequacy. Recent studies underscore the importance of parental scaffolding in promoting initiative and problem-solving skills among young children[101]. Providing opportunities for guided exploration supports children in developing competence and agency.

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Industry vs. Inferiority (School Age): As children enter school, they begin to compare their abilities and achievements with those of their peers. Erikson suggested that the conflict at this stage is between industry and inferiority. Fostering a sense of competence through mastery of tasks and skills enhances industry, while experiences of failure or perceived incompetence can lead to feelings of inferiority. Recent research emphasises the importance of supportive environments and encouragement from significant others in shaping children's self-perceptions and academic motivation[100]. Positive feedback and opportunities for skill development contribute to a robust sense of industry.

Identity vs. Role Confusion (Adolescence): Adolescence is marked by exploration and identity formation. Erikson proposed that the central conflict during this stage is between identity and role confusion. Adolescents grapple with questions of self-identity, values, and future aspirations. Successful resolution involves integrating various roles and commitments into a coherent self-concept. Recent studies highlight the impact of peer relationships, cultural contexts, and social media on adolescent identity development[100]. Supportive relationships and opportunities for exploration facilitate the formation of a secure identity.

Intimacy vs. Isolation (Young Adulthood): Young adulthood is characterised by the desire for intimacy and meaningful relationships. Erikson posited that the conflict at this stage is between intimacy and isolation. Forming close connections with others necessitates vulnerability and trust. However, fear of rejection or intimacy can lead to social isolation. Contemporary research underscores the importance of communication skills, emotional intelligence, and self-disclosure in cultivating intimate relationships[101]. Establishing trust and reciprocity lays the groundwork for enduring intimacy.

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Generativity vs. Stagnation (Middle Adulthood): Middle adulthood focuses on contributing to the next generation and leaving a legacy. Erikson suggested that the conflict at this stage is between generativity and stagnation. Engaging in meaningful work, nurturing relationships, and contributing to the community fosters a sense of generativity. Conversely, feelings of stagnation or unfulfillment can lead to existential despair. Recent studies highlight the positive effects of generative behaviours on psychological well-being and life satisfaction[100]. Finding avenues for creativity, mentorship, and altruism enhances feelings of purpose and fulfillment.

Ego Integrity vs. Despair (Late Adulthood): In late adulthood, individuals reflect on their lives and assess their accomplishments. Erikson proposed that the conflict at this stage is between ego integrity and despair. Achieving a sense of integrity involves accepting the past, finding meaning in one's experiences, and reconciling with mortality. In contrast, unresolved regrets and unfulfilled aspirations can lead to feelings of despair and bitterness. Recent research emphasises the role of resilience, coping strategies, and social support in fostering ego integrity among older adults[100]. Cultivating gratitude and maintaining meaningful connections can buffer against existential despair.

Erik Erikson proposed that individuals experience a series of identity crises, or turning points, which can make them vulnerable to significant changes in their self-perception[101]. He divided personality development into eight psychosocial stages. The first four stages are comparable to Freud's oral, anal, phallic, and latency stages, but a major distinction between their theories lies in Erikson's emphasis on psychosocial factors, while Freud concentrated on biological influences (Erikson, 1950). Erikson suggested that each of the eight stages presents an opportunity to cultivate fundamental strengths. These strengths, or virtues, emerge once the associated crisis is

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successfully resolved. He argued that these basic strengths are interdependent; one cannot develop until the preceding strength has been established[98].

In Erikson's framework, human development consists of a series of personal conflicts. The potential for these conflicts is innate from birth and becomes prominent at various stages when the environment necessitates specific adaptations. Each encounter with the environment is termed a crisis, which involves a shift in perspective, requiring individuals to redirect their instinctual energy according to the demands of each developmental stage[98]. Erikson's post-Freudian theory reflects his diverse background, including experiences in art, extensive travel, and exposure to various cultures, all contributing to his lifelong quest for identity[98].

Autonomy signifies the ability to act with a sense of choice, volition, and self-determination. An autonomous individual can exert influence and maintain control over their daily situations. The development of autonomy is crucial during childhood and becomes a significant psychosocial task in adolescence[98], essential for ensuring well-being and healthy growth. Erikson's eight stages of psychosocial development[100]. provide a suitable model, emphasising autonomy as a central developmental milestone while outlining the characteristics observable in individuals and the supporting tasks required from their social environment. Erikson applied his theory to analyse the psychosocial development of individuals with deafness, finding that caregivers often struggle to provide adequate autonomy support due to communication and language barriers between the child and caregivers[100].

To date, the application of Erikson's theory to the autonomy development of children and youths with congenital deaf-blindness (CDB) has not been thoroughly explored. Receiving appropriate environmental support is one of Erikson's key conditions for success at each of the eight psychosocial stages, also known as the eight psychosocial crises[100]. In this context, a

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psychosocial “crisis” refers to a pivotal moment in life that is marked by increased vulnerability and significant growth[100].To resolve these crises, Erikson describes developmental characteristics for individuals at each stage as well as supportive tasks for those in their social environment, including caregivers. One author notes that the stages are interconnected and that developmental characteristics may already be present at earlier stages, often on an unconscious level. According to the author, the outcome of one stage can positively or negatively impact subsequent stages[101].

The author examines various aspects of the first three stages in relation to autonomy development and the support required for it, aiming to understand the foundational steps in the autonomy development of children and youths with CDB[100]. To provide a comprehensive overview of developmental characteristics and caregiver tasks in these initial three stages, we focus in detail on the second stage: “autonomy vs. doubt and shame.” Additionally, we explore the precursors of autonomy development described in the first stage: “trust vs. mistrust,” which is deemed critical for success in later stages. Lastly, we include the third stage, “initiative vs. guilt”, as certain developmental characteristics and caregiver tasks identified in this stage are viewed as continuations of autonomy development[101].

In Erikson’s first stage, an infant develops sensory awareness, body awareness, and gross motor skills that support individuation. The infant engages in small actions, such as grasping their own feet or holding their caregiver's hand. At this stage, the infant experiences their ability to influence their immediate environment through the expression of basic emotions (e.g., crying or laughing), even if they are not yet conscious of this ability. Moreover, infants develop a desire to explore their surroundings and become increasingly aware of “the other.” In this initial stage, caregivers are tasked with being present and accessible to provide safety and foster trust.

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During the second stage, the child becomes more aware of their ability to act independently as an autonomous being[100].The author describes how this still-dependent child begins to experience their autonomous will with the support of their environment. In this stage, the child prepares to stand more firmly on their own. Additionally, the child learns to categorise their world using concepts like "I," "you," "me," and "mine" [101]. Discovering the external world aids further development and aligns with physical growth: the child becomes stronger, walks independently, and develops language skills[101]. A negative outcome of this stage could be the child becoming overly determined to obtain what they desire, potentially leading to a tendency to dominate and control their parents in areas where co-regulation may be lacking[101].

In this second stage, caregivers should encourage the child to "stand on their own feet" [100]. while fostering a sense of independence and free will. At the same time, caregivers must help the child avoid misusing their willpower, which could result in feelings of shame and doubt[101]. While the first two stages focus on asserting one's will and resisting dependency, the third stage of initiative introduces the quality of undertaking actions. The child becomes more active, and interactions with siblings and peers grow increasingly important[101]. This active state predominates the child's behaviour during this stage; establishing a sense of initiative leads to a feeling of purposefulness in life. Caregivers should encourage the child to take initiative, set goals, and pursue those goals, while sometimes needing to provide gentle restraint without discouragement[100]. [101].

2.2.2 Bowlby's Attachment Theory

Edward John Mostyn Bowlby (1907–1990) was the son of Sir Anthony Bowlby, a prominent London surgeon. After a brief stint as a naval cadet, he matriculated at Trinity College, Cambridge, where he studied natural sciences and psychology. He then worked in a school for

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boys with psychiatric difficulties before completing his medical training and qualifying as a child psychiatrist; during the Second World War, he served as a psychiatrist on the War Office Selection Board. In the postwar years, Bowlby became Deputy Director of London's Tavistock Clinic, a leading centre for child psychiatry and psychotherapy. Soon after his 1928 graduation, he embarked on systematic observations of separation and anxiety in two young boys at a remedial home, work that formed the basis of his groundbreaking "Attachment Theory" [102] [103].Rejecting Melanie Klein's focus on children's inner fantasies, Bowlby instead insisted that psychoanalysis be anchored in empirical studies of family relationships and upheld by rigorous scientific research.

Attachment theory, formulated by John Bowlby, is a cornerstone in the field of developmental psychology. It provides insights into the deep emotional bonds formed between infants and their caregivers, shaping their social and emotional development throughout life[103]. This theory emphasises the critical role of early relationships in shaping an individual's sense of security, trust, and emotional regulation. Over the years, Bowlby's ideas have evolved and been enriched by empirical research, contributing significantly to our understanding of human relationships. Bowlby proposed that attachment is an innate evolutionary mechanism essential for survival, initially observed in infants' instinctive behaviours to seek proximity and contact with their caregivers[104].

Attachment: Attachment refers to the enduring emotional bond formed between an infant and their primary caregiver, typically the mother. This bond provides the infant with a secure base from which to explore the world and regulates distress through proximity seeking.

Attachment Behavioural System: Bowlby suggested that attachment behaviours, such as crying, clinging, and smiling, are adaptive responses aimed at ensuring proximity to the caregiver. These

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behaviours are triggered by perceived threats or separation from the caregiver and are crucial for maintaining the caregiver-infant bond.

Internal Working Models: According to Bowlby, early experiences with caregivers shape internal working models, cognitive representations of the self, others, and relationships. These models influence individuals' expectations of relationships, affecting their interpersonal behaviours and emotional regulation throughout life.

Strange Situation Procedure: Mary Ainsworth developed the Strange Situation Procedure, a laboratory-based assessment, to observe attachment behaviours in infants. It categorises attachment styles into secure, insecure-avoidant, and insecure-resistant, providing insights into the quality of the caregiver-infant relationship[105].

Attachment theory informs clinical practice, guiding interventions aimed at promoting secure attachment relationships and addressing attachment-related difficulties, such as attachment disorders and relational trauma. Understanding attachment processes helps parents and caregivers provide sensitive and responsive caregiving, fostering secure attachment bonds that promote children's socio-emotional development and resilience. Attachment theory offers valuable insights into adult romantic relationships and friendships, highlighting how early attachment experiences influence intimacy, trust, and conflict resolution in interpersonal interactions[106]. Advances in neuroscience have provided empirical support for the neurobiological underpinnings of attachment, elucidating how early relational experiences shape brain development and emotional regulation systems. Longitudinal studies have demonstrated the intergenerational transmission of attachment patterns, highlighting how parents' attachment styles influence their caregiving behaviours and their children's attachment security. Cross-

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cultural research has revealed variations in attachment patterns across cultures, emphasising the role of cultural norms and socialization practices in shaping attachment dynamics[107].

Randomised controlled trials have evaluated the efficacy of attachment-based interventions, such as attachment-focused parenting programs and therapeutic interventions for children with attachment difficulties, demonstrating positive outcomes in promoting secure attachments and improving socio-emotional outcomes. Neuroimaging studies have identified neurobiological correlates of attachment, showing associations between attachment security and brain regions involved in emotion regulation, social cognition, and stress response systems[108].

Bowlby's research must be understood within a longstanding tradition examining early caregiver–infant bonds. His seminal 1944 investigation involved forty-four children aged five to sixteen who had been referred to the Tavistock Clinic for theft, yielding conclusions about the roots of their behaviour that were at the time widely criticized for methodological shortcomings, shortcomings which Bowlby himself acknowledged [103].

Building on these early insights, Bowlby introduced the concept of "monotropy," positing that a child's primary attachment to a single caregiver, most often the mother, is critical for developing what he termed a "secure attachment." Influenced by Konrad Lorenz's 1935 studies of imprinting in geese, Bowlby argued that human infants, too, seek comfort from the most readily available figure capable of meeting their emotional needs, a role he assigned innately to the mother [103] [109]. From a modern vantage point, however, it appears overly simplistic, and ethically dubious, to extrapolate a comprehensive theory of human development from animal models and observations of children with significant developmental challenges [103] [109].

Furthermore, Bowlby maintained that a child's behaviour emerges from an interaction between environmental conditions, such as perceptions of safety in the face of potential threats, and the

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child's own temperament (e.g., hunger or discomfort). He described how stress levels rise or fall in response to the caregiver's reaction to the child's proximity-seeking behaviours, which manifest when the infant is "strongly disposed to seek proximity to and contact with that individual … especially in certain specified conditions" [110] [103].

Contemporary Attachment Theory has since evolved into a multidisciplinary framework, uniting diverse theoretical strands under the umbrella of attachment, thereby cementing Bowlby's status as its principal architect. Although many of his specific propositions have been critiqued, no serious commentator disputes his foundational role. Modern iterations, while sometimes only distantly related to the positions he articulated in Child Care and the Growth of Love (1953) and its follow-up trilogy, nonetheless retain the core insight of attachment as a "profoundly developmental approach" to human relationships[103].

John Bowlby believed that children's behaviour is influenced by both environmental conditions, specifically, how they perceive their safety in the face of potential threats, and their own temperament, such as whether they are hungry or in pain110. The key point is that a child's level of stress is heightened or alleviated depending on how the adult, particularly the mother in Bowlby's view, responds to the child's requests for attention. As Bowlby noted, the demand for attention is evident when the infant is "strongly disposed to seek proximity to and contact with that individual... especially in certain specified conditions"[103].

Modern Attachment Theory encompasses a range of disciplines that center around attachment, Bowlby's core focus. While numerous critics have raised issues regarding various aspects of Bowlby's work, none dispute his role as the principal architect of attachment theory's conceptual framework. Many contemporary interpretations are only indirectly related to the ideas he presented in Childcare and the Growth of Love and his subsequent trilogy on Attachment

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Theory. One influential account summarizes the design of Modern Attachment Theory as a "profoundly developmental approach"[103].

Attachment theory serves as a foundational construct for understanding human bonding, crystallising in John Bowlby's synthesis of concepts from psychoanalysis, developmental psychology, and ethology. This interdisciplinary exchange, particularly Bowlby's interest in Konrad Lorenz's concept of imprinting, has been explored through historical and biographical studies, yet a detailed theoretical examination of the relationship between imprinting and attachment remains insufficient. This theory seeks to address this gap by investigating the connections between these constructs[109]. It critically reviews the general theories of imprinting, human imprinting specifically, and attachment, highlighting distinctions between supra-individual and individual bonding aspects, the relevance of 'proto-attachment' phases prior to achieving 'proper' Bowlbyan attachment, and the role of communicative signals during early developmental phases[103].

Attachment theory is arguably the leading contemporary scholarly framework for conceptualising and investigating human bonding, supported by a substantial body of literature that focuses, though not exclusively, on the various attachment styles identified by Ainsworth and Wittig and their implications throughout human life. Indeed, attachment styles, have been employed to study the entire adult lifespan, including early adolescence, adulthood, and old age[110 111 112]. The original emphasis on attachment to parental figures has expanded to include romantic partners, siblings, children, friends, and adult relationships, as well as the influence of attachment on parenting styles[113 114]. The neuroscience of attachment has also gained significant traction[110]. Today, attachment theory is central to research in clinical applications, adult psychopathology, and increasingly in learning and pedagogy[103].

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The theory's robustness and influence can be partially attributed to Bowlby's foundational work in grounding it in contemporary scientific research and his efforts to bridge multiple disciplines[103]. Bowlby incorporated key ideas from ethnologist Konrad Lorenz, particularly the theory of imprinting[103], and successfully integrated them with psychoanalytic developmental theories of object relations[112]. This successful integration occurred during a favourable period of interdisciplinary openness in the 1950s and 60s, which included many notable figures from both ethnology and psychoanalysis. While previous studies have approached this period through historical and biographical lenses, this article aims to refocus academic attention on the intellectual foundations of Bowlby's theories by examining how the theories of imprinting and attachment can be understood in relation to one another. Unlike prior works, this article will not adopt a historical or biographical perspective but will instead take a precise theoretical approach. Although existing literature and the author's formulation of attachment theory indicate a significant overlap between this theory and human imprinting, Bowlby himself did not explicitly articulate a reciprocal relationship between the two concepts, perhaps due to their apparent similarities[103]. Thus, the goal of this article is to provide a clearer and more precise understanding of the relationship between these two constructs than has previously been presented.

In this context, John Bowlby began to explore Lorenz's work and developed an interest in ethnology. While Bowlby had gathered a substantial amount of observational data, his conclusions were not yet definitive, partly due to a lack of experimental validation and a comprehensive theoretical framework[103]. Conversely, Lorenz became interested in Bowlby's findings, which largely supported his own theories.

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The author describes attachment as a category of social behaviour that prompts children to seek proximity to their primary caregiver[103]. Attachment behaviour consists of two fundamental components: the act of maintaining or restoring closeness to someone, and the specificity of that individual. In opposition to the concept of instinct and in alignment with contemporary ethology, analytical biology, and control theory, Bowlby viewed the bond between a child and their caregiver as the outcome of several behavioural systems aimed at achieving proximity as a predictable objective. A crucial aspect that enables an organism to fulfil such an adaptive, goal-directed system is the concept of feedback[103]. Although this idea is borrowed from disciplines outside the study of organisms, Bowlby believed it was applicable to living beings, including humans, who evolved within their own "environment of evolutionary adaptedness."

In line with the author's ideas, and as a replacement for the contentious notion of instinct, any biological characteristic that develops with minimal influence from environmental variations was termed "environmentally stable," as opposed to "labile." This perspective applies to fixed action patterns (FAPs) such as clinging, following, or smiling. Additionally, a system's sensitivity to its environment can change over time, leading Bowlby to favour the concept of "sensitive periods" rather than Lorenz's original notion of "critical periods"[103].

According to Bowlby, an infant's ability to seek proximity (the first component) cannot truly be classified as attachment behaviour until it is directed toward a specific individual (the second component). He noted that human infants are equipped with multiple behavioural systems from birth. First, they possess a perceptual apparatus that directs them toward their caregivers. Additionally, effectors such as hands, feet, head, and mouth facilitate interpersonal contact. Thirdly, Bowlby identified what he termed "signaling equipment," including vocalizations, neonatal crying, and limb gestures. These behaviours are crucial during the initial phase of the

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attachment process, which is characterised by orientation and signals with limited discrimination among figures. Typical behaviours include orienting toward people, grasping, reaching, eye tracking, babbling, and smiling. Collectively, these behaviours aim to maximize opportunities for and the duration of proximity by influencing the caregiver[103].

The author proposed four stages of attachment development that a child experiences within the first three years of life. Ainsworth, who collaborated closely with Bowlby, assigned specific titles to these phases. Three of the stages occur within the first year of life, while the fourth stage takes place toward the end of the third year or the beginning of the fourth year[103]. The stages are:

Pre-attachment

Attachment in the making

Clear-cut attachment

Goal-corrected partnership

Bowlby believed that how a child navigates these phases of attachment development significantly impacts their self-worth. The evolution of attachment theory is crucial as it offers insights into how secure attachments formed during early childhood can support future brain development[103]. An infant's brain is shaped by early experiences, and the quality of these interactions has profound implications for development. Attachment relationships are vital for helping children realize their potential and influence their future physical and mental well-being[103].

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2.2.3 Bandura's Social Cognitive Theory

Albert Bandura's Social Cognitive Theory (SCT) is a prominent framework in psychology that highlights the reciprocal interactions among cognitive, behavioural, and environmental factors in shaping human behaviour and development. Established in the 1960s, SCT has been refined and expanded over the years, providing valuable insights into various dimensions of human behaviour, such as learning, motivation, and personality development[115].

At the heart of SCT is the concept of observational learning, where individuals learn new behaviours or skills by watching and imitating others. Bandura identified four essential components of this learning process: attention, retention, reproduction, and motivation. Attention involves the individual's concentration on the behaviour of a model; retention pertains to the ability to remember the observed behaviour; reproduction refers to the capacity to replicate the behaviour, and motivation assesses the likelihood of imitating the behaviour based on its outcomes.

Another crucial element in SCT is self-efficacy, which denotes an individual's belief in their capability to successfully perform a specific task or behaviour[116]. Bandura emphasised that self-efficacy significantly influences behaviour, motivation, and achievement. Individuals with high self-efficacy are more inclined to set ambitious goals, persist through challenges, and attain desired results compared to those with lower self-efficacy[115].

Bandura asserted that human behaviour is shaped by the ongoing interaction between personal factors (such as cognition and emotion), environmental factors (including social norms and situational cues), and the behaviour itself. This principle of reciprocal determinism posits that individuals not only react to environmental stimuli but also actively affect their surroundings through their thoughts, actions, and choices. SCT underscores the dynamic interplay among

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personal factors, behaviour, and environment, a concept known as triadic reciprocal causation. According to this framework, changes in one factor can precipitate reciprocal changes in the others[115]. For instance, a person's beliefs about their self-efficacy can influence their behaviours and the environments they engage with, which in turn can affect their self-efficacy beliefs[115].

Bandura's Social Cognitive Theory has received substantial empirical support across diverse fields of psychology, including education, health, organisational behaviour, and social psychology.

Numerous studies have demonstrated the effectiveness of observational learning in explaining behaviour acquisition and socialization processes. For instance, research in educational settings has shown that students often learn new skills by observing their peers or teachers, highlighting the importance of modelling and imitation in learning. Moreover, studies examining self-efficacy beliefs have consistently found associations between individuals' perceived competence and their behavioural outcomes. High levels of self-efficacy have been linked to better academic performance, greater job satisfaction, increased resilience in the face of adversity, and improved health behaviours[116]. Conversely, low self-efficacy has been associated with feelings of helplessness, decreased motivation, and avoidance of challenging tasks. Furthermore, research on reciprocal determinism has provided empirical evidence for the bidirectional influences between individuals and their environments. For example, longitudinal studies have shown that adolescents who engage in prosocial behaviours are more likely to be accepted by their peers and receive social support, thereby reinforcing their positive behaviours. Similarly, individuals' environmental experiences can shape their beliefs, attitudes, and behavioural tendencies over time[115].

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Bandura's Social Cognitive Theory has practical implications for various fields, including education, psychotherapy, health promotion, and organisational management. By understanding the mechanisms of observational learning, educators can design more effective instructional strategies that incorporate modelling, peer tutoring, and vicarious reinforcement to facilitate skill acquisition and behaviour change in students. In psychotherapy, interventions informed by SCT principles focus on enhancing clients' self-efficacy beliefs and teaching coping skills through modelling and guided practice[116]. Cognitive-behavioural therapies, such as social skills training and exposure therapy often utilise techniques derived from SCT to help individuals overcome phobias, anxiety disorders, and other psychological challenges. In the realm of health promotion, SCT serves as a framework for designing interventions aimed at promoting positive health behaviours and preventing risky behaviours. For example, interventions targeting smoking cessation, physical activity promotion, and HIV prevention often incorporate strategies to enhance individuals' self-efficacy for adopting and maintaining healthy behaviours. Moreover, in organisational settings, SCT principles can inform leadership development programs, team-building initiatives, and performance management strategies[117]. By fostering a supportive environment that encourages mastery experiences, social modelling, and constructive feedback, organisations can enhance employees' self-efficacy and motivation, leading to improved job performance and job satisfaction[116].

In recent years, scholars have expanded upon Bandura's Social Cognitive Theory and applied its principles to emerging areas of research, such as digital media, virtual reality, and neurocognitive processes. With the proliferation of online platforms and social media networks, researchers have begun to investigate how observational learning occurs in virtual environments and how it influences behaviours such as information sharing, opinion formation, and consumer choices[115].

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Furthermore, advancements in neuroimaging techniques have provided insights into the neural mechanisms underlying observational learning and self-efficacy processes. Studies using functional magnetic resonance imaging (FMRI) have identified brain regions involved in social cognition, empathy, and perspective-taking, shedding light on the neural basis of social learning and interpersonal influence. Additionally, researchers have explored the role of cultural factors in shaping self-efficacy beliefs and behavioural outcomes across diverse populations. Cross-cultural studies have revealed cultural variations in the sources of self-efficacy, the importance of collectivist versus individualistic values, and the effectiveness of intervention strategies tailored to specific cultural contexts[116].

Social Cognitive Theory posits that behaviour is shaped by the ongoing interaction among personal knowledge, skills, attitudes, interpersonal relationships, and environmental factors[118]. While most sexuality education curricula focus on cognitive learning, knowledge alone is insufficient to effect behavioural change. Consequently, sexuality education programs that utilise Social Cognitive Theory incorporate opportunities for behavioural skills practice and the positive modelling of sexual behaviours[118]. By engaging in practice and modelling, students can enhance their self-efficacy, the belief in their ability to change behaviours, even when faced with challenges or obstacles.

A typical activity in sexuality education based on Social Cognitive Theory might involve role-playing, where participants demonstrate and practice skills to resist and avoid pressure to engage in unprotected sex[115]. The framework of Social Cognitive Theory provides a conceptual basis for understanding how these various factors interact to influence young adults' sexual health. Rather than suggesting that behaviour is influenced in a one-directional manner by personal or environmental factors, SCT highlights the concept of triadic reciprocal causation, emphasising

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that personal determinants (including knowledge and perceived self-efficacy), behavioural determinants, and environmental health factors are all interconnected[115].

However, critics of sexuality education argue that using Social Cognitive Theory in this context encourages role-playing behaviours taught in the classroom, which may lead young people to experiment with sexual activity at an early age, regardless of whether it is safe or unsafe, thus opposing many cultural and religious values within society[116].

Albert Bandura (1925–present) was born in Mundare, Alberta, Canada, in 1925. He attended the University of British Columbia, graduating in 1949 with the Bolocan Award in psychology. Bandura then pursued his graduate studies at the University of Iowa, which was a significant center for psychological research, particularly in social learning theory[118]. He earned his Master's degree in 1951 and subsequently completed his Ph.D. in clinical psychology in 1952. After obtaining his doctorate, Bandura held a postdoctoral position at the Wichita Guidance Center before accepting a faculty position at Stanford University in 1953. Over the years, he has researched various topics, including adolescent aggression, children's abilities to self-regulate and reflect, and, notably, self-efficacy[117].

Social Cognitive Theory emerged as a response to behaviourism and cognitive theories in the late 1950s and early 1960s, which faced challenges on multiple fronts[119]. The author contended that excluding mental processes from explanations of human learning is akin to ignoring passion in discussions of sex; while one might describe the mechanics, the essence would be overlooked[119]. Social Cognitive Theory concurs with behaviourists that humans, like rats and rabbits, are governed by the principles of operant and classical conditioning. However, it emphasises that humans, unlike these animals, possess attitudes, beliefs, and expectations that

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significantly influence how they acquire information, make decisions, reason, and solve problems[117].

One of the major critiques of behaviourism stemmed from research on observational learning conducted by Bandura and his colleagues. A key finding of this research was that individuals could learn new behaviours simply by observing others perform them, without needing to engage in the actions at the time of learning or requiring reinforcement for learning to occur. These results challenged fundamental tenets of conditioning theories[119].

Such studies highlighted the importance of modeling in acquiring new behaviours and provided early evidence for differentiating between learning and performance. They also underscored the significance of the learner's perceptions of their environment, the individual modeling a specific behaviour, and the learner's expectations regarding the potential consequences of that behaviour.

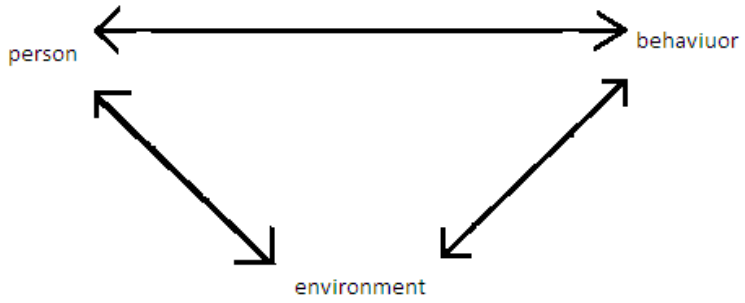
By the mid-1970s, this research laid the groundwork for what Bandura initially termed observational learning theory, which later evolved into social learning theory[115]. This framework established a comprehensive model for understanding how individuals learn through the observation of models. Ultimately, as noted in the preface to his 1986 work, Social Foundations of Thought and Action: A Social-Cognitive Theory, Bandura opted for the term "social cognitive theory" to encompass the broader motivational and cognitive processes involved, rather than sticking with social learning[119].

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Assumptions of the Theory

Author assets[115] that Social Cognitive Theory assumes:-

- Reciprocal interaction among person, behaviour and environment. The theory believes that in learning and performance there is mutual interaction between personal factors (cognition), environmental variables and behaviours. Therefore that mutual interaction is termed as "*triadic reciprocality*" or three factors interaction.



Enactive and Vicarious Learning: Learning occurs through direct engagement (enactive learning) or indirectly by observing others (vicarious learning). Enactive learning involves gaining insights from the outcomes of one's actions, where successful results are retained while unsuccessful ones are discarded. In contrast, vicarious learning takes place without the learner actively performing the behaviour during the learning process. Sources of vicarious learning include observing and listening to models, whether they are present in person or represented through media such as television and books.

The Distinction Between Learning and Performance: This theory asserts a clear differentiation between learning and performance, unlike behaviourists who view learning as merely the association of responses with stimuli or the reinforcement of responses. According to this theory, learning is influenced by various factors, including motivation, interest, incentives to perform,

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perceived needs, physical condition, social pressures, and competing activities. Therefore, reinforcement impacts performance rather than the learning process itself.

The Role of Self-Regulation: The theory posits that individuals possess the ability to influence their own behaviour and environment in a purposeful, goal-directed manner[116].

This framework integrates a wide array of distinct ideas, concepts, and sub-processes into a cohesive understanding of human functioning. The five central concepts are outlined below.

Observational Learning/ Modelling.

Observational learning

According to Social Cognitive Theory, several conditions must be met for observational learning to occur: attention, retention, reproduction, and motivation.

Attention: For observational learning to happen, students must focus on the model and the relevant aspects of the behaviour to effectively learn. Retention: This process involves encoding and transforming the observed behaviour into a symbolic form that can be stored for future use. The author emphasises that in the retention phase, it is essential for individuals to remember the behaviours they have witnessed. Students who are attentive tend to retain information more effectively[115]. Reproduction: This refers to the ability to replicate the observed behaviour[115]. It is crucial when students access their stored representations and attempt to perform what they have learned. Motivation: The consequences of actions play a significant role in informing individuals about the accuracy or appropriateness of their behaviour. Those who succeed or receive rewards recognize that they are performing well, while those who fail or are punished understand that they are not meeting expectations and may seek to rectify the issue. Thus, consequences serve as a key motivator for learning[115]. These processes are further influenced by factors such as the

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developmental stage of the learner and the characteristics of both the model and the behaviour being modelled. It is important to note that observational learning relies on the availability of models.

Modelling

Modelling is essential for understanding when and why learners exhibit learned behaviours. Students may hold back from engaging in behaviour if they witness a model facing negative consequences they wish to avoid. Conversely, learners may decide to engage in a behaviour they initially suppressed if they observe a model experiencing no negative repercussions. For example, if a teacher reprimands one student for speaking out of turn, other students may choose to suppress that behaviour to avoid a similar response. Similarly, students might refrain from answering questions unless called upon, until they observe others doing so without facing consequences.

Within the modelling process, there are various types of models. Mastery models demonstrate a skill proficiently, effectively showcasing the desired behaviour. In contrast, coping models struggle and make mistakes before eventually achieving proficiency. Abstract modeling involves conveying skills or knowledge indirectly, while cognitive modeling occurs when a model articulates their thought processes while demonstrating a cognitive skill or task.

Outcome Expectation

Outcome expectations represent individuals' beliefs about the likely consequences that will result from performing specific behaviours. For example, children may believe that achieving high scores on exams will lead to being taken to parliament, feeling good about themselves and

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gaining admiration from their peers and society. These beliefs are shaped both through personal experiences (enactive learning) and by observing others (vicarious learning)[115].

Outcome expectations are critical in Social Cognitive Theory because they influence the choices individuals make regarding which actions to pursue and which behaviours to avoid. When the anticipated outcomes are valued, the frequency of a behaviour is likely to increase; conversely, behaviours linked to unfavourable or irrelevant outcomes will be minimized[115]. Generally, students develop their own expectations regarding learning, which drive their performance, influenced not only by reinforcement (rewards and punishments) but also by personal values.

Instruction should assist students in recognizing that classroom learning and the demonstration of that learning can lead to personally valued outcomes. At the classroom level, what learners achieve and experience helps them cultivate high personal values and expected outcomes as a result of their education. Demonstrations that emphasise learning through observation, followed by practice and drilling, are essential for enabling learners to engage in activities both individually and in groups[116]. For instance, when teaching a civics lesson about democratic elections, a teacher might select students to demonstrate how to campaign. When learners engage in such activities repeatedly, they may develop an interest in related careers and set their expectations accordingly.

Perceived Self-efficacy

Self-efficacy refers to individuals' beliefs about their capability to achieve a certain level of success in a specific task. In alignment with the principles of Social Cognitive Theory, self-efficacy is shaped by an individual's past performances, the observation and encouragement from others in their environment, and their ongoing physiological state[116]. Students with higher self-efficacy tend to be more confident in their abilities compared to their peers with lower self-

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efficacy. This concept has been valuable in understanding students' motivation and achievement in academic settings. Elevated levels of perceived self-efficacy are correlated with increased choice, persistence, and the use of effective strategies. When students believe in their capacity to successfully complete academic tasks, they are generally more engaged, diligent, and effective learners.

At the institutional level, programs such as guidance and counseling play a vital role, where teachers assist students in solving various issues, including social, academic, health, psychological, and developmental challenges. Such support helps students cultivate a pattern of success that enhances their self-efficacy. Additionally, self-efficacy can be bolstered when students are exposed to peer models who initially face difficulties but ultimately succeed in completing tasks effectively (i.e., coping models)[115].

Goal Setting

The author asserts that goals represent cognitive representations of anticipated, desired, or preferred outcomes[117]. Thus, goals exemplify the agentic perspective within Social Cognitive Theory, suggesting that individuals not only learn but also engage in forethought to envision the future, identify desired outcomes, and create plans of action. Additionally, goals are closely related to students' outcome expectations and their perceived self-efficacy. Ultimately, goals serve as a crucial foundation for self-regulation, as they provide objectives for students to strive toward and benchmarks against which to assess their progress[120].

Self-regulation

Self-regulation refers to individuals' desire “to control the events that affect their lives” and to view themselves as agents. This agency is reflected in intentional actions, cognitive processes, and emotional responses[115]. Models of self-regulation within Social Cognitive Theory posit that

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self-regulation is contingent upon goal setting, as students are believed to manage their thoughts and behaviours to achieve specific outcomes. Without clear goals and a sense of self-efficacy, students struggle to regulate their actions effectively. Additionally, modeling can influence students' self-regulated learning. Self-regulation unfolds in three phases: forethought, performance control, and self-reflection. Bandura identifies three core processes involved in self-regulation: self-observation, self-judgment, and self-reflection[116].

Social Cognitive Theory integrates elements of behaviourism with insights into thoughts, values, expectations, and intentions. It argues that people not only adopt behaviours from their environments but also imitate others and reflect on the events occurring around them. This theory can assist individuals in overcoming undesirable habits and developing more positive ones, as well as enhancing motivation and self-confidence in learners. Overall, while the theory is beneficial for the teaching and learning process, its applicability in Tanzania is limited due to environmental and economic challenges. Furthermore, Social Cognitive Theory alone may not facilitate meaningful learning, suggesting the need to combine it with other learning theories for more effective teaching and learning outcomes[115].

2.3 Review of Empirical Studies

2.3.1 Parental Involvement and Psychosocial Adjustment

There is a prevalent belief in society that parental involvement significantly impacts students' psychosocial adjustment. Student learning occurs not only in schools but also within the contexts of families and communities, which play a crucial role[121]. Consequently, parental involvement is considered vital for students' learning and psychosocial well-being. The relationship between parental involvement and psychosocial adjustment has been a longstanding area of research globally[122].

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Empirical studies and meta-analyses have established a strong link between parental involvement and psychosocial adjustment, often indicating a positive influence. Despite the research backing and widespread agreement on the beneficial effects of parental involvement on psychosocial adjustment, there remains confusion regarding the definition of parental involvement, as well as its associated activities, types, and outcomes[123]. While many view parental involvement as a remedy for educational challenges, inconsistencies exist in findings regarding its effects on psychosocial adjustment. The literature includes studies that report a positive relationship, as well as those indicating a negative relationship or no relationship at all[123].

This study investigates the impact of parental involvement on students' psychosocial adjustment. Previous research has identified a positive correlation between these two factors. For example, one author analysed data from a sample of 498 parents with children in the second and third grades across sixteen elementary schools, finding that high levels of parental involvement enhanced students' psychosocial adjustment, particularly in social relationships and communication[124.] Another study revealed that low parental involvement in activities related to psychosocial adjustment adversely affected students' academic outcomes[124]. Similarly, another author reiterated these findings[125], exploring the role of parental involvement in improving high school students' psychosocial adjustment. By analysing data from 13,200 student-parent dyads obtained from a High School Longitudinal Study, the author demonstrated that parental involvement positively influenced students' psychosocial adjustment and academic achievement[125]. Thus, this study will present the background of the problem under investigation, including the problem statement, purpose statement, theoretical framework, research question, and significance of the study.

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One author conducted quantitative research with a sample of 825 youths to examine the role of parental involvement in psychosocial adjustment[126]. The results indicated that parents who directly assisted their children with homework positively affected their psychosocial adjustment, performance, and attendance. Similar findings emerged from a systematic review analysed 75 studies and concluded that parental involvement enhances students' psychosocial adjustment[127]. This was further corroborated by another scholar[128], who examined a quantitative sample of 116 secondary students along the US/Mexico border and found that parental involvement improved students' psychosocial adjustment and socialization[126 127 128]. Therefore, it is evident that parental involvement has a positive effect on students' psychosocial adjustment.

Parents often hold specific academic expectations for their children and actively engage in helping them meet those expectations. For instance, one author investigated the relationships among parental expectations, parental involvement, and students' psychosocial adjustment[129]. The study found that achievable expectations enhanced students' psychosocial adjustment by serving as short-term goals or motivators. Another author confirmed that parents significantly influence their children's psychosocial adjustment by setting realistic expectations[130]. Additionally, an analysis of data from 25 semi-structured interviews highlighted how parental involvement bolstered students' psychological well-being and improved their psychosocial adjustment[131].

Further evidence of the importance of parental involvement in students' psychosocial adjustment was provided by a scholar who collected and analysed quantitative data from 528 single mothers[132]. The findings indicated that home-based parental engagement positively impacted the psychosocial adjustment of kindergarten children. Another author concurred[133] with this conclusion, emphasising the positive association between parental involvement and improved

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psychosocial adjustment[132]. Conducting a meta-analysis of 40 quantitative and qualitative studies, one author found that parental involvement aided immigrant students in achieving high scores in reading and speaking English as a second language[133]. Consistent with these findings, another author examined 23 published studies to investigate the relationship between parental involvement and psychosocial adjustment[134.] Agreeing with earlier scholars133 and another author[132], the findings suggested that parental involvement facilitated students in reaching their educational goals and achieving reading fluency, which was associated with enhanced psychosocial adjustment[134].

Home-based parental involvement has been shown to positively affect students' psychosocial adjustment. For example, one author explored the relationship between the psychosocial adjustment of primary school students and home-based family involvement using a quantitative sample of 96 children from various primary education levels[135]. The study revealed that family involvement had an insignificant impact on students' psychosocial adjustment, noting that students with employed parents and stable financial situations performed better than those without such support. In contrast, another author investigated the effects of parental involvement on the psychosocial adjustment of elementary school students using a sample of 450 students, 66 of whom were diagnosed with autism spectrum disorder[135]. The findings indicated that home-based parental involvement positively influenced and improved psychosocial adjustment[136].

In addition to home-based involvement, researchers have examined the impacts of school-based involvement on students' psychosocial adjustment. School-based involvement encompasses the interactions and communication between parents and teachers, as well as parental participation in various school activities[137]. Parents engage in school-based activities, such as volunteering and attending conferences organised by educators and other stakeholders[137]. Scholars have

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established that, similar to home-based involvement, school-based involvement is crucial for students' psychosocial adjustment. Previous research, including that by one author, demonstrated that school-based parental involvement enables parents to network, receive training to assist their children with assignments, and enhances student adjustment and attendance[138].

Parental involvement has also been found to improve the psychosocial adjustment of African American students. A study by one scholar supported this notion by investigating the significance of home-based parental involvement among low-income African American mothers[139]. Analysing data from 20 semi-structured interviews, the author found that such involvement adequately prepared students for the transition to elementary school[139]. Another author conducted a longitudinal study with 944 students from both public and private schools to investigate the relationship between home-based and school-based parental involvement and student psychosocial adjustment. The findings revealed that both forms of involvement enhanced students' academic performance, as reflected in higher psychosocial adjustment scores[140].

Active parental participation in various school activities has been shown to enhance students' psychosocial adjustment at multiple levels. Researchers have reported that involving parents in school activities boosts students' psychosocial adjustment and raises teacher morale[141]. Other scholars have also found that parental involvement leads to improved psychosocial adjustment[142], reduced unnecessary absenteeism[243], and increased students' confidence and adjustment in academic settings[144]. Similarly, one author asserted that parental involvement promotes active student engagement in the classroom, thereby enhancing students' psychosocial adjustment[145].

While the advantages of parental involvement are well-documented, some scholars have noted that overly controlling and involved parents may hinder students' freedom in engaging with their

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peers, negatively affecting their psychosocial adjustment[146] [147]. Some students have reported elevated levels of psychosocial adjustment and academic pressures due to high expectations set by their parents[148][149]. Given the benefits and drawbacks associated with parental involvement[150], it is worthwhile to review strategies aimed at encouraging parents to participate in school activities[151].

Empirical research has largely demonstrated that the relationships among the four parenting styles and various criteria of child psychosocial adjustment remain consistent across demographic variables such as age and sex[146]. This suggests that a particular parenting style may yield better outcomes regardless of the child's or parent's sex or age. However, significant inconsistencies exist in the literature regarding how parental behaviour during socialization impacts children's psychological adjustment and well-being148. While most studies conclude that parental behaviour grounded in affection (high acceptance/involvement) correlates with optimal psychological adjustment[144,] the combination of affectionate behaviour with strict or authoritarian approaches raises questions about their impact on children's psychological adjustment, particularly when considering the cultural and social contexts in which these dynamics are studied[150].

2.3.2 Sexuality Education and Psychosocial Adjustment

One scholar found that young people, particularly young women, require explicit, trustworthy, and clear communication regarding sexuality within the home environment, especially given the influence of various sources of sexualized messages on young individuals' psychosocial adjustment[152]. In their study, the author reported a decrease in the rates of teenage pregnancy, sexually transmitted infections (STIs), including HIV/AIDS, and abortions among young adults aged 15-24 when sexuality education was introduced in several European countries, positively

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affecting psychosocial adjustment[153]. With the rising incidence of sexual assault, it is essential to expand the objectives of sexuality education beyond merely reducing pregnancy and STI rates; it must also address harmful traditional practices and promote positive psychosocial adjustment regarding gender and sexual norms[154]. The effectiveness of sexuality education is enhanced when parents, educators, schools, and youth services collaborate with programs from educational institutions[155]. To support healthy sexual development, schools and families need to work together to meet adolescents' educational needs regarding human sexuality[154].

Numerous studies have investigated the effectiveness of various sexuality education programs in fostering healthy sexual behaviours and psychosocial adjustment among adolescents. For instance, a meta-analysis conducted by one scholar found that comprehensive sexuality education programs, which provide information on both abstinence and contraception, were associated with a delay in sexual initiation, a reduction in sexual frequency, and an increase in contraceptive use among adolescents compared to abstinence-only programs[156].

Similarly, another study by a different scholar concluded that comprehensive sexuality education programs were more effective in lowering rates of teenage pregnancy and STIs compared to abstinence-only approaches[157]. Research has also examined the effects of sexuality education on various psychosocial factors, including self-esteem, body image, relationship satisfaction, and mental health[157]. One study indicated that participation in a comprehensive sexuality education program was linked to higher levels of self-esteem and body image satisfaction among adolescent girls[158].

Another scholar found that sexuality education contributed to healthier romantic relationships and a reduced likelihood of experiencing dating violence among adolescents[159]. The role of communication within sexuality education and its impact on psychosocial adjustment has also

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been investigated. Research indicates that adolescents who report open and supportive communication with their parents about sexuality tend to exhibit better psychosocial adjustment and engage in healthier sexual behaviours[160].

Furthermore, studies have shown that parental involvement in sexuality education programs can enhance their effectiveness and promote positive psychosocial adjustment[161]. Researchers have explored how factors such as sex education, race, ethnicity, and cultural norms affect the efficacy of sexuality education programs and their impacts on psychosocial adjustment[160]. Additionally, research has examined the influence of school and community environments on shaping adolescents' attitudes toward sexuality and their psychosocial adjustment outcomes[162].

For instance, a longitudinal study by one scholar tracked participants from adolescence into young adulthood and found that exposure to comprehensive sexuality education during adolescence was linked to positive sexual health outcomes and better psychosocial adjustment in adulthood[163]. Effective sex education within romantic relationships is critical for fostering intimacy and relationship satisfaction[164]. Research suggests that couples who openly discuss sexual matters report higher levels of relationship quality and psychosocial adjustment[165]. One study found that couples who engage in constructive communication about sex experience greater stability and longevity in their relationship psychosocial adjustment compared to those who avoid or struggle with such discussions[166]. The empirical literature on sexual communication underscores its importance in influencing psychosocial adjustment across various contexts and developmental stages[167]. Effective communication about sexual topics within romantic partnerships, families, peer groups, and educational settings is associated with numerous positive outcomes, including enhanced relationship satisfaction, delayed sexual debut, and improved sexual health[168].

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Research consistently demonstrates that open, supportive communication between parents and children regarding sexuality is linked to positive psychosocial adjustment[169]. This includes lower rates of risky sexual behaviours, improved self-esteem, and enhanced emotional well-being170. Additionally, exposure to sexual content in media, such as television, movies, and the internet, has influenced adolescents' attitudes and behaviours related to sex. Studies suggest that excessive exposure to sexualized media can negatively impact psychosocial adjustment, leading to body image issues and increased engagement in risky sexual behaviours[171].

2.3.3 Learning Motivation and Psychosocial Adjustment

Learning motivation is influenced by various subjective factors, including self-confidence, occupational excitement, responsibility, and self-control, as well as objective factors such as the social environment, learning context, family, and friends[69]. In a case study examining the learning motivation of students at Hanoi University of Science and Technology, one scholar found that learning motives, particularly self-assertion motives, are strongly affected by factors such as student responsibility and other objective influences like the social environment, psychosocial adjustment, and peer relationships[69]. However, the data analysis technique employed in that study did not effectively clarify the relationships among different learning motives or adequately evaluate which motive plays a "guiding role"[70]. This limitation was addressed in a subsequent study by another scholar, who concluded that graduate students exhibited higher internal learning motivation than external motivation due to their excitement about the challenges presented in their coursework and their desire to fully understand the knowledge and skills required for their assignments[71].

Motivation plays a crucial role in psychosocial adjustment, and many students experience difficulties in succeeding in science courses[172] [173]. Both adjustment and motivation to learn are

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key factors that influence students' success in university-level science courses[174 175]. There exists a bidirectional relationship between psychosocial adjustment and motivation for learning science, with psychosocial adjustment affecting motivation and vice versa[174]. Consequently, further research is necessary to clarify this relationship and determine the direction of the association between psychosocial adjustment and motivation for learning science[175].

Numerous individual studies[176] and several meta-analyses[177] support the hypothesis of social cognitive motivation models, which suggest that students' motivational beliefs are significantly related to their academic performance. However, to assess the relative importance of various motivational constructs for academic achievement, studies must (1) examine diverse motivational constructs within a single sample and (2) account for students' cognitive abilities and prior achievements, as these are among the strongest predictors of academic success[178]. For effective educational policy and school reform, it is vital to obtain robust empirical evidence regarding whether different motivational constructs can explain variance in school performance, independent of intelligence and prior achievement. Failing to include these constructs might lead to an overestimation of motivation's importance in achieving academic success. Demonstrating that students' achievement motivation is incrementally valid in predicting academic performance beyond intelligence or prior achievement would underscore the need for designing targeted interventions to enhance students' motivation related to school[178].

Several studies have incorporated expectancy and value components of motivation as predictors of students' psychosocial adjustment (e.g., grades or test scores) while also considering their prior psychosocial adjustment[177] or intelligence[179]. Nevertheless, only a limited number of studies have examined intelligence and prior achievement in conjunction with more than two motivational constructs as predictors of school students' psychosocial adjustment180. One

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author analysed two expectancy components (ability self-concept and self-efficacy) alongside eight value components (interest, enjoyment, usefulness, learning goals, performance-approach, psychosocial adjustment, and work avoidance) within the context of mathematics[177]. Author investigated situated perspective on self-regulated learning from a person-by-context perspective and need for psychosocial adjustment for students' grades in math and German and their effects shown in learning motivation.

Learning motivation and psychosocial adjustment are integral components of students' academic experiences and overall well-being. Several theoretical frameworks have been proposed to explain the relationship between learning motivation and psychosocial adjustment[182]. Self-determination theory (SDT), developed by author, posited that individuals are inherently motivated to fulfil their basic psychological needs for autonomy, competence, and relatedness. According to SDT, intrinsic motivation, characterised by engagement in activities for their inherent enjoyment and satisfaction, is positively associated with psychosocial adjustment, whereas extrinsic motivation, driven by external rewards or pressures, may have mixed effects on adjustment[183].

Positive correlation between intrinsic motivation and psychosocial adjustment: Numerous studies have found a positive association between intrinsic motivation (e.g., curiosity, interest, enjoyment) and various indicators of psychosocial adjustment, including academic engagement, social competence, self-esteem, and psychological well-being. Intrinsic motivation is consistently linked to adaptive coping strategies, resilience, and positive peer relationships, fostering a sense of competence and autonomy in learners.

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Mixed effects of extrinsic motivation (e.g., grades, rewards, social approval) can influence students' engagement and performance; its effects on psychosocial adjustment are more nuanced. Some studies have reported positive associations between extrinsic motivation and academic outcomes, particularly in contexts where external rewards are perceived as informative or supportive of students' competence and autonomy. However, excessive reliance on extrinsic rewards or pressure-driven motivation may undermine intrinsic motivation and hinder students' psychosocial adjustment, leading to stress, anxiety, and maladaptive coping behaviours[177].

Role of self-efficacy beliefs and task value are strong predictors of both motivation and psychosocial adjustment. Students with high self-efficacy are more likely to set challenging goals, persist in the face of obstacles, and experience positive adjustment outcomes. Similarly, task value, reflecting the perceived importance or utility of learning activities, influences students' motivation, engagement, and emotional well-being. When students perceive tasks as relevant, meaningful, and personally rewarding, they are more likely to invest effort and experience a sense of competence and satisfaction[178].

Mediating and moderating factors influence the relationship between learning motivation and psychosocial adjustment. For example, parental involvement, teacher support, peer relationships, school climate, cultural values, and individual differences (e.g., personality traits, socio-economic status) can shape students' motivational beliefs, coping strategies, and adjustment outcomes. Moreover, contextual factors such as classroom structure, instructional practices, assessment methods, and extracurricular activities can either enhance or detract from students' motivation and psychosocial well-being[179].

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For instance, a longitudinal study found that adolescents who reported higher levels of intrinsic motivation in academic pursuits exhibited greater psychological well-being and social competence over time. Similarly, research by scholar highlighted the role of intrinsic motivation in fostering adolescents' sense of psychosocial adjustment, which are critical components of psychosocial adjustment. Moreover, intrinsic motivation has been linked to higher levels of psychosocial adjustment, positive peer relationships, and lower rates of internalizing problems such as anxiety and depression[182].

Conversely, extrinsic motivation, particularly when driven by external rewards or pressure, has been associated with maladaptive outcomes and impaired psychosocial adjustment among adolescents. Author found that extrinsic rewards can undermine individuals' intrinsic motivation and diminish their sense of autonomy and competence, thereby hindering their psychosocial well-being. Consistent with this perspective, empirical studies have shown that adolescents who are excessively focused on extrinsic rewards or outcomes tend to experience greater stress, lower self-esteem, psychosocial adjustment and less satisfaction in their relationships[177].

In addition to differentiating between intrinsic and extrinsic motivation, researchers have examined the role of specific motivational orientations, such as achievement motivation and social motivation, in shaping adolescents' psychosocial adjustment. Achievement motivation refers to the desire to excel in academic or competitive contexts, whereas social motivation pertains to the desire for social approval and belongingness.

Learning motivation plays a crucial role in shaping adolescents' motivation and psychosocial adjustment. Learning motivation and support have been identified as key determinants of adolescents' psychosocial adjustment and well-being[180]. Research suggests that authoritative parenting, characterised by warmth, responsiveness, and autonomy support, fosters adolescents'

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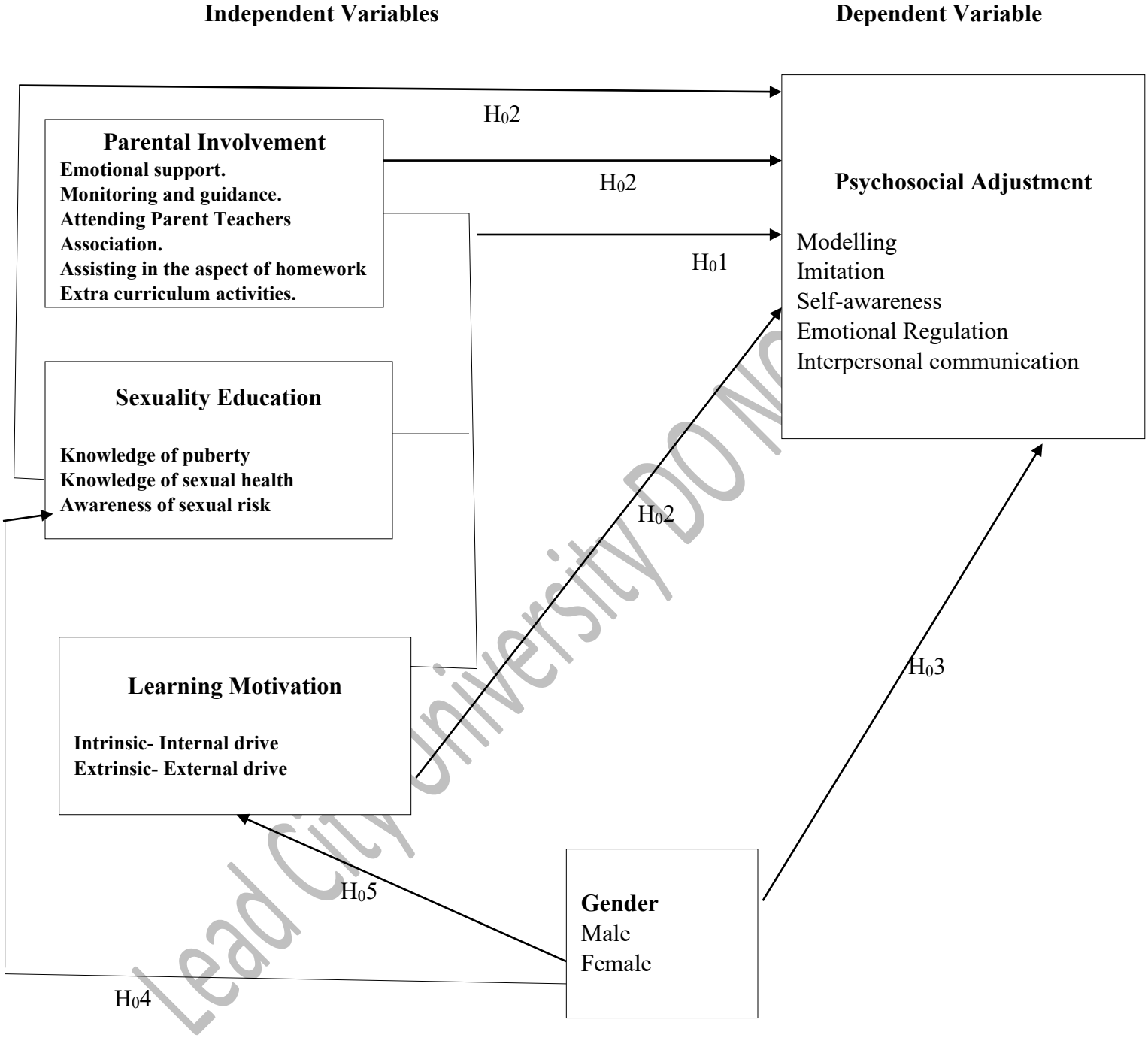
intrinsic motivation, self-esteem, and adaptive coping strategies. Moreover, family dynamics, such as parent-child conflict, marital discord, or family stress, can negatively impact adolescents' motivation and adjustment, highlighting the interconnectedness of family processes and adolescent development[179].

Research suggests that positive peer relationships characterised by friendship quality, peer acceptance, and prosocial behaviour are associated with higher levels of intrinsic motivation and psychosocial adjustment among adolescents[145]. Furthermore, the influence of motivation and adjustment is mediated by factors such as peer norms, social comparison processes, and peer pressure, highlighting the complex interplay between individual and contextual factors in shaping adolescent development[156]. Research suggests that supportive and challenging learning environments characterised by clear expectations, meaningful tasks, and opportunities for autonomy and competence promote adolescents' intrinsic motivation and positive psychosocial adjustment[183].

Conversely, negative school experiences, such as academic failure, peer conflict, or disciplinary problems, can undermine adolescents' motivation and well-being, leading to disengagement and dropout[168]. Moreover, the transition to middle or high school represents a critical period during which adolescents' motivation and adjustment may be particularly vulnerable to the challenges of academic and social demands, highlighting the importance of targeted interventions and supportive transitions[145].

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2.4 Conceptual Framework



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Fig 2.1: Conceptual Model of parental involvement, sexuality education and learning motivation as determinants of psychosocial adjustment.

Source: Researcher, 2025

2.5 Summary of Gaps in Literature Reviewed

Under the literature review section of this study, several concepts were defined and examined, including adolescents, parental involvement, sexuality education, learning motivation, and psychosocial adjustment. The meanings of these concepts in relation to the current study were also provided.

The adjustment of students to their learning environments is a significant concern for educators today, and motivating students to succeed in educational institutions remains one of the major challenges of this century. Psychosocial adjustment is a considerable barrier within the learning environment and a critical factor contributing to the decline in educational standards. Engaging students in their learning and maintaining their interest should be the primary objective of teachers in the classroom. Psychosocial adjustment has been recognized as a vital component of school connectedness, learning, and academic achievement. It is positively correlated with classroom participation, educational aspirations, enjoyment of school, the use of adaptive learning strategies, and overall academic success.

It can be argued that variations in academic motivation are inevitable. While this issue seems more prevalent in secondary schools, private institutions are not immune to this declining trend. The widespread failure rates in public examinations today hinder learners from advancing to higher educational institutions, largely due to poor psychosocial adjustment. Stakeholders in education are increasingly interested in understanding the causal factors associated with this issue. Secondary school students experiencing depression are particularly vulnerable to underachievement. Using a resource allocation model to analyse the effect of a depressed mood on cognition, it is evident that students with depressive symptoms are more likely to focus on

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distracting, irrelevant thoughts, leaving them with insufficient attention for cognitive tasks, which ultimately leads to poor psychosocial adjustment.

The literature contains numerous theories that articulate the key elements of psychosocial adjustment. These theories explain both the significance of psychosocial adjustment in educational outcomes and the role of motivation as a means to achieve other desired educational results, such as academic achievement. Notably, across this extensive literature, there are commonalities in the primary elements and stages of psychosocial adjustment. This research briefly summarizes these elements and the theories in which they are featured, followed by a focus on a multidimensional framework known as the psychosocial adjustment wheel. This framework illustrates salient motivational factors derived from major theories and research. These factors encompass positive constructs related to psychosocial adjustment, such as mastery, self-efficacy, and valuing, along with positive constructs of planning, task management, and persistence. It also includes less adaptive constructs, such as anxiety, uncertain control, and failure avoidance.

Psychosocial adjustment significantly influences students' interest in and enjoyment of their educational institutions. It also underpins their academic achievement. Given the critical role that psychosocial adjustment plays in students' academic success, it is essential to identify the factors contributing to it. Psychosocial adjustment is closely linked to students' class participation, educational aspirations, enjoyment of school, academic learning, and overall academic achievement.

This study also reviews the theoretical framework that supports the current research. The theories discussed include attachment theory, social cognitive theory, and psychosocial theory. The literature review indicates that some researchers employed descriptive survey research designs in

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their studies, while others used questionnaires as data collection instruments. Various statistical methods, including mean, percentage, t-tests, and ANOVA, were utilised for data analysis.

In this study, the researcher will employ an experimental design to analyse the research and test the hypotheses at a significance level of 0.05. The literature reviewed also highlights empirical studies conducted on academic motivation in various regions, including Nigeria, America, China, Europe, India, New York, and Canada. Research has been carried out in southwestern Nigeria concerning psychosocial adjustment, with the study focusing on the effects of adolescents, parental involvement, sexuality education, learning motivation, and psychosocial adjustment.

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Endnotes

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Chapter Three
Methodology

This chapter presents the methods and procedures for achieving the research objectives stated in this study. The research design, population of the study, the sample and sampling technique, the methods of data collection as well as data analyses were discussed.

3.1 Research Design

The study adopted the descriptive research design of survey type. A descriptive method offered a thorough and organised description of a population, circumstance, or phenomenon. The researcher did not manipulate any variable in this study, the researcher just observed and measured them. Four variables were included in the study: one dependent variable (psychosocial adjustment) and three independent variables (parental involvement, sexuality education and learning motivation).

3.2 Population of the Study

All of the ninety eight thousand, five hundred and forty seven (98,547) early adolescents in public junior second schools II (JSS 2) in Oyo State are the target population in this study.

Table 3.1: Population of the Study (98,547 JSS 2 Students)

S/N	Senatorial Districts	Local Government Areas	Number of Junior Sec. Schools	Number of Junior Secondary School Two Students		
				Male	Female	Total
1.	Oyo Central	Afijio	17	1139	1542	2681
		Akinyele	36	2947	2782	5729
		Egbeda	30	2458	2300	4758
		Ogo Oluwa	13	1072	1024	2096
		Surulere	23	1860	1979	3839
		Lagelu	26	1902	2088	3990
		Oluyole	29	2370	2315	4685
		Ona Ara	33	2491	2440	4931
		Oyo East	11	951	985	1936
		Oyo West	11	901	1082	1983

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		Atiba	15	1191	1302	2493
		Sub-total	**244**	**19,282**	**19,749**	**39,031**
2.	**Oyo North**	Saki West	22	1712	1625	3337
		Saki East	11	909	1020	1929
		Atisbo	12	974	945	1919
		Irepo	6	408	513	921
		Olorunsogo	4	403	413	816
		Kajola	16	1093	1134	2227
		Iwajowa	9	768	844	1612
		Ogbomoso North	15	1101	1317	2418
		Ogbomoso South	16	1237	1211	2,448
		Iseyin	23	1541	1676	3217
		Oorelope	8	786	693	1479
		Itesiwaju	11	802	1111	1913
		Orire	18	1381	1434	2815
		Sub-total	**171**	**13115**	**13936**	**27,051**
3.	**Oyo South**	Ibadan North	42	3126	3315	6441
		Ibadan North West	13	1096	1051	2147
		Ibadan South West	30	2306	2423	4729
		Ibadan North East	34	2357	2457	4814
		Ibadan South East	36	2724	2693	5417
		Ibarapa East	11	943	1001	1944
		Ibarapa North	8	756	663	1419
		Ibarapa Central	10	860	879	1739
		Ido	26	1915	1900	3815
		Sub-total	**210**	**16,083**	**16,382**	**32,465**
Grand Total			**625**	**48,480**	**50,067**	**98,547**

Source[1]

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3.3 Sample and Sampling Technique

The sample size for the study was determined using a multi-stage sampling procedure that incorporated total sampling technique, simple random sampling technique, use of baseline method, and Yamane (Slovin) sampling techniques.

Stage 1: Total Enumeration Technique

In the first stage, the researcher employed the total enumeration technique, specifically the three senatorial districts Oyo South, Oyo Central and Oyo North senatorial districts were totally

enumerated. This is because the study setting was Oyo State and the three senatorial districts covered the whole of Oyo State.

Stage 2: Simple Random Sampling Technique

At this stage, the simple random sampling technique was used to select eight local government areas from each senatorial district, making a total of 24 local government areas. These 24 LGAs are more than 2/3 of 33 LGAs in Oyo State. This enabled the researcher to have a large sample for the study with generalisable results and findings.

Table 3.2: Senatorial Districts and Local Government Areas

S/N	Senatorial Districts	Local Government Areas
		Afijio
		Egbeda
1.	**Oyo Central**	Lagelu
		Oluyole
		Ona Ara
		Oyo East
		Oyo West
		Atiba
		Sub-total
		Saki West
		Saki East
		Irepo
		Olorunsogo
		Kajola
		Iwajowa
2.	**Oyo North**	Ogbomoso South
		Oorelope

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		Sub-total	
		Ibadan North	
		Ibadan South West	
		Ibadan North East	
		Ibadan South East	
3.	**Oyo South**	Ibarapa East	
		Ibarapa North	
		Ibarapa Central	
		Ido	
		Sub-total	
Grand Total			

Stage 3: Use of Baseline Method

At stage three, the local government with the least number of schools used as a baseline to determine the number of schools per local government area. Thus, Olorunsogo LGA with the lowest number of schools (four schools) was used as a baseline for selection of schools in other LGAs. Thus, 96 schools were randomly selected in all the 24 chosen local government areas in the three senatorial districts in Oyo State.

Table3.3:Use of Baseline Method

S/N	Senatorial Districts	Local Government Areas	Number of Junior Sec. Schools
		Afijio	17
		Egbeda	30
1.	**Oyo Central**	Lagelu	26
		Oluyole	29
		Ona Ara	33
		Oyo East	11
		Oyo West	11
		Atiba	15
		Sub-total	**244**
		Saki West	22
		Saki East	11
		Irepo	6

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		Olorunsogo	4
		Kajola	16
		Iwajowa	9
2.	**Oyo North**	Ogbomoso South	16
		Oorelope	8
		Sub-total	**171**
		Ibadan North	42
		Ibadan South West	30
		Ibadan North East	34
		Ibadan South East	36
3.	**Oyo South**	Ibarapa East	11
		Ibarapa North	8
		Ibarapa Central	10
		Ido	26
		Sub-total	**210**
Grand Total			**625**

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Stage 4: Taro Yamane (Slovin) Sample Size Determination Formula

At this stage four, the Taro Yamane (Slovin) sample size determination formula will be used to calculate the number of early adolescents in public junior secondary schools in class II (JSS 2) in the selected local government areas.

The formula is shown below:

$$n = \frac{N}{1 + N(e)^2}$$

Where n is the needed sample size, N is the population size from which the sample is to be derived from, and 'e' is the level of significance.

Sample Size Selection for JSS 2 Students in Oyo Central Senatorial District using Taro Yamane Formula

$n=N/1+N(e)^2$

n= sample size

N= 27,457

e= 0.05

n= 27,457/1+27,457 $(0.05)^2$

n=27,457/1+27,457 (0.0025)

n= 27,457/1+68.64

n= 27,457/69.64

n= 394

Sample Size Selection for JSS 2 Students in Oyo North Senatorial District using Taro Yamane Formula

n=N/1+N$(e)^2$

n= sample size

N= 14,769

e= 0.05

n= 14,769/1+14,769 $(0.05)^2$

n=14,769/1+14,769 (0.0025)

n= 14,769/1+36.92

n= 14,769/37.92

n= 389

Sample Size Selection for JSS 2 Students in Oyo South Senatorial District using Taro Yamane Formula

n=N/1+N$(e)^2$

n= sample size

N= 30,318

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e= 0.05

n= 30,318/1+30,318 $(0.05)^2$

n=30,318/1+30,318 (0.0025)

n= 30,318/1+75.79

n= 30,318/76.79

n= 395

The Sample for the study is therefore, 395+390+395=1,180

Table 3.3: Sampling Frame for Number of Students in Each Senatorial District

Senatorial District	Population of JSS 2Students	Sampled Number of JSS 2 Students
Oyo Central	27,457	394
Oyo North	14,769	389
Oyo South	30, 318	395
Total=	**1,178**	

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3.4 Description of the Research Instrument

The instrument for this study was the questionnaire titled: "Psychosocial Adjustment, Parental Involvement, Sexuality Education and Learning Motivation Questionnaire'' (PAPISELM-Q). This questionnaire contained five sections including the socio-demographics and four sub-scales. The section A contained the demographic information of the participants, section B contained the Adolescents' Psychosocial Functioning Inventory, the Parental Involvement Scale, the Sexuality Education Scale and the Learning Motivation Scale.

The Adolescents' Psychosocial Functioning Inventory (APFI)

This scale was developed by Akpa, Bamgboye, and Baiyewu to measure the psychosocial adjustments of adolescents. The Adolescents' Psychosocial Functioning Inventory (APFI)

addresses relevant challenges and expectations of adolescents. The APFI comprises three psychosocial factors and 23-item three items. Estimate of the overall reliability of the APFI scale was α= 0.83, while all three factors: Optimism and Coping Strategy (OCS), Behaviour and Relationship Problems (BRP), and General Psychosocial Dysfunctions (GPD) had moderate to high reliability (α= 0.59 for OCS, α= 0.57 for BRP and α= 0.90for GPD). The APFI measures psychosocial issues related to adolescents (age 10 to 19 years) functioning in epidemiology or community-based studies

Optimism and Coping Strategy (OCS).

This dimension assesses the adolescent's perspective regarding their future, their ability to cope with challenges, and their overall optimism. This is a four-item subscale of APFI that contains questions (such as "I feel that even though my parents/guardians are poor, I will be rich", "I hope a miracle will happen" etc) addressing how optimistic the participants are of their future situations despite their present state and a question on their coping strategy[2].

General Psychosocial Dysfunctions (GPD).

This section assesses dysfunctional feelings, emotions, and perceptions related to adolescent's environment. This is a 15-item subscale contains questions addressing adolescents' general psychosocial problems ranging from depressive symptoms (such as "I feel like running away from everything around me"); hopelessness (such as "Everywhere I turn, I see that my life is hopeless") to suicidal thought (such as "I thought of killing myself").

Behaviour and Relationship Problems (BRP).

This section assesses behavioural issues and relationship problems that adolescents might be experiencing. The four-item subscale contains questions (such as "I shout at people; even adults", "I use to break rules", etc) addressing the adolescents' behaviour and relationship disorder.

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Parental Involvement Scale

The Parental Involvement Scale is a 12-item self-developed scale on parental involvement in the lives of early adolescents in terms of personal and social relations. The scale has twelve items on a 4-point response format ranging from Strongly Disagree to Strongly Agree.

Sexuality Education Scale

The scale is adapted from Sexuality Education Scale developed by developed by a group of scholars to measure knowledge of sexuality education, ways to prevent pregnancy and topics/concepts discussed in classes/talks/activities among adolescents in schools. The scale has a 3-point response format ranging from Not Sure (1) to True (3). Knowledge of Sexuality Education: Items under this sub-scale cover a range of knowledge-based questions related to sexual health, reproductive processes, contraceptive methods, disease transmission, and preventive measures[3].

Learning Motivation Scale

This scale is a 15-item self-developed scale used to measure learning motivation among early adolescents. The scale contains both the intrinsic (1-7) and extrinsic (8-15) items on a four-point response format ranging from strongly disagree to strongly agree.

3.4.1 Validity of the Research Instrument

The questionnaire was subjected to the content and face validity type. Content and face validity ensure that the items evaluated on the instrument are representative and adequate to measure a particular construct. Each item was tested to ensure the item is faced clearly and properly, as well as to determine if it applies to the intended construct. The items were assessed to confirm correct scoring and that the instrument scaling is suitable for the content of the structure. Therefore, to

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ascertain the content and face validation, the instruments were shown to experts in Guidance and Counselling Unit at Lead City University for their judgment. After their input and necessary corrections, the instruments will be shown to the supervisor to make final corrections.

3.4.2 Reliability of the Research Instrument

Cronbach's alpha was used to assess the instrument's reliability. Pilot testing is used to determine the internal consistency and stability of the items on an instrument using Cronbach's alpha reliability test process. To conduct a pilot test, at least thirty public junior secondary school two pupils were given the questionnaires. The final study did not include these students used for pilot study. Following the surveys' retrieval, the items on the instrument were coded and entered into the Statistical Package for Social Science (SPSS), where the internal consistency and stability of the questionnaires was determined using Cronbach's Alpha reliability. The psychometric results were used to interpret the Cronbach's Alpha reliability value 0.76.

3.5 Method of Data Collection

The researcher visited the schools with a letter of introduction to seek approval from the principals. In order to make the distribution of the questionnaires simpler, quicker, and less stressful, the researcher personally administered the instruments and also enlisted the assistance of three (3) research assistants. The questionnaire was administered on early adolescents in class II (JSS 2).

3.6 Method of Data Analysis

Descriptive and inferential statistical techniques were used to analyse the information gathered from the questionnaires. Descriptive statistics like frequency counts and percentages were used to analyse the demographics of the early adolescents in public junior secondary school two (JSS2). In order to analyse research questions, descriptive statistics including frequency counts,

percentages, means, and standard deviations were used. At the 0.05 level of significance, inferential statistics of multiple regression and the t-test analyses were used to test the hypotheses.

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Endnotes

[1.]Ministry of Education: Post Primary Schools Statistic Oyo State Post Primary Schools Teaching Service Commission (OYSPPSTSC) Planning Research and statistics Department 2023/2024 Academic Session.

[2.]O. M. Akpa, E. A. Bamgboye, & O. Baiyewu. *The Adolescents' Psychosocial Functioning Inventory (APFI): Scale Development and Initial Validation Using Exploratory and Confirmatory Factor Analysis,* **Afr J. Psychol Study Soc Issues,** 2015; 18(1): 1–21.

[3.]H. Jony, S. B. Hossain, A. H. Bakibillah, Md. Shahjahan, A.B.M. Chowdhury & S. Khan. *Knowledge, Attitudes, and Practices on Comprehensive Sexuality Education among Adolescent Males and Influential Factors: A Cross-sectional Study.* 2022, 1-22. DOI:10.21203/rs.3.rs-2378375/v1.

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Chapter Four

Results and Discussion of Findings

4.1 Demographic Data Analysis

Table 4.1: Age of Early adolescent Participants in Oyo State, Nigeria

	N	%
10 years	214	19.7%
11 years	159	14.6%
12 years	548	50.3%
13 years	33	3.0%
9 years	135	12.4%
Total	**1089**	100.0%

Source: Field Survey, 2024

Table 4.1 presents the age distribution of early adolescent participants in Oyo State, Nigeria, who took part in this study, with a total sample size of 1,089. The data reveals that the largest proportion of participants are 12 years old, accounting for 50.3% (548 individuals) of the total. This is followed by 10-year-olds, who represent 19.7% (214 individuals), and 11-year-olds at 14.6% (159 individuals). Nine-year-olds constitute 12.4% (135 individuals), while the smallest age group is 13-year-olds, comprising only 3.0% (33 individuals). The distribution indicates a peak in early adolescent participation at age 12, with a significant drop-off by age 13. This trend suggests that most early adolescents within this region are concentrated around the age of 12, potentially reflecting a typical school enrollment pattern or developmental milestone in this demographic. The relatively low representation of 13-year-olds could imply early transitions to secondary education or other factors such as dropout rates or underreporting. The researcher posits these findings could have several implications for policymakers and educators. For instance, programmes targeting early adolescents in Oyo State may need to focus resources primarily on the 12-year-old age group, given its predominance. In addition, the low percentage

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of older adolescents (13 years) may require further investigation into educational retention or progression rates to ensure adequate participation across all early adolescent age groups.

Table 4.2: Religion of Early adolescent Participants in Oyo State, Nigeria

	N	%
Christianity	655	60.1%
Islam	434	39.9%
Total	**1089**	100.0%

Source: Field Survey, 2024

Table 4.2 outlines the religious affiliations of early adolescent participants in Oyo State, Nigeria, with a total sample size of 1,089. The majority of participants identify as Christians, accounting for 60.1% (655 individuals), while 39.9% (434 individuals) identify as Muslims. This distribution indicates that Christianity is the dominant religion among early adolescents in this sample, although Islam also garnered a significant portion of the population. The nearly 60-40 split suggests a diverse religious environment, with both major faiths having substantial representation. The implications of this religious composition are significant for the design and implementation of youth programmes in Oyo State. Educational, social, and community initiatives should incorporating elements that respect and recognise this religious diversity to enhance inclusivity and enable larger acceptance. Additionally, this balance highlights the importance of interfaith dialogue and cooperation in programmes targeting early adolescents, to build mutual understanding and respect among different religious groups.

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4.2 Presentation of Data

4.2.1 Research Questions

Research Question One: What is the level of psychosocial adjustment among early adolescents in Oyo State, Nigeria?

Table 4.3: Descriptive Summary of the Level of Psychosocial Adjustment among Early adolescents in Oyo State, Nigeria

	N	Mean	Std. Deviation	Remark
I feel though my parents/guardians are poor, I will be rich	1089	3.82	.383	High
I feel life will not continue to be difficult for me	1089	3.77	.420	High
I feel I may be nobody now but I will be a great person someday	1089	3.82	.386	High
I hope a miracle will happen	1089	3.72	.448	High
I feel I am a disgrace to my family	1089	3.38	.629	High
I feel like running from everything around me	1089	3.39	.516	High
I find it difficult to sleep	1089	3.45	.526	High
I feel like few years from now I will be a total failure	1089	3.45	.526	High
I feel guilty for all the difficulties in my family	1089	3.38	.501	High
I cannot see any light of hope in my future life	1089	3.41	.499	High
I feel like everything around me is falling apart	1089	3.46	.557	High
Everywhere I turn, I see that my life is hopeless	1089	3.48	.500	High
Judging from the situations in my life, I am hopeless	1089	3.49	.507	High
I feel my family is a shame to the community	1089	3.46	.499	High

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I have too many problems; I cannot be free from them	1089	3.49	.507	High
I feel my presence causes distraction to people	1089	3.46	.499	High
It is as if I am a burden to my family/community	1089	3.51	.507	High
I feel like things wouldn't just work me	1089	3.41	.514	High
I think of killing myself	1089	3.44	.525	High
People of my age hate me	1089	3.41	.499	High
I break rules	1089	3.43	.503	High
I feel people of my age will take me for granted	1089	3.40	.498	High
I shout at people even adults	1089	3.43	.510	High
Valid N	1089			High
Weighted Mean:3.52		**Decision:**	**High level**	

Source: Field Survey, 2024

Decision rule: 0.05-2.00 (low), 2.01-3.00 (moderate), 3.01-4.00 (high)

The descriptive summary in Table 4.3 provides insights into the psychosocial adjustment levels of early adolescents in Oyo State, Nigeria. Based on responses from 1,089 participants, the data reveals a high level of psychosocial adjustment, as indicated by a weighted mean of 3.52. This score falls within the high category (3.01–4.00) according to the decision rule, suggesting that the majority of adolescents express strong psychosocial resilience despite potential challenges.

A closer analysis of individual statements highlights a prevailing sense of hope and self-belief among respondents. For example, statements such as *"I feel though my parents/guardians are poor, I will be rich"* (Mean = 3.82) and *"I feel I may be nobody now, but I will be a great person someday"* (Mean = 3.82) demonstrate a strong sense of optimism and aspiration for future success. Similarly, the high mean scores for *"I feel life will not continue to be difficult for me"*

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(Mean = 3.77) and *"I hope a miracle will happen"* (Mean = 3.72) further reinforce their positive outlook on overcoming life's difficulties. On the other hand, responses to statements reflecting emotional distress, such as *"I feel like few years from now I will be a total failure"* (Mean = 3.45) and *"I think of killing myself"* (Mean = 3.44), indicate that while adolescents generally maintain a high level of adjustment, some may experience psychological strain. The relatively high mean scores in these areas suggest the presence of emotional challenges that require attention. Given these findings, it is essential to reinforce the resilience and optimism demonstrated by these adolescents while addressing the underlying emotional concerns. Schools, families, and communities should prioritize mental health awareness programs and counseling services to provide targeted support, ensuring that all adolescents have access to the necessary resources for maintaining emotional well-being.

Research Question Two: What is the level of perceived parental involvement among early adolescents in Oyo State, Nigeria?

Table 4.4: Descriptive Summary of the Level of Perceived Parental Involvement among Early adolescents in Oyo State, Nigeria

	N	Mean	Std. Deviation	Remark
Talk to me about feeling good about my life	1089	3.08	.578	High
teach me cues to become aware of my emotions	1089	3.12	.477	High
teach me to respond appropriately to feelings in my peers	1089	3.08	.495	High
encourage me to try to deal with environmental influence on my behavior	1089	3.17	.549	High
talk to me about identifying my needs at this stage of life	1089	3.25	.557	High

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teach me about my role as a child at home	1089	3.31	.709	High
talk to me about my behaviour within the school	1089	3.30	.564	High
teach me how to cope with issues that concern peer relations	1089	3.44	.660	High
talk to me about the importance of keeping to school rules	1089	3.40	.694	High
monitor my behaviour in the school.	1089	3.52	.663	High
teach me to assertive in any social gathering	1089	3.16	.789	High
Valid	1089	**Decision =**	**High level**	
Weighted Mean=3.25				

Source: Field Survey, 2024

Decision rule: 0.05-2.00 (low), 2.01-3.00 (moderate), 3.01-4.00 (high)

The descriptive summary in Table 4.4 provides an overview of the perceived level of parental involvement among early adolescents in Oyo State, Nigeria. Based on responses from 1,089 participants, the data indicates a high level of parental involvement, as reflected by the weighted mean of 3.25, which falls within the high category (3.01–4.00) according to the decision rule. This suggests that adolescents generally perceive their parents as actively engaged in their emotional, social, and behavioral development. An in-depth look at individual statements highlights consistent parental guidance and support. For instance, adolescents reported a high level of parental involvement in areas such as *"talking to them about identifying their needs at this stage of life"* (Mean = 3.25) and *"teaching them about their role as a child at home"* (Mean = 3.31). Similarly, parental monitoring within the school environment, as seen in *"monitoring my behavior in school"* (Mean = 3.52) and *"talking to me about my behavior within the school"*

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(Mean = 3.30), further reflects active parental engagement in their children's academic and social lives. Additionally, parents are perceived as playing a crucial role in shaping emotional intelligence and social interactions, as indicated by responses such as *"teaching me how to cope with issues that concern peer relations"* (Mean = 3.44) and *"teaching me to respond appropriately to feelings in my peers"* (Mean = 3.08). These findings highlight that parents are actively helping their children develop interpersonal skills and navigate social relationships effectively. Overall, the results suggest that early adolescents in Oyo State benefit from a strong level of parental involvement, which contributes to their emotional and behavioral adjustment. However, continued efforts should be made to sustain and further enhance parental engagement through awareness programs, school-parent collaborations, and community-based initiatives to reinforce positive adolescent development.

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Research Question Three: What is the level of sexuality education among early adolescents in Oyo State, Nigeria?

Table 4.5: Descriptive Summary of the Level of Sexuality Education among Early Adolescents in Oyo State, Nigeria

	N	Mean	Std. Deviation	Remark
During puberty only physical changes occur but not mental changes	1089	2.94	.304	Moderate
Wet dream is one kind of disease	1089	2.90	.397	Moderate
Menstruation occurs due to hormonal imbalance	1089	2.92	.274	Moderate
Only girls are sexually abused	1089	2.54	.556	Moderate
Virginity is only for girls	1089	2.36	.482	Moderate
There is a risk of pregnancy if the family planning method is not adopted	1089	2.57	.587	Moderate
Unplanned pregnancies cause abortion	1089	2.38	.669	Moderate
Sex and physical relation are not the same thing	1089	2.07	.598	Moderate
Sexual infection is transmissible from one partner to another	1089	2.38	.809	Moderate
AIDS spread through mosquito and bug	1089	2.09	.643	Moderate
Shaking hands with an infected person	1089	2.17	.682	Moderate
there are private parts of the body	1089	2.56	.776	Moderate
There are public parts of the body	1089	2.17	.890	Moderate
Valid N	1089	**Decision=**	**Moderate level**	
Weighted Average=2.47				

Source: Field Survey, 2024

Decision rule: 0.05-2.00 (low), 2.01-3.00 (moderate), 3.01-4.00 (high)

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The descriptive summary in Table 4.5 examines the level of sexuality education among early adolescents in Oyo State, Nigeria. Based on responses from 1,089 participants, the data reveals a moderate level of understanding, as reflected by the weighted average mean of 2.47, which falls within the moderate category (2.01–3.00) according to the decision rule. This suggests that while adolescents have some knowledge of sexuality-related topics, misconceptions and gaps in understanding persist. Several statements indicate common misunderstandings about puberty and reproductive health. For instance, the belief that *"During puberty only physical changes occur but not mental changes"* (Mean = 2.94) and *"Menstruation occurs due to hormonal imbalance"* (Mean = 2.92) suggests that some adolescents lack a comprehensive understanding of the physiological and psychological aspects of puberty. Similarly, *"Wet dream is one kind of disease"* (Mean = 2.90) reflects misconceptions about natural biological processes.

There are also stereotypical and inaccurate beliefs regarding gender and sexual health. For example, *"Only girls are sexually abused"* (Mean = 2.54) and *"Virginity is only for girls"* (Mean = 2.36) indicate that some adolescents still hold gender-biased views about sexuality and abuse, highlighting the need for more gender-inclusive education. However, some responses suggest afair level of awareness, such as *"Sex and physical relation are not the same thing"* (Mean = 2.07), which indicates an understanding that intimacy extends beyond physical contact. Additionally, while misconceptions about HIV/AIDS transmission exist, as seen in *"AIDS spreads through mosquitoes and bugs"* (Mean = 2.09), the responses to *"Shaking hands with an infected person"* (Mean = 2.17) suggest growing awareness that casual contact does not transmit the virus.

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Overall, the findings highlight the need for more comprehensive and accurate sexuality education. Adolescents require better guidance on puberty, reproductive health, and sexual safety, alongside efforts to challenge gender stereotypes and correct misconceptions about sexual health andHIV/AIDS transmission. Schools and communities should enhance sexuality education programs, ensuring that adolescents receive factual, inclusive, and age-appropriate information to promote healthy attitudes and behaviors.

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Research Question Four: What is the level of learning motivation among early adolescents in Oyo State, Nigeria?

Table 4.6: Descriptive Summary of the Level of Learning Motivation among Early Adolescents in Oyo State, Nigeria

	N	Mean	Std. Deviation	Remark
I have an inner urge to learn in the classroom	1089	3.07	.574	High
I want to learn as much as I can	1089	3.12	.653	High
I desire to know more about my school subjects	1089	3.27	.503	High
I have an innate interest in knowledge and skills in the classroom	1089	3.34	.534	High
I like to learn for self-satisfaction	1089	3.32	.575	High
I find fulfilment in learning lessons taught in the classroom	1089	3.23	.594	High
I find learning personally enjoying	1089	3.37	.535	High
My parents expect to learn optimally	1089	3.40	.543	High
I learn better when I remember celebrations in the family about achievement	1089	3.38	.630	High
I am interested in learning because of gifts	1089	3.46	.499	High
My teachers say that it is good to learn in the classroom	1089	3.46	.576	High
I am under pressure to learn in school and have high score	1089	3.40	.575	High
The school environment gears me to be interested in learning	1089	3.50	.529	High
I have to learn in order to get rewards and receive tokens	1089	3.36	.559	High
I learn in the classroom so as to avoid punishment	1089	3.51	.529	High

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Valid N	1089	**Decision=**	**High level**
WeightedAverage Mean=3.35			

Source: Field Survey, 2024

Decision Rule: 0.05-2.00 (low), 2.01-3.00 (moderate), 3.01-4.00 (high)

Table 4.6 provides a descriptive summary of the level of learning motivation among early adolescents in Oyo State, Nigeria, based on responses from 1,089 participants. The weighted average mean of 3.35 falls within the high category (3.01–4.00) according to the decision rule, indicating that early adolescents exhibit a high level of motivation toward learning. The results suggest that students are driven by a combination of intrinsic and extrinsic motivational factors. Intrinsic motivation is evident in responses such as *"I have an innate interest in knowledge and skills in the classroom"* (Mean = 3.34) and *"I find learning personally enjoyable"* (Mean = 3.37), which indicate that many students are naturally curious and derive satisfaction from learning. Additionally, *"I like to learn for self-satisfaction"* (Mean = 3.32) highlights that a significant number of students view learning as fulfilling, rather than just a means to an end.

External influences also play a crucial role in students' motivation. For instance, *"My parents expect me to learn optimally"* (Mean = 3.40) and *"My teachers say that it is good to learn in the classroom"* (Mean = 3.46) suggest that both parental and teacher encouragement contribute positively to students' engagement in school. The statement *"The school environment gears me to be interested in learning"* (Mean = 3.50) further supports the importance of a supportive educational setting in fostering motivation. Motivation through rewards and consequences is also observed in the findings. The statement *"I learn in the classroom so as to avoid punishment"* (Mean = 3.51) suggests that some students are driven by the need to avoid negative

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consequences. Similarly, *"I am interested in learning because of gifts"* (Mean = 3.46) and *"I learn better when I remember celebrations in the family about achievement"* (Mean = 3.38) indicate that recognition and rewards play a significant role in reinforcing learning behavior.

Overall, the findings highlight that early adolescents in Oyo State demonstrate a strong motivation to learn, influenced by a balance of internal interest, external encouragement, and reward-driven motivation. Schools and families can further enhance learning motivation by promoting a positive school environment, reinforcing intrinsic interest in education, and ensuring that external motivators complement students' natural desire to learn.

4.2.2 Hypotheses

$H_0$1: There will be no significant joint influence of parental involvement, sexuality education and learning motivation on psychosocial adjustment among early adolescents in Oyo State, Nigeria.

Table 4.7: Summary of the Regression Analysis of the Joint Influence of Parental Involvement, Sexuality Education and Learning Motivation on Psychological Adjustments among Early Adolescents in Oyo State, Nigeria

Model	R	R Square	Adjusted R Square	Std. Error of the Estimate	Change Statistics	
		R Square Change				
1	.516[a]	.266	.264	.35064	.266	

a. Predictors: (Constant), Learning_motivation, Sexuality_Edu, Parental_involvement

Model		Sum of Squares	Df	Mean Square	F	Sig.
1	Regression	48.444	3	16.148	131.285	.000[b]
	Residual	133.399	1085	.123		
	Total	181.843	1088			

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Source: Field Work, 2024

a. Dependent Variable: Psycho_adjustment

Decision (Adj $R^2 = 0.264$, $F_{(3, 1085)} = 131.285$,$P< 0.05$)

b. Predictors: (Constant), Learning_motivation, Sexuality_Edu, Parental_involvement

Table 4.7 above presents a statistical analysis examining the joint relationship between psychosocial adjustment and three key predictors: parental involvement, sexuality education, and learningmotivation among early adolescents in Oyo State, Nigeria. The analysis is divided into three sections: Model Summary, ANOVA, each offering insights into how these variables jointly influence the psychosocial adjustment of early adolescents. The model summary shows that the predictors, parental involvement, sexuality education, and learning motivation, are moderately correlated with psychosocial adjustment, indicated by an R value of 0.516. The R Square value of 0.264 reveals that these three factors combined can explain 26.4% of the variance in psychosocial adjustment. This leaves 73.6% of the variance attributable to other, unmeasured variables. The Adjusted R Square of 0.264 further confirms the robustness of the model after accounting for the number of predictors. Additionally, the standard error of the estimate (0.35064) indicates a relatively low level of error in the predictions made by the model. Furthermore, the ANOVA results indicate that the overall model is statistically significant. The F value of 131.285 and the corresponding p-value of .000(Adj $R^2 = 0.264$, $F_{(3, 1085)} = 131.285$,$P< 0.05$)suggest that the predictors jointly have a significant impact on psychosocial adjustment. The null hypothesis is thus rejected. This demonstrates that the relationship between the predictors and the dependent variable is unlikely to be due to random chance.

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$H_0$2: There will be no significant relative influence of parental involvement, sexuality education and learning motivation on psychosocial adjustment among early adolescents in Oyo State, Nigeria;

Table 4.8: Summary of the Relative Influence of Parental Involvement, Sexuality Education and Learning Motivation on Psychosocial Adjustment among Early Adolescents in Oyo State, Nigeria

Model		Unstandardized Coefficients		Standardized Coefficients		
		B	Std. Error	Beta	T	Sig.
1	(Constant)	1.036	.220		4.718	.000
	Parental_involvement	.511	.030	.450	16.751	.000
	Learning motivation	.183	.031	.160	5.870	.000
	Sexuality Education	.075	.081	.025	.927	.354

a. Dependent Variable: Psycho_adjustment

Source: Field Work, 2024

(β= 0.450, t=16.751, P < 0.05)

(β= 0.160, t=5.870, P < 0.05)

Table 4.8 provides insight into the relative influence of each predictor to the psychosocial adjustment of early adolescents in Oyo State, Nigeria. Parental Involvement is the most significant predictor, with a B value of 0.511 and a Beta value of 0.450. This indicates that for every unit increase in parental involvement, psychosocial adjustment improves by 0.511 units. The p-value of .000 confirms that this relationship is highly significant, magnifying the crucial role parents play in shaping adolescents' emotional and social well-being. Learning motivation also has a positive and significant effect on psychosocial adjustment, with a B value of 0.183 and a Beta value of 0.160. The p-value of .000 indicates that this influence is statistically significant,

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though less impactful than parental involvement. This suggests that motivated early adolescents are more likely to experience better psychosocial adjustment, driven by their desire for academic success and personal growth. It is revealed that sexuality education shows a weaker, non-significant relationship with psychosocial adjustment, as indicated by a B value of 0.075 and a Beta value of 0.025. The p-value of .354 suggests that its impact is not statistically significant. This may point to gaps in how sexuality education is delivered or understood, limiting its influence on adolescents' overall psychosocial well-being. The null hypothesis is therefore only partially rejected as evident in the p-values of parental involvement and learning motivation less than 0.05, but it is accepted for sexuality education with p-value greater than 0.05.

$H_0$3: There will be no significant gender difference in psycho-social adjustment among early adolescents in Oyo State, Nigeria.

Table 4.9: T-Test Summary of Gender Difference in Psychosocial Adjustment among Early Adolescents in Oyo State, Nigeria

		Test Value = 0					
						95% Confidence Interval of the Difference	
Gender of participants		**T**	**df**	**Sig.(2-tailed)**	**Mean Difference**	**Lower**	**Upper**
Male	Psycho_adjustment	173.955	405	.000	3.53919	3.4992	3.5792
Female	Psycho_adjustment	223.311	682	.000	3.47291	3.4424	3.5034

Source: Field Survey, 2024

Table 4.9 presents the t-test summaryof gender differences in psychosocial adjustment among early adolescents in Oyo State, Nigeria. This analysis was conducted to test the hypothesis **($H_0$3)** that there is no significant gender difference in psychosocial adjustment between male and female adolescents.The t-test results for male participants shows a t-value of 173.955 with 405 degrees of freedom (df)and a p-value of .000 ($p<0.05$)**,** indicating statistical significance at the

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0.05 level. The mean psychosocial adjustment score for male adolescents is 3.54 with a 95% confidence intervalranging from 3.50 to 3.58**.** This demonstrates a high level of psychosocial adjustment among male participants. Similarly, the t-test for female participants yields **a** t-value of 223.311with682 degrees of freedom (df) and a p-value of .000**,** also indicating statistical significance. The mean psychosocial adjustment score for female adolescents is 3.47, with a 95% confidence intervalbetween 3.44 and 3.50**.** This shows that female participants also exhibit a high level of psychosocial adjustment, though slightly lower than their male counterparts. The p-values for both male and female groups are .000, which is well below the 0.05 threshold, indicating that the differences in psychosocial adjustment between genders are statistically significant**.** Therefore, the null hypothesis **(**$H_0$3**)** that there is no significant gender difference in psychosocial adjustment is rejected. This finding suggests that gender plays a role in how adolescents adjust psychosocially. The mean score for males (3.54) is slightly higher than that for females (3.47), implying that male adolescents may perceive themselves as better adjusted or experience fewer psychosocial challenges than their female counterparts.

$H_0$4: There will be no significant gender difference in sexuality education among early adolescents in Oyo State, Nigeria

Table 4.10: T-Test Summary of the Gender Difference in Sexuality Education among Early Adolescents in Oyo State, Nigeria

		Test Value = 0					
						95% Confidence Interval of the Difference	
Gender of participants		T	df	Sig. (2-tailed)	Mean Difference	Lower	Upper
Male	Sexuality_Edu	354.703	405	.000	2.46684	2.4532	2.4805
Female	Sexuality_Edu	496.005	682	.000	2.46773	2.4580	2.4775

Source: Field Survey, 2024

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Table 4.10 presents a t-test summaryanalysing the gender difference in sexuality educationamong early adolescents in Oyo State, Nigeria. This analysis was conducted to test the hypothesis **(**H_{04}**)** that there is no significant gender difference in the level of sexuality education between male and female adolescents. Key findings reveal that male participants shows a t-value of 354.703 with 405 degrees of freedom (df) and a p-value of .000**,** indicating that the result is statistically significant. The mean difference in sexuality education for males is2.47**,** with a95% confidence intervalranging from 2.45 to 2.48**.** This demonstrates a consistent understanding of sexuality education among male adolescents. Connectedly, the t-test for female participants yields a t-value of 496.005 with 682 degrees of freedom (df) and a p-value of .000, also indicating a statistically significantresult. The mean difference in sexuality education for females is 2.47**,** with a 95% confidence intervalranging from 2.46 to 2.48**.** This suggests that female adolescents also exhibit a similar level of understanding in sexuality education. In all, there is despite the statistically significant t-values for both genders, the mean scores for male and female adolescents are almost identical(2.47), indicating that both genders have a comparable level of sexuality education. Therefore, although the null hypothesis **(**$H0_4$**)** is rejected based on statistical significance, there is no significant gender difference in the level of sexuality education among early adolescents in Oyo State.

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$H_0$5: There will be no significant gender difference in learning motivation among early adolescents in Oyo State, Nigeria.

Table 4.11: T- Test Summary of the Gender Difference in Learning Motivation among Early Adolescents in Oyo State, Nigeria

		Test Value = 0					
						95% Confidence Interval of the Difference	
Gender of participants		**t**	**df**	**Sig. (2-tailed)**	**Mean Difference**	**Lower**	**Upper**
Male	Learning_motivation	184.988	405	.000	3.34433	3.3088	3.3799
Female	Learning_motivation	248.248	682	.000	3.34807	3.3216	3.3746

Source: Field Survey, 2024

Table 4.11 presents the results of a one-sample **t-test** evaluating whether there is a significant gender difference in learning motivation among early adolescents in Oyo State, Nigeria, as proposed in $H_0$5: *There will be no significant gender difference in learning motivation among early adolescents in Oyo State, Nigeria.* For males**,** the mean learning motivation score is 3.34, with a t-value of 184.988 (df = 405) and a p-value of **.**000, indicating statistical significance. The 95% confidence interval for the mean difference ranges from 3.3088 to 3.3799**.**For females**,** the mean learning motivation score is 3.35**,** with a t-value of 248.248 (df = 682) and a p-value of **.**000, also indicating statistical significance. The 95% confidence interval for the mean difference is between 3.3216 and 3.3746**.** Both male and female participants exhibit high levels of learning motivation, with mean scores exceeding 3.3**.** The statistically significant results ($p < 0.05$) for both genders suggest that learning motivation is a prominent factor across both groups. Despite the statistically significant t-values for both genders, the mean scores for male and female

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adolescents are almost identicalindicating that both genders have a comparable level of sexuality education. Therefore, although the null hypothesis **(**$H_0$5**)** is rejected based on statistical significance, there is no significant gender difference in the level of learning motivation among early adolescents in Oyo State, Nigeria.

4.3 Discussion of Findings

The findings from the current study on the psychosocial adjustment levels among early adolescents in Oyo State, Nigeria, indicate a generally positive outlook despite significant external challenges. The majority of the early adolescents have a high level of psychosocial adjustment with the data suggesting that most participants exhibit high resilience and optimism. This is particularly evident in their responses to future-oriented statements reflecting hope and ambition, such as their belief in eventual success despite current hardships. This high optimism, characterised by aspirations for future personal success and the hope that life will improve, suggests that early adolescents in Oyo State possess a psychological buffer against their adversities. Such resilience is critical in promoting long-term mental health and adaptive coping strategies, aligning with broader research that identifies hope and positive future expectations as protective factors in adolescent development[1].

However, while the overall psychosocial adjustment level appears high, some signs of underlying distress warrant attention. For instance, responses to statements such as *"I think of killing myself"* and *"I find it difficult to sleep"* reveal that although the majority of participants disagree with these sentiments, the disagreement is not as strong, suggesting moderate psychological strain. This indicates that while resilience is present, there might be a handful of vulnerability where some adolescents might be silently grappling with emotional distress. A

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recent study emphasised the increasing prevalence of mild to moderate psychological issues among Nigerian adolescents, particularly in low-resource settings, where access to mental health support is limited[2]. These findings highlight the importance of balanced mental health interventions that not only promote resilience but also address early warning signs of distress before they escalate into more severe problems.

The implications of these findings are significant for policymakers, educators, and community leaders. The demonstrated resilience among adolescents provides a strong foundation for the implementation of psychosocial support programs aimed at enhancing coping skills and mental well-being. However, the presence of distress signals calls for proactive measures, such as introducing school-based mental health services, community counselling centres, and psychoeducational initiatives. It is suggested that early intervention is key in preventing long-term mental health issues, particularly in adolescents exposed to socioeconomic hardships[3]. By addressing the strengths and vulnerabilities identified in this study, stakeholders can foster a more supportive environment that enhances adolescents' psychosocial adjustment, ensuring their transition into well-adjusted, productive adults.

Also, early adolescents in Oyo State, Nigeria, generally perceive a high level of parental involvement in their lives, with a weighted mean suggesting agreement that their parents are present and engaged in various aspects of their upbringing. Parental engagement seems to be highest in areas related to school monitoring and behavioural guidance. Adolescents reported that their parents actively monitor their behaviour at school, teach them how to navigate peer relationships, and emphasise the importance of adhering to school rules. This high level of involvement in academic and social domains manifests s a structured approach to parenting,

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where discipline and peer-related skills are adopted[4]. Such involvement can have a positive impact on adolescents' academic performance and social adjustment, as confirmed by recent studies emphasising the role of parental monitoring in reducing risky behaviours and improving school outcomes[5].

Despite this strong engagement in behavioural and social domains, the findings reveal moderate parental involvement in areas of personal development and emotional support. Statements related to adolescents' understanding of their roles at home and identifying personal needs suggest that while parents provide some guidance, it is not as robust as their involvement in school-related matters. This moderate engagement in personal development could be due to cultural expectations, where practical guidance often takes precedence over emotional conversations. A recent literature, notes that in many African contexts, parents prioritise discipline and societal roles over emotional nurturing, reflecting traditional parenting styles that may leave gaps in fostering adolescents' self-awareness and emotional independence[6].

The relatively lower perception of parental involvement in emotional guidance is crucial and requires attention. Adolescents reported less engagement from their parents in helping them manage their emotions and navigate their feelings toward peers. This suggests a gap in emotional support, which could affect their psychosocial adjustment and resilience. Studies have shown that adolescents who receive emotional guidance from their parents are better equipped to handle stress and build healthier peer relationships[7]. Addressing this gap by encouraging parents to engage more in their children's emotional development could enhance the overall well-being of adolescents, enhancing not only better emotional regulation but also improved social and academic outcomes. Consequently, there is a need for parent-focused interventions that stress

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emotional nurturing alongside traditional forms of parental involvement to promote a more holistic development approach.

The findings further reveal a moderate level of sexuality education among early adolescents in Oyo State, Nigeria. The overall weighted average mean suggest that many adolescents hold limited and often incorrect beliefs about sexual health and reproduction. This insufficient understanding, reflected in the classification of most statements as untrue emphasises the need for a comprehensive and accurate sexuality education curriculum that addresses misconceptions and promotes informed knowledge. Adolescents' misunderstanding of key concepts such as the mental and emotional changes during puberty, misconceptions around wet dreams as diseases, and menstruation as a hormonal imbalance point to the inadequacy of existing educational efforts in conveying holistic and factual information about adolescent development.

These misconceptions are not merely academic concerns but have broader implications for adolescent well-being and public health. For example, the belief that puberty is limited to physical changes overlooks the psychological and emotional transitions that are crucial for healthy development. Misunderstandings around wet dreams and menstruation could lead to stigmatisation and embarrassment, particularly in a society where discussing sexual health is often considered taboo. Recent research emphasises that ignorance or misinformation about sexual health contributes to poor mental health outcomes, low self-esteem, and increased vulnerability to sexual exploitation among adolescents[8]. This highlights the urgent need for educational interventions that address both the biological and psychological aspects of puberty to foster a well-rounded understanding.

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Positively, the findings also show that some areas of understanding are improving, particularly in recognising that sexual abuse and concepts of virginity are not gender-specific. However, the persistence of certain stereotypes suggests that traditional gender norms still influence adolescents' perceptions of sexuality. The belief that only girls are subject to sexual abuse, or that virginity concerns are exclusive to females, indicates a partial shift towards gender inclusivity, but further efforts are necessary to dismantle these entrenched views. A recent study suggests incorporating a gender-inclusive approach in sexuality education is essential in combating stereotypes and promoting equality, which not only reduces gender-based violence but also empowers adolescents to develop healthier attitudes towards relationships and consent[9]. Therefore, educators and policymakers in Oyo State should focus on integrating gender-sensitive content into the curriculum to challenge harmful stereotypes and ensure a more balanced understanding of sexual health.

Moreover, the correct responses related to HIV/AIDS transmission suggest some success in public health campaigns aimed at dispelling myths around HIV, such as transmission through mosquito bites or casual contact. This demonstrates the effectiveness of targeted awareness programs and highlights the potential for similar success in addressing other areas of sexual health education. However, to build on this progress, sexuality education programs need to be expanded beyond disease prevention to cover broader topics like emotional well-being, consent, and respectful relationships. By adopting a more comprehensive approach, adolescents in Oyo State can be better equipped to navigate the complexities of sexual health, leading to more informed, empowered, and responsible decisions in their personal lives.

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Relatedly, findings regarding the level of learning motivation among early adolescents in Oyo State, Nigeria, reveal that that the majority of students exhibit high level of motivation for learning. This indicates that early adolescents in this region generally have a positive outlook towards education, suggesting a combination of intrinsic and extrinsic motivational factors that support their academic engagement. Intrinsic motivation, as demonstrated by the adolescents' natural interest in acquiring knowledge and skills and their personal enjoyment of learning, plays a crucial role in garnering an enduring commitment to education. These findings align with research suggesting that intrinsic motivation, particularly in the form of personal enjoyment and curiosity about learning, is essential for long-term academic success[10]. The natural desire for knowledge, coupled with the satisfaction derived from learning, is a solid foundation for academic engagement and achievement.

External motivators, such as parental expectations and teacher encouragement, also significantly influence students' motivation to learn. The role of parental involvement in shaping educational motivation is consistent with findings from previous studies, which underline the importance of parental support in driving academic success[11]. The expectation that students will perform optimally, coupled with the encouragement provided by teachers, creates a positive reinforcement loop that boosts their motivation to engage in their studies[12]. Furthermore, the presence of external rewards, such as the fear of punishment and the allure of gifts, serves as a motivational tool for many students. While these external factors can be effective in the short term, it is important to recognise that intrinsic motivation should remain the primary focus to sustain long-term academic engagement[13]. The balance between internal drive and external incentives can be a critical factor in shaping educational outcomes, with intrinsic motivation laying the groundwork for sustained academic achievement.

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The influence of the school environment on motivation, as shown by the findings, also highlights the importance of creating supportive and stimulating learning settings. Students who feel that their school environment fosters interest in learning are more likely to remain engaged and motivated. This finding recognises the need for schools to not only focus on academic content but also on providing an environment that is conducive to learning through positive reinforcement, emotional recognition, and stimulating activities. Additionally, family recognition of academic achievements plays an emotional role in motivating students. The sense of accomplishment, coupled with familial support, is a powerful motivator for students[14]. Studies have shown that positive reinforcement from family, such as celebrating academic successes, can significantly contribute to students' motivation and self-esteem. Therefore, educators, parents, and community members must collaborate to create a positive learning ecosystem that integrates intrinsic and extrinsic motivational factors, providing the necessary support to encourage and sustain adolescents' academic motivation[15]. Overall, findings from this study emphasise the multifaceted nature of learning motivation among early adolescents in Oyo State, Nigeria. While intrinsic motivation plays a significant role in students' academic engagement, external factors such as parental expectations, teacher encouragement, and school environment are equally important. The combination of these motivational factors suggests a need for educational interventions that recognize the importance of both internal and external influences on students' learning motivation. Future research and educational practices should focus on fostering intrinsic motivation while also utilizing appropriate external motivators to maximize students' potential for academic success.

The statistical analysis conducted in this study provides a robust framework for understanding how psychosocial adjustment among early adolescents in Oyo State, Nigeria, as influenced by

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three critical factors: parental involvement, sexuality education, and learning motivation. There is a high correlation between these predictors and psychosocial adjustment, suggesting that the combination of these factors plays a meaningful role in shaping the early adolescents' overall psychosocial well-being. Furthermore, 26.6% of the variance in psychosocial adjustment can be explained by the three predictors. While this is a notable contribution, it is important to recognize that 73.4% of the variance is still accounted for by other unmeasured variables, such as peer influences, socio-economic status, and individual personality traits, which may also play significant roles in shaping adolescents' psychosocial outcomes. This highlights the complexity of psychosocial adjustment and the need for a holistic approach to adolescent well-being that considers multiple influencing factors.

The statistical significance of the model, as indicated by the ANOVA results (Adj $R^2 = 0.264$, $F_{(3,\ 1085\ )} = 131.285, P< 0.05$)further amplifies the importance of these predictors in influencing psychosocial adjustment. The rejection of the null hypothesis suggests that the relationship between parental involvement, sexuality education, learning motivation, and psychosocial adjustment is not due to random chance, thus strengthening the validity of the findings. Parental involvement, in particular, has been widely recognized in previous studies as a crucial factor in fostering emotional and behavioral development in adolescents. For instance, a recent study has shown that parents' emotional support, involvement in school activities, and guidance in developing social skills contribute significantly to adolescents' sense of security, self-esteem, and resilience[16]. Similarly, the role of sexuality education in promoting healthy emotional development cannot be overstated, as it equips adolescents with the knowledge to navigate complex issues such as sexual health, relationships, and emotional regulation. These findings support the idea that effective sexuality education, when delivered in a non-judgmental and

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inclusive manner, can foster a healthy sense of self and reduce feelings of confusion or shame related to sexuality[17].

In terms of learning motivation, the findings also highlight its strong influence on psychosocial adjustment. The intrinsic and extrinsic motivators for academic engagement, such as enjoyment of learning, parental expectations, and teacher encouragement, contribute to adolescents' sense of achievement and confidence[18]. Motivated students tend to have better emotional regulation and are more likely to experience positive psychosocial outcomes, including higher self-esteem and better stress management skills[19]. The interplay between academic motivation and psychosocial adjustment is crucial, as it suggests that fostering a supportive learning environment, promoting intrinsic motivation, and providing external reinforcements can lead to improved emotional and psychological well-being among adolescents. However, the relatively low proportion of explained variance (26.6%) as obtained in this current study indicates that additional factors, such as social networks, mental health support systems, and community influences, should also be considered in future research and interventions aimed at improving adolescent psychosocial outcomes.

Similarly, findings challenge the null hypothesis by revealing significant relationships between psychosocial adjustment and two of the three predictors: parental involvement and learning motivation. Parental involvement emerged as the strongest influence on psychosocial adjustment, as evidenced by a high B value of 0.511 and a Beta value of 0.450, with a statistically significant p-value of .000. This emphasises the profound role parents play in shaping early adolescents' emotional resilience, self-esteem, and social skills. A recent study emphasizes the meditational role of parental engagement in fostering social-emotional development, suggesting that strong

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family involvement can buffer adolescents against psychosocial challenges by enhancing their school engagement and emotional well-being[20].

Learning motivation, with a B value of 0.183 and a Beta value of 0.160, also significantly contributes to psychosocial adjustment, although to a lesser extent than parental involvement. The p-value of .000 indicates a significant relationship, suggesting that early adolescents with higher intrinsic or extrinsic motivation are more likely to navigate social and emotional complexities effectively. This finding corresponds with framework on educational motivation, which posits that motivated learners exhibit greater emotional engagement and adaptability in academic and social settings[21]. Furthermore, motivated students may be more inclined to seek supportive relationships, enhancing their psychosocial development. Thus, motivation is not only a driver of academic performance but also a crucial factor in emotional and social adaptation, particularly in environments where educational success is closely linked to self-concept and interpersonal relationships[22].

In contrast, the findings indicate that sexuality education has a weak and non-significant relationship with psychosocial adjustment, as reflected by a B value of 0.075 and a Beta value of 0.025, with a p-value of .354. This lack of significance suggests that while sexuality education is an important component of adolescent development, its current implementation in Oyo State may not effectively address the psychosocial needs of students. It is argued that comprehensive sexuality education (CSE) often lacks depth in addressing emotional and social aspects, particularly in low- and middle-income countries, where cultural and societal norms may dilute its impact[23]. This finding highlights the need for more contextually relevant and emotionally engaging approaches to sexuality education that go beyond biological knowledge to include

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interpersonal skills, consent, and emotional literacy. Therefore, while parental involvement and learning motivation significantly contribute to psychosocial adjustment, the weak influence of sexuality education indicates a need for reform in its delivery to make it a more effective tool for holistic adolescent development.

Moreover, findings indicate a statistically significant gender difference in psychosocial adjustment among early adolescents in Oyo State, Nigeria, thereby rejecting the null hypothesis. The mean psychosocial adjustment scores show that males (3.54) score slightly higher than females (3.47). This suggests that male adolescents may perceive themselves as better adjusted or face fewer psychosocial challenges than females. One potential explanation for this difference could be rooted in societal expectations and gender roles, which often shape how boys and girls experience and respond to psychosocial stressors. Boys may receive more encouragement to display emotional resilience or independence, leading to higher self-perceived psychosocial adjustment.

Research supports the notion that gender norms can influence adolescents' psychosocial experiences. For instance, it was found that boys often exhibit higher self-reported emotional regulation and social self-concept, which are critical components of psychosocial adjustment[24]. In contrast, girls may face greater societal pressures related to appearance, academic performance, and interpersonal relationships, potentially affecting their psychosocial well-being. The slightly lower mean score for females could reflect these additional pressures, which may heighten their vulnerability to psychosocial stressors.

However, while the difference is statistically significant, the practical significance of this gap should not be overstated. The mean scores for both genders fall within the high range of

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psychosocial adjustment, indicating overall positive adjustment among early adolescents in Oyo State. This is consistent with a recent study which highlights the role of supportive environments in fostering strong psychosocial adjustment across genders[16]. Nonetheless, these findings stress the importance of gender-sensitive interventions that address the unique challenges faced by male and female adolescents. Schools, families, and community stakeholders should aim to create inclusive support systems that cater to the diverse psychosocial needs of both genders.

The t-test analysis indicates that although there are statistically significant results for both male and female participants in terms of their exposure to sexuality education ($p < 0.05$), the mean scores for both genders are identical at 2.47. This demonstrates that male and female early adolescents in Oyo State, Nigeria, exhibit comparable levels of understanding regarding sexuality education. Consequently, while the null hypothesis (H_o4) is rejected based on statistical significance, the practical implication suggests minimal to no gender disparity in their level of knowledge or exposure. These findings suggest that any perceived differences in how male and female adolescents engage with sexuality education may not be due to actual disparities in understanding but rather to other factors such as cultural perceptions, educational delivery methods, or societal attitudes toward discussing sexuality. A comparable level of understanding indicates that recent educational interventions or curriculum improvements in Nigeria may have succeeded in delivering balanced, gender-neutral sexuality education content. This aligns with the findings that highlighted that in low- and middle-income countries, effective implementation of comprehensive sexuality education can lead to equitable knowledge acquisition across genders when delivered consistently and inclusively[23]. The identical mean values suggest that while knowledge is evenly distributed, there may still be subtle qualitative differences in how boys and girls internalize and apply this knowledge. For example, girls might face more stigma

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or societal pressures when discussing sexuality topics compared to boys, even if their knowledge level is equal. A recent research emphasizes that psychological and emotional factors, including gender-based societal norms, significantly influence how adolescents interpret and benefit from educational interventions. Therefore, while the numerical findings reflect equality, educators and policymakers should ensure that sexuality education also addresses gender-specific concerns.

The results from the one-sample t-test indicate that both male and female early adolescents in Oyo State, Nigeria, exhibit statistically significant levels of learning motivation. Male participants have a mean score of 3.34, while female participants have a mean score of 3.35. Despite the statistical significance indicated by p-values of .000 for both groups, the negligible difference in mean scores (0.01) suggests that learning motivation is virtually identical between genders. Consequently, while the null hypothesis ($H_0$5) is rejected due to the statistical significance, the practical implication is that there is no meaningful gender difference in learning motivation.

These findings highlight the universality of learning motivation among adolescents, regardless of gender. Both boys and girls demonstrate high intrinsic and extrinsic motivation levels, likely influenced by shared educational environments, societal expectations, and cultural values that emphasise academic success. A previous study highlights motivational, emotional, and social factors are critical for academic achievement in children, suggesting that gender may not significantly impact the core drivers of learning motivation when external factors are similar[22]. This parity indicates that schools in Oyo State may have succeeded in creating gender-inclusive environments that foster equal motivational engagement. Gender roles, societal expectations, and peer dynamics could still influence how boys and girls express or channel their motivation, even

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if their measured levels remain similar**.** It is argued that the emotional context surrounding learning motivation should be considered, as boys and girls may experience different psychological pressures that are not captured by quantitative scores[19]. Future studies could investigate whether qualitative differences in motivational experiences exist, such as differing stress responses, preferred learning styles, or the impact of gender-specific teacher interactions.

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Chapter Five

Conclusion

5.1 Summary of Findings

The study provides valuable insights into the psychosocial adjustment, parental involvement, sexuality education, and learning motivation among early adolescents in Oyo State, Nigeria. Adolescents generally exhibited positive psychosocial adjustment, with a mean score indicating resilience and optimism. Many participants expressed a strong belief in future success, though slight psychological distress was noted in more sensitive areas, such as emotional distress and sleep difficulties. These findings highlight the need for early mental health interventions alongside efforts to reinforce positive psychosocial attributes.

Parental involvement was perceived as high. While parents were highly engaged in monitoring school behaviour and guiding peer interactions, their support for emotional development was lower, indicating a gap in teaching emotional awareness and handling feelings. This suggests the need for parents to place greater emphasis on fostering emotional well-being to improve adolescents' psychosocial health. Meanwhile, sexuality education was found to be adequate, with a moderate score. Misconceptions about puberty, menstruation, and sexual abuse were prevalent, necessitating the urgent need for comprehensive, gender-inclusive sexuality education to address these gaps and promote accurate knowledge.

Learning motivation among early adolescents was high driven by both intrinsic and extrinsic factors such as parental expectations and teacher encouragement. A supportive school environment further enhanced their motivation. When examined together, parental involvement, sexuality education, and learning motivation accounted for 26.6% of the variance in psychosocial adjustment, with parental involvement emerging as the strongest predictor. Although sexuality

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education had a weaker impact, these findings emphasise the need to strengthen sexuality education programmes for greater effectiveness. Gender differences were also noted, with male adolescents showing slightly higher psychosocial adjustment than females, although both genders demonstrated equal levels of understanding in sexuality education, highlighting the importance of consistent and inclusive instructional approaches across genders.

5.2 Conclusion

In conclusion, this current study highlights the intricate relationship between psychosocial adjustment, parental involvement, sexuality education, and learning motivation among early adolescents in Oyo State, Nigeria. Adolescents demonstrated overall resilience and optimism, though signs of emotional distress call for early mental health interventions. Parental involvement, particularly in monitoring school behavior, was significant, yet emotional support remains a critical gap requiring more attention. The findings also reveal a concerning deficiency in sexuality education, with widespread misconceptions about puberty, menstruation, and sexual abuse, underscoring the need for comprehensive, gender-inclusive programs. Furthermore, strong learning motivation driven by intrinsic and extrinsic factors, coupled with a supportive school environment, contributes to positive psychosocial adjustment. Collectively, parental involvement, sexuality education, and learning motivation accounted for a significant portion of psychosocial adjustment, with parental influence being the strongest. These results emphasise the need for integrated strategies that enhance parental support, improve sexuality education, and sustain learning motivation to foster holistic adolescent development across both genders.

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5.3 Recommendations

The following are recommended based on the findings of this current study:

1. School counsellors should implement early mental health intervention programs to address emotional distress and sleep difficulties.
2. Parents should engage more in their children's emotional development by organising parental training on emotional awareness and support strategies.
3. Public schools in Oyo State should develop comprehensive, gender-inclusive sexuality education programmes to address misconceptions about puberty, menstruation, and sexual abuse.
4. Teachers should foster a supportive school environment that encourages both intrinsic and extrinsic motivators, such as recognising student achievements and involving parents and teachers in motivational strategies.
5. Counselling psychologists are encouraged to design integrated programmes that combine parental involvement, sexuality education, and learning motivation to improve overall psychosocial adjustment.
6. Public schools should prioritise parental involvement initiatives as the strongest predictor of psychosocial adjustment, followed by programmes aimed at enhancing learning motivation.
7. Public schools should develop gender-specific support programmes addressing unique psychosocial challenges faced by male and female adolescents.
8. School counsellors should implement uniform sexuality education programmes that provide equal information to both genders, addressing stereotypes and misconceptions.

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9. Teachers in public schools should develop gender-responsive teaching strategies that cater for the learning needs of both male and female students.

5.4 Contribution to Knowledge

This study has made several significant contributions to the existing body of knowledge on early adolescent development, particularly in the context of Oyo State, Nigeria. Firstly, it provides a balanced understanding of psychosocial adjustment among early adolescents, revealing a generally positive outlook with high levels of resilience and optimism. While previous studies have explored adolescent mental health in broader contexts, this study highlights specific areas of psychological distress, such as emotional and sleep difficulties, thereby emphasising the need for targeted early interventions in mental health support. This insight enhances the existing literature by magnifying the strengths and vulnerabilities of early adolescents in this Oyo State, Nigeria. Secondly, the study sheds light on parental involvement from a localised perspective, presenting a more detailed analysis of how Nigerian parents engage with their early adolescents. Unlike previous research that primarily focused on academic support, this study examines both behavioural guidance and emotional support. The finding that parental involvement in emotional development is relatively weak compared to behavioural monitoring identifies a critical gap that has not been thoroughly addressed in earlier research. This provides a fresh direction for future studies on how culturally specific parenting practices influence adolescent psychosocial health.

Thirdly, the current contributes to the field of sexuality education by revealing widespread misconceptions among early adolescents, particularly regarding puberty, menstruation, and sexual abuse. Unlike many existing studies that focus on sexual health knowledge in older adolescents or adults, this study underlines the urgent need for comprehensive sexuality

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education at an earlier developmental stage. By exposing the prevalence of gender-based stereotypes and misinformation, the findings call for a gender-inclusive approach to sexuality education, broadening the scope of current educational interventions. Moreover, this study deepens the understanding of learning motivation by illustrating how both intrinsic and extrinsic factors, such as parental expectations and teacher encouragement, influence adolescent motivation in Oyo State. While motivation is a well-researched topic globally, the study adds a culturally relevant perspective by examining how local socio-economic and familial factors interplay with educational aspirations. Finally, the study's exploration of the combined influence of parental involvement, sexuality education, and learning motivation on psychosocial adjustment provides a holistic approach that is relatively rare in the literature. The finding offers a unique insight into how these domains interact. This integrated perspective encourages future researchers and policymakers to adopt multi-faceted strategies when addressing adolescent well-being.

5.5Suggested Areas for Further Research

Based on the findings of this study, future research should explore targeted early interventions for addressing specific areas of psychological distress, such as emotional and sleep difficulties, among early adolescents to enhance their psychosocial adjustment. Further studies could also examine the impact of culturally specific parenting practices on early adolescents' emotional development, particularly focusing on how increased parental support in this area can improve psychosocial health. Additionally, research is needed to develop and evaluate comprehensive, gender-inclusive sexuality education programmes that address prevalent misconceptions about puberty, menstruation, and sexual abuse at an earlier developmental stage. Investigating the

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interplay between socio-economic factors, parental expectations, and learning motivation in different cultural contexts could provide deeper insights into how these factors influence educational aspirations and long-term academic engagement. Lastly, future studies should assess the combined influence of parental involvement, sexuality education, and learning motivation across various regions to determine the broader applicability of these findings and inform multi-faceted strategies for promoting adolescent well-being.

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Appendix

Lead City University, Ibadan

Department of Arts and Social Science Education

Psychosocial Adjustment, Parental Involvement, Sexuality Education and Learning Motivation Questionnaire (PAPISELM-Q)

Dear Respondent,

This questionnaire is designed to collect information on parental involvement, sexuality education learning motivation and psychosocial adjustment. Your sincere responses would be appreciated, as your responses would be used only for research purposes only and treated with utmost confidentiality. Kindly respond to all the items carefully, as this will be used for research purpose. PLEASE DO NOT WRITE YOUR NAME.

Thank you for your time.

Section A: Demography (Please Tick as Appropriate)

1. Class: Science { }, Arts { }, Commercial { }
2. Age_____
3. Religion: Christianity { }, Islam { }, Others _____

Section B: Psychosocial Adjustment

Please Tick or put a cross [X] or Tick in the table below the number that best describes your response.

	Optimism and Coping Strategy (OCS)	**Strongly Agree**	**Agree**	**Disagree**	**Strongly Disagree**
1.	I feel though my parents/guardians are poor, I will be rich				
2.	I feel life will not continue to be difficult for me				
3.	I feel I may be nobody now but I will be a great person someday				
4.	I hope a miracle will happen				

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	General Psychosocial Dysfunctions (GPD)				
5.	I feel I am a disgrace to my family				
6.	I feel like running from everything around me				
7.	I find it difficult to sleep				
8.	I feel like few years from now, I will be a total failure				
9.	I feel guilty for all the difficulties in my family				
10.	I cannot see any light of hope in my future life				
11.	I feel like everything around me is falling apart				
12.	Everywhere I turn, I see that my life is hopeless				
13.	Judging from the situations in my family, I am hopeless				
14.	I feel my family is a shame to the community				
15.	I have too many problems; I cannot be free from them				
16.	I feel my presence causes distraction to people				
17.	It is as if I am a burden to my family/community				
18.	I feel like things just wouldn't work for me				
19.	I think of killing myself				
	Behaviour and Relationship Problems (BRP)				
20.	People of my age hate me				
21.	I break rules				
22.	I feel people of my age will take me for granted				
23.	I shout at people even adults				

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Section C: Parental Involvement Scale

Key: Strong Disagree (SD), Disagree (D), Agree (A), Strongly Agree (SA)

S/N	My parents……	SD	D	A	SA
1	talk to me about feeling good about my life.				
2	teach me cues to become aware of my emotions.				
3	teach me to respond appropriately to feelings in my peers.				
4	encourage me to try to deal with environmental influence on my behaviour.				
5	talk to me about identifying my needs at this stage of life.				
6	teach me about my roles as a child at home.				
7	talk to me about my behaviour within the school.				
8	teach me how to cope with issues that concerns peer relations.				
9	talk to me about the importance of keeping to school rules.				
10	monitor my behaviour in the school.				
11	teach me to be assertive in any social gathering.				
12	encourage me to develop prosocial behaviour.				

Section D: Sexuality Education Scale

S/N	Knowledge of Sexuality Education	True (3)	False (2)	Not Sure (1)
1.	During puberty, only physical changes occur but not mental changes			
2.	Wet dream is one kind of disease			
3.	Menstruation occurs for hormonal balance			
4.	Only girls are sexually abused			
5.	Virginity is only for girls			
6.	There is a risk of pregnancy if the family planning method is not adopted			
7.	Unplanned pregnancies cause abortion			
8.	Sex and physical relation are the same thing			
9.	Sexual Infection is transmissible from one partner to another			
10	AIDS spread through Mosquito and Bug			
11	Shaking hands with an infected person			
12	There are private parts of the body			
13	There are public parts of the body			

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Section E: Learning Motivation Scale

Key: Strong Disagree (SD), Disagree (D), Agree (A), Strongly Agree (SA)

S/N		SD	D	A	SA
1	I have inner urge to learn in the classroom				
2	I want to learn as much as I can				
3	I desire to know more about my school subject				
4	I have innate interest in knowledge and skills in the classroom				
5	I like to learn for self-satisfaction				
6	I find fulfilment in learning lessons taught in the classroom				
7	I find learning personally enjoying				
8	My parents expect me to learn optimally				
9	I learn better when I remember celebrations in the family about achievements				
10	I am interested in learning because of gifts				
11	My teachers say that it is good to learn in the classroom				
12	I am under pressure to learn in school and have high score				
13	The school environment gears me uo to be interested in learning				
14	I have to learn in order to get rewards and receive tokens				
15	I learn in the classroom so as to avoid punishment				

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Bio-data

A. Personal Data

Name: Oyebola Olubunmi IGELEKO

Phone Number: 08055361316

Email:igelekoobikunle@gmail.com

Date of Birth: 28th February 1967

Place of Birth: Ibadan

Home Address: Victory Garden Estate, Oluyole Extension, Ibadan, Oyo State.

State of Origin: Oyo State

Local Government: Egbeda

Nationality: Nigerian

Marital Status: Married

Sex: Female

Religion: Christianity

Next of Kin: General Adebola Lawrence Igeleko

Educational Qualifications with Dates

Qualification: Doctor of Philosophy (PhD) in Guidance and Counselling in view

Course: Guidance and Counselling

Institution: Lead City University. 2022 till date

Qualification: Master of Education in Counselling Psychology

Course: Counselling Psychology

Institution: Lagos State University. 2013

Qualification: Bachelor of Education in Guidance and Counselling

Course: Guidance and Counselling

Institution: University of Ibadan 2008

Qualification: Nigeria Certificate in Education

Course: Home Economics

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B. Educational Background

Institution: Federal College of Education Abeokuta 1994

Qualification: City and Guilds

Course: Catering and Hotel Management

Institution: Government Technical College, Ile-Ife 1989

Qualification: West African School Certificate. 1985

Qualification: Primary School Learning Certificate. 1980

Qualification: Computer Appreciation Course

Institution: Nigerian Army School of Signals, Lagos. 2010

My Tees Healthcare Nurse Aide Training, Columbus, Ohio, USA. 2015

Religious Education Workers in Training Programme, Redeemed Christian Church of God. 1999

School of Disciples The Redeemed Christian Bible College (RCBC) 2009 - 2010

C. Work Experience

Trans Nigerian Motel Ibadan.	1989-1990
Nigerian Breweries, Ibadan.	1990-1992
United Christian Secondary School, Lagos.	2008-2009
Golden Penny Company, Lagos.	2013-2017
Nigerian Correctional Center, Agodi, Ibadan.	2024 (Practicum)
Miles Stone School, Elebu. Ibadan.	2020- till date

(Voluntary Teacher)

D. Awards and Fellowships - NA

E. Membership of Academic/Professional Bodies - NA

F. Publications - NA

G. Major Conferences Attended with dates-NA

H. Referees

Engr. Olusegun Omotunde Obikunle
National Gallery of Art. Osogbo, Osun State.

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Pastor Felix Femi Makinde
Zonal Pastor, Redeemed Christian Church of God (RCCG).
Ibadan, Oyo State.

Professor Ihebuzor Lambert
Department of Mass Communication and Media Technology.
Lead City University.

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The University Compliance Certification

This is to certify that this thesis was written by Oyebola Olubunmi, IGELEKOwith matriculation number LCU/PG/003019in the Department of Arts and Social Science Education, Faculty of Education, Lead City University, Ibadan, in compliance with the approved University format and style

…….. ……

Signature Date

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