

## **Roles of father-child relationship, intellectual functioning and social self-efficacy on mental health of undergraduates in Port Harcourt**

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### **Abstract**

As students strive to excel in their academic and social endeavours, attention is hardly given to their mental health. Mental health is an integral part of one's life often neglected which later results to depression, suicide and other psychological issues. This study investigated roles of father-child relationship, intellectual functioning and social self-efficacy on mental health of undergraduate students. Data were collected using cross-sectional survey design from a simple random sample of 237 (174 female and 65 male) undergraduate students in Port Harcourt, Rivers State, Nigeria, with age range of 17- 32years. Participants completed self-report measures of Parental Bonding Instrument (PBI), Standard Progressive Matrices (SPM), Perceived Social Self-Efficacy (PSSE) and Mental Health Index (MHI). Four hypotheses were postulated and tested using Hierarchical Multiple Regression Statistics. Results showed that father care did not significantly predict mental health and father over protection did not significantly predict mental health. Results further showed that intellectual functioning did not significantly predict mental health. However, social self-efficacy had a positive, predictive relationship with mental health. Discussion highlighted the need to implement psychotherapy and social skills programs that will promote positive mental health of students in tertiary institutions.

**KEYWORDS:** Father Care, Father over Protection, Intellectual Functioning, Mental Health, Perceived Social Self Efficacy

## **Background to the study**

Human beings, regardless of their mental status, have mental health needs. Mental health has an impact on one's ability to handle changes, life events, and the various transitions. In this study, health may be used interchangeably with well-being. Well-being is the most important aspect of every human being. It is crucial to care for one's health. People in society do all sorts of things to secure their physical health, but many people disregard their mental wellbeing while focusing only on their physical wellbeing. Human health has different aspects, such as psychological, financial, physical, social and spiritual health. In this study, the concentration will be on mental wellbeing, emotional well-being otherwise called psychological well-being. Everyone is concerned with physical health but pays little or no attention to mental health.

A poor mental health poses a serious danger to self and society at large. Borschmann (2018) reported that the reasons why most young people harm themselves is because they do not know how to respond to intense emotional pain or being overwhelmed by negative feelings or memories.

Relationship is an integral part of every culture and can as well be seen in families. Youths acquire a sense of belonging in their various homes. Therefore, one should expect that the communication pattern and interactional styles in our various homes have a role to play in a child's later life. Parent-child relationship is the special and lasting relationship between the father or mother and the child. For one to understand the parent-child relationship, it is necessary to look at how fathers and children communicate physically, emotionally, and socially. The concerns of parents include keeping the lines of communication open, providing support and handling their children's behaviour, all activities that make the transition to puberty easier (Zaff & Moore, 2002). Scholars like Murdock and Love (2004) affirmed that attachment is a

significant predictor of psychological wellbeing and that psychological well being is significantly related to parental care (Indumathy & Ashwini, 2017). A study by Stafford, Kuh, Gale, Mishra and Richards (2015) revealed that mother-child and father-child relationships may have short-term and long-term consequences for positive mental well-being. The researchers further observed that greater well-being was seen among offspring who had higher parental care when compared with lower parental psychological regulation within the same ages. In conclusion, Stafford. et al., (2015) opined that well-being is positively related with parental care and that paternal care was more closely related to well-being than maternal care. In contrast, Šeboková (2018) showed that mother's participation was a major predictor of all well-being factors including Autonomy although the study affirmed that parental involvement had a positive significance with the development and well-being of university students

Another variable believed to likely have a distinct influence on mental health is intellectual functioning. According to Gardner, intelligence is the capacity to tackle issues that are esteemed inside a social settings or cultural settings (Gardner, 1995). Researchers like Keyes, Platt, Kaufman and McLaughlin (2017) investigated the relationship between psychiatric disorders and intelligence. The result showed that mental health disorders like: mood disorder, behavioural disorders and substance abuse were strongly related with low intelligence. In their study of the relationship between intelligence and mental disorders among older adults, Wraw, Deary, Der and Gale (2016) reported that higher intelligence quotient in youth was significantly related with mental health and lower levels of depression at age 40. This study further showed that mid-life mental health outcomes were significantly linked with intelligence. In similar vein, Wigtil and Henriques (2015) revealed that the relationship between mental health and

intelligence was negative in young adults while it was observed that the more intelligent students were, the lower their mental health turned out in the study.

Self-efficacy has been identified as an important predictor of mental health among elderly males and females (Singh, Shukla & Singh, 2010). The impact of self-efficacy on the social environment is known as perceived social self-efficacy. Perceived self-efficacy is an individual's ability to carry out the social intuitive undertakings expected to build up and keep up relational connections. This feeling have made different impacts across four fundamental cycles; these include mental, motivational, psychological and selection processes (Bandura, 1994). There are four fundamental wellsprings of impact that can be set up for individuals' belief in their efficacy (Bandura, 1994). They are: mastery experiences, vicarious experiences, social persuasion or verbal persuasion and finally somatic/emotional influence. Siddiqui (2015) stated that self-efficacy improves mental well-being. Studies have shown that self-efficacy has a positive significant impact on the emotional well-being of undergraduate student (Siddiqui, 2015; Gull, 2016). There is dearth of research on father-child relationship and mental health of university students, as well as cognitive intelligence as predictor of mental health. This study is focused on social self-efficacy as opposed to general self-efficacy.

### **Statement of the Problem**

Youths in Niger Delta areas are known to live a questionable lifestyle. This could probably be true because there youths are often overwhelmed with negativities ranging from the activities of the oil firms. The study is expected to unravel if questionable life style of Rivers State youths is as a result of poor mental health. The roles of father-child relationship, intellectual functioning and social self efficacy in the life of a youth's mental health will also be made clearer to enable counsellors understand the link and provide appropriate counselling services to our growing

youths who are overwhelmed with negativities in their various environment. And if really there is a notable link, the study will afford counsellors a chance to advocate healthier form of father child relationship and ways to channel intellectual functioning and social self efficacy to improve the youth's mental health positively. An individual's mental health condition to a certain extent dictates his or her way of life, and activities he/she engages into. Father-child relationship is the basis of good behaviour among children, which means that peer influence is minimized or buffered by father's close relationship, which in turn does not expose them to negative mental health and also low self- efficacy. For children and adolescents, a stable and supportive environment is important. Most researches in father-child relationship focus on children and adolescents (Fisher, 2017), but the present study deals with youths (undergraduate students). Researchers like Penney, Miedema and Mazmanian (2015) have observed that intelligence has positive relationships with generalized anxiety disorder and depressive symptoms. On the other hand, Wigtil and Henriques (2015) revealed that the relationship between mental health and intelligence was negative in young adults. This reveals the presence of contradicting reports which the study strive at resolving.

Self-efficacy has been identified as an important predictor of mental health among elderly males and females (Singh *et al.*, 2010) but few studies (Eloff and Graham, 2020; Laher, Bain, Bemath, de Andrade and Hassem, 2021) have in reality examined its roles on the mental health of undergraduates in Africa at large and Nigeria precisely. Studies have also established that positive psychological well-being, regulation of stress, higher self-esteem, better physical condition, better adaptation to and recovery from diseases correlates with high self- efficacy (Bisschop, Knegsman, Beekman & Deeg, 2004). Summarily, despite the unique findings, few studies have been conducted using the Nigerian youths.

## **Purpose of the Study**

This study aims to ascertain whether father-child relationship, intellectual functioning and self-efficacy would predict positive mental health among undergraduates in Port Harcourt, Rivers State, Nigeria. As the pride of every Nation, the youths of every society should be trained, supported and motivated for a better society. Youthful stage has been marked as an onset for many psychological and personality disorders which affects them academically, psychologically, intellectually and socially. Having observed this, the researchers are interested in finding out the underlying factors which influences youth's mental condition. Specifically, the study aims to examine whether:

1. Father care would predict mental health of undergraduate students
2. Father protection would predict mental health of undergraduate students
3. Intellectual functioning would predict mental health of undergraduate students.
4. Social self-efficacy would predict mental health of undergraduate students

## **Theoretical Framework**

### **Psychological Well Being Theory**

This study anchors on the psychological well-being theory by Ryff (1995). This theory focuses on autonomy which is developing a control of one's own behaviour through an internal intuition, personal growth which is the ability to develop and expand one's life; when the youth is intellectually sound, environmental mastery which is the selection and regulation of both real and imagined world, purpose in life which is setting goals that contribute to the appreciation of life, positive relations with others which is trusting and having long lasting relationships as well as communication and support network is not just within the family but with other people and self-

acceptance builds self-confidence. In other words, positive mental health can be enhanced when the youth develops autonomy which starts with a good communication and relationship with their parents most importantly the paternal attachment (secure base) on which these other components will be developed. Having trust and long lasting relationship stems from the family, the individual is taught to accept themselves, find their purpose in life and develop a positive relationship with other people. It is when the foundation of autonomy, personal growth, environmental mastery etc. has been cultivated in the life of the youth that it can manifest into a confident and intellectually sound youth. The theory is centred on the power of the individual with reference to the cognitive and social aspect of an individual. Humans are not made of biological components alone rather they are made of the physical, psychological, cognitive, social and spiritual components. This theory covers the cognitive aspect (intellectual functioning), the psychological aspect (mental health, the physical aspect (father-child relationship) and the social aspect (social self-efficacy). Therefore, this theory will be the anchor of this research since it covers the cognitive, social aspects of the youths.

### **Empirical Review**

A study by Pyun (2014) at the Minnesota State University focused on the influence of father-child relationship on adolescents internalizing problems and inattentive/hyperactive behaviours. this study was conducted using 48 Participants which included adolescents gathered using a community based programme and they filled self-report questionnaires. Result showed that children who had better relationships with their father experienced lower internalizing problems and lower inattention/hyperactive behaviours than older children. In another study at Sriperumbudur, the researchers sampled undergraduates and found that there was a significant negative relationship between psychological well-being and parental care (Indumathy &

Ashwini, 2017). Interestingly, Stafford, Kuh, Gale, Mishra and Richards (2015) examined the role of parent-child relationship and positive mental well-being using data acquired from the National Health and Development Survey of the Medical Research Council (NHDSMRC). The study included a sample of five thousand three hundred and sixty-two participants (5362) from single births in marriage from non-manual and farming households. The data was conducted using longitudinal survey method which was collected from birth and it was lastly collected in 2006-2011 (the data was collected 23 times. The result showed that mother-child and father-child relationships may have short-term and long-term consequences for positive mental well-being. Furthermore, it was observed that greater well-being was seen among offspring who had higher parental care when compared with lower parental psychological regulation within the same ages. The study revealed that paternal care was more closely related to well-being than maternal care. Šeboková (2018) study revealed that the presence of fathers was positively associated with the positive relationship. While mother's participation was a major predictor of all well-being factors including Autonomy. The study generally revealed that parental involvement had a positive significance with the development and well-being of university students.

Wraw, Deary, Der and Gale (2016) examined the associations between intelligence and mental disorders among older adults using five thousand seven hundred and ninety-three (5793) participants. The result showed that higher intelligence quotient in youth was significantly related with mental health and lower levels of depression at age 40. The result also showed that mid-life mental health outcomes was significantly linked with intelligence. Similarly, Keyes, Platt, Kaufman and McLaughlin (2017) in their study found that intelligence was not associated with mental health disorders like: post-traumatic stress disorder, eating disorders, and anxiety disorders and specific phobia while major depression was positively associated with intelligence.



Furthermore, Wigtil and Henriques (2015) studied the relationship between mental health and intelligence among young adults. The results revealed that the relationship between mental health and intelligence was negative in young adults while it was observed that that the more intelligent students were, the lower their mental health turned out in the study. Midouhas, Flouri, Papachristou and Kokosi (2018) examined whether general intelligence has a relationship with inflammation and psychological distress. It was observed that greater psychological distress was associated with C-Reactive Protein (CRP) in males but not in females after taking into account a range of confounders such as health behaviours (for example, smoking and alcohol intake), history of cardiovascular disease and other physical health indicators were left out of studies while examining inflammation and psychopathology. They also showed that among males having a higher IQ was associated with less psychological distress. Also with the case for males with high CRP levels, such that males with high CRP levels were less affected in terms of their psychological distress if they had higher levels of general intelligence.

In a study at the Aligarh Muslim University, Siddiqui (2015) explored the relationship between psychological well-being and self-efficacy among undergraduates. The result showed that a high level of self-efficacy contributes to a high level of psychological wellbeing but when self-efficacy is low, then psychological well-being will also be low. Gull (2016) showed that there was a significant positive correlation between self-efficacy and mental health of qualified students. The study also revealed a significant positive correlation between self-efficacy, general positive effects and psychological well-being.

In their study using different educational institutions in Karachi Pakistan, Ahmad, Yasien and Ahmad (2014) revealed that there is a negative relationship between perceived social self-

efficacy and level of depression among students. It was therefore, concluded that there is a relationship between perceived social self -efficacy and depression in adolescents.

### **Hypotheses**

The following Hypotheses were postulated and tested in the present study:

1. Father-care will be a positive predictor of mental health.
2. Father-protection will be a positive predictor of mental health.
3. Intellectual functioning will be a positive predictor of mental health.
4. Social self-efficacy will be a positive predictor of mental health

### **METHOD**

#### **Participants**

The researchers conducted the study in Port Harcourt which is the capital of Rivers State. The choice of Port Harcourt was informed by the fact that Rivers State is part of Niger-Delta where many youths are believed to live questionable lifestyles. Two hundred and thirty-seven (239) participants were involved in the study. The participants consist of undergraduates in various tertiary institutions in Port Harcourt. The researchers utilized simple random sampling technique in selecting the tertiary institutions, Faculties, Departments and the participant's various levels.

However, all those in the selected levels that were willing to participate in the study were given study materials to attend to. Out of seven institutions, the researchers randomly picked two institutions. The tertiary institutions employed by the researchers were the Rivers State College of Health and Science Management and Captain Elechi Amadi Polytechnic. Out of the 239 participants, 174(69.6%) were females, 65(26%) were males. 4.4% of the participants did not fill their gender properly. The participant's age ranges from 17-32 years (Mean = 21.2; SD =3.5).

Out of all the participants, 221(88.4%) were single while 9(3.6%) were married while 9 (8%) participants did not identify their status properly. With regards to the ethnic groups, the Igbos were 113(45.2%) while others were 57(22.8%) but 69(32%) participants did not fill their ethnic group properly. The participants were drawn from different religious denominations such as: Catholic 73(29.2%), Protestant 20(8.0%), Pentecostal, 88(35.2%), Islam 1(.4%) and others, 14(5.6%). 43(21.6%) participants did not fill their religion properly. The participants were drawn from different educational levels which were: Ordinary National Diploma 1 (SSCE level), 2(.8%), Ordinary National Diploma 2 125(50%), Higher National Diploma 1 62 (24.8%) while 50 (17.2%) participants did not fill their educational level properly.

### **Instruments**

**Parental Bonding Instrument:** The Parental Bonding Instrument (PBI- FF) was developed by Parker, Tupling and Brown (1979). It was used to measure the relationship between father and child. The scale is a 25 item scale with 12 ‘father care’ items and 13 ‘father overprotection’ items as perceived by the child. The internal consistency for the scale is .94 (Parker, Tupling and Brown, 1979). The scale uses a 4-point scale (ranging from 1 = very like to 4 = very unlike). The PBI-FF was also revalidated by the researchers through a pilot study involving 93 participants comprising of 54 females and 39 males from the Imo state University, Owerri and University of Nigeria, Nsukka. The mean age of the participants were 22.74. Reliability analysis was performed on the data obtained from them. The results showed that the scale exhibited an acceptable Cronbach’s alpha of .94. The concurrent validity when administered with the Parker, Tupling and Brown (1979) parental bonding instrument mother form (PBI-MF) was .40.

**Standard Progressive Matrices (SPM):** This was developed by Raven in 1936. It is a test of a person’s capacity at the time of the test to apprehend meaningless figures presented for his

observation, see the relations between them and by so doing develop a systematic-method of reasoning. This instrument was used in measuring intellectual functioning of participants. The scale-consists of sixty (60) problems divided into five sets of 12. The problems become progressively more difficult. Garcia, Santo & Pires (2021) reported a Cronbach's alpha of .94 among the Portuguese samples. The SPM was revalidated by the researchers through a pilot study using 40 participants which consist of 18 males and 22 females from the University of Nigeria, Nsukka and Petroleum Training Institute in Delta state. Their mean age was 22.47. The SPM according to the researchers possesses a test-re test reliability of 0.83 and a concurrent validity of .82.

Perceived Social Self- Efficacy Scale (PSSE): This was developed by Smith and Betz (2000). This scale is a self-report measure of self-efficacy. The 25-item scale was created to assess sense of perceived social self- efficacy in one's life. The scale uses a 5-point rating scale (ranging from 1 = no confidence at all to 5 = full confidence). All 25 items are directly scored. Smith and Betz reported the scale having internal consistency coefficient alpha of .94 and validity of  $r = .60$  and  $.62$  for males and females, respectively. The scale was revalidated using 93 participants of the University of Nigeria, Nsukka. The PSSE exhibited a Cronbach's alpha of .83.

Mental Health Index (MHI): The Mental Health Index (MHI) was developed by Immanuel (2016). MHI is a 14-item scale with response options ranging from not true to Very true. MHI was designed to measure one's psychological adjustment, emotional stability, and mental health in a positive dimension (as opposed to focusing on psychopathology). The 14-items scale uses a 5-point rating scale (ranging from 1 = not true to 5 = very true). All of the 14 items are directly scored. The Cronbach alpha reported by Immanuel (2016) was .81. Ilorah (2017) in a validation

study of the MHI among a Nigerian sample, recorded a Cronbach's alpha of .84 and a significant correlation with the Warwick-Edinburgh Mental Well-being scale ( $r = .61, p < .001$ ). The scale was further revalidated using 93 undergraduates from the University of Nigeria, Nsukka. MHI when administered together with the World Health Organization Mental Wellbeing Scale (WHO-5) showed that the scale has a concurrent validity of .39,  $p < .01$  (Topp, Ostergaard, Søndergaard & Bech, 1998).

### **Procedure**

The researcher randomly selected two schools which were Rivers State College of Health and Science Management and Captain Elechi Amadi Polytechnic. A Simple random sampling method to select the Faculties, Departments and also students' levels. In the study, some research assistants that were staff of the respective institutions were employed. The participants were met in their respective schools and classrooms, rapport were established and their participatory consent were sought in the study. The questionnaires were issued and retrieved from the participants upon completion. Administration of the questionnaires lasted for two weeks, thereafter those properly filled and collected were further analysed by the researcher. Out of the 250 questionnaires distributed, 239 were properly filled and used for further analysis, the remaining 11 questionnaires were not properly filled and so were not analysed. The data obtained from respondents were analysed with the use of the Statistical Package for the Social Sciences (SPSS) version 23.

### **Ethical Consideration**

Ethical responsibilities such as informed consent, which seeks to obtain the permission of a participant prior to the study was observed; participants were also accorded voluntary participation with a provision for participants seeking to leave to do so. Furthermore,

confidentiality of the information provided was assured. Thus, each participant’s privacy was protected.

**Design and Statistics**

The design of the study was cross-sectional survey design. Descriptive analysis was used so as to describe the basic features of the data and hierarchal multiple regression was used for data analysis. The data obtained from respondents were analysed with the use of the Statistical Package for the Social Sciences (SPSS) 23.

**Result**

**Table 1: Descriptive Statistics of Variables**

	<b>Mean</b>	<b>Std. Deviation</b>	<b>N</b>
Mental Health	43.68	11.43	237
Father Care	21.70	6.12	237
Father Over Protection	19.30	5.41	237
Social Self-efficacy	73.93	17.41	237
Intellectual functioning	35.57	10.94	237

From the Table 1, participants reported mean score of 43.68 (SD = 11.43) in mental health. Participants had mean score of 21.70 (SD = 6.12) in father care, 19.30 (SD = 5.41) in over protection, 73.93 (SD = 17.41) in social self-efficacy, and 35.57 (SD = 10.94) in intellectual functioning.

**Table 2: Correlation Analysis of Variables**

	<b>X</b>	<b>SD</b>	<b>1</b>	<b>2</b>	<b>3</b>	<b>4</b>	<b>5</b>
1 Mental Health	43.68	11.43					
2 Father Care	21.70	6.12	.19**				
3 Father Over Protection	19.30	5.41	-.03	-.04			
4 Social Self-efficacy	73.93	17.41	.24**	.17*	-.05		
5 Intellectual Functioning	35.57	10.94	.04	-.04	.11	.02	

\* =  $p < .05$ , \*\* =  $p < .01$

From the table 2, there was significant positive relationship between father care and mental health ( $r = .19, p < .05$ ). Thus, participants who reported high level of father care also scored high in mental health while participants who scored low in father care also reported low level of mental health. Results also showed no significant relationship between father protection and mental health ( $r = .03, p > .05$ ). Results revealed significant positive relationship between social self-efficacy and mental health ( $r = .24, p < .01$ ). Participants who scored high in social self-efficacy also scored high in mental health while those who had low scored in social self-efficacy also reported low level of mental health. Intellectual functioning had no significant relationship with mental health ( $r = .04, p > .05$ ).

**Table 3: Hierarchical multiple regression for predictors of mental health**

Step	Variable	B	Beta	T	Sig	Adjusted R <sup>2</sup>	ΔR <sup>2</sup>	ΔF
1	Age	.48	.15	2.01	.05	.02	.03	2.54
	Gender	-.91	-.03	-.48	.64			
2	Father Care	.27	.14	1.97	.05	.03	.02	3.86
3	Father Over Protection	.02	.01	.11	.91	.02	.00	.01
	Social self-efficacy	.17	.27	3.88	.00			
4	Intellectual Functioning	.03	.03	.37	.72	.09	.00	.13
5	* = $p < .05$ , ** = $p < .01$							

The results of the hierarchical multiple regression in Table 3 in which mental health was the dependent variable and age and gender were used as control variables (step 1) showed that age was not a significant predictor while gender was a significant predictor accounting for 3% of variance in mental health.

Father care in step 2 of the equation accounted for 3% of variance in mental health. Results indicate that father care did not significantly predict mental health,  $\beta = .14$ ,  $t(237) = 1.97$ ,  $p > .05$ . Based on this, hypothesis 1 which states that father's care will significantly predict mental health among undergraduates was not confirmed.

Father over protection entered in step 3 of the equation did not significantly predict mental health,  $\beta = .01$ ,  $t(237) = .11$ ,  $p > .05$ . Based on this, hypothesis 2 which states that father's protection will significantly predict mental health among undergraduates was not confirmed.

Intellectual functioning was entered in step 5, it accounted for 0% of variance in mental wellbeing scores. Results showed that intellectual functioning did not significantly predict mental health,  $\beta = .03$ ,  $t(237) = .37$ ,  $p > .05$ . Based on this, hypothesis 3 which states that intellectual functioning will significantly positive predict mental health among undergraduates was not confirmed.

Social self-efficacy was entered in step 4, it accounted for 7% of variance in mental health scores. Results showed that social self-efficacy was a significant predictor of mental health,  $\beta = .27$ ,  $t(237) = 3.88$ ,  $p < .05$ . This implies that undergraduate social self-efficacy has causal influence on their mental health such that low level of social self-efficacy indicate poor mental health while high level of social self-efficacy indicate good mental health. Based on this,



hypothesis 4 which states that social self-efficacy will be a significantly predict mental health among undergraduates was confirmed.

## **Discussion**

The current study aimed to examine whether father-child relationship, intellectual functioning, social self-efficacy would predict mental health. Father-child relationship is simply the existing bond between a father and a child, this bond is divided into two subgroups which is father care and father protection. This current study showed that father care did not predict mental health but father care had a significant relationship. In similar vein, the result of the study also showed that father protection did not predict mental health. Hence, the first and second hypotheses were not confirmed in the study. The finding of this study contradicts the work of Love & Murdock (2004) and Pyun (2014) who reported that paternal care was a significant predictor of well-being. Interestingly, the result of the study is consistent with previous findings by other researchers (e.g. Stafford, Kuh, Gale, Mishra & Richards 2015; Indumathy & Ashwini, 2017; Šeboková, 2018) who reported the significance of parental involvement in the positive development of university student's well- being.

Furthermore, the study examined intellectual functioning as a predictor of mental health. Intellectual functioning is the level of one's experiences being available for the solution of immediate problems and the planning for the future (Goddard, 1943). The study found that Intellectual functioning had no significant relationship with mental health and thus did not significantly predict mental health. Thus, the third hypothesis which stated that intellectual functioning will significantly predict mental health was not confirmed. The result of this finding is consistent with previous findings by researchers (such as Wigtil & Henriques, 2015) who reported that there was no significant relationship between intelligence and psychological well-

being. Some other researchers found a contradictory view. Researchers such as (Midouhas, Flouri, Papachristou & Kokosi, 2018; Penney, Miedema & Mazmanian, 2015) reported that intelligence was significantly related with mental health.

This study revealed that intellectual functioning was not a significant positive predictor of mental health may be because many of the often-cited studies only examine intelligent quotient one standard deviation above or below the mean and thus, stop short of including those with very superior (130 and above) intelligence (at or above the 98th percentile) in their analysis. They reported a higher risk for negative mental and physical health outcomes in lower intelligent quotient and decreased risk with each increase in standard deviation. Another possible explanation could be health illiteracy which is strongly associated with general intelligence (Gottfredson, 2004; Mottus, Johnson, Murray, Wolf, Starr, & Deary 2014; Murray, Johnson, Wolf & Deary 2011). In view of this, individual with a high level of intelligence may not be knowledgeable about their mental health and thus, would not know how to report their individual experiences. Most people with their level of intelligence might not be aware of symptoms of depression and may therefore be less likely to become diagnosed with depression and therefore less likely to report a diagnosis of depression. Other possible explanation could be that each indicator of intelligence would have been correlated with each aspect of Ryff's positive mental wellbeing in different ways i.e. intelligence could have been correlated with autonomy, environmental mastery, purpose in life etc.

This study also investigated social self-efficacy as a predictor of mental health. Social self-efficacy is one's confidence to engage in social interaction necessary to initiate and maintain interpersonal relationships (Bandura, 1994). The result of the analysis showed a significant positive relationship between social self-efficacy and mental health. This implies that

participants who scored high in social self-efficacy also scored high in mental health. The finding confirmed the fourth hypothesis that social self-efficacy will significantly predict mental health. This finding is consistent with the previous studies (Gull, 2016; Siddiqui, 2015) who reported significant positive correlation between self-efficacy and mental health. This finding implies that undergraduate social self-efficacy has correlation on their mental wellbeing.

### **Implications and Recommendations**

This study has some relevant implications. The findings offer some insights for parents, young adults, clinicians and significant others seeking to promote and maintain optimal functioning in the society. First, this current study showed that father care and father protection did not predict mental health but father care had a significant positive relationship with mental health. This implies that the bonding or attachments that youth has with the father have a great impact on their well-being. Youths who have secure attachment with their fathers tend to be less at the risk of any mental disorders. Parents these days are both employed and the children are left with the servant maids or at crèches, wherein they lose the bonding that has to be received from their parents. In some cases, the parents are over protective to the children and restrict them in almost every single thing. This lack of parental bonding or over protectiveness may affect the well-being of the child in the later years. The study was to know the bonding style of parents with their children and its effect on the psychological well-being of the individual.

Another implication is that since social self-efficacy is associated with positive mental health, clinicians, psychotherapists as well as counsellors in the education sector should work for the awakening of the social relationship and ability of the students, articulate and implement programs that will build the students up to trust their capacity to navigate social terrain for optimal mental functioning. This could be achieved by organizing intervention programs that

could enhance the social self-efficacy and uplift the social and personal growth initiatives among students.

### **Limitation of the Study**

Given the fact that this study was conducted using only undergraduates limits the extent to which generalizations of any outcome of this study can be applied to all other youths in the country.

### **Conclusion**

The study was on the roles of father-child relationship, intellectual functioning and social self-efficacy on mental health of undergraduates in Port-Harcourt City, Rivers State. Summarily, it is proven that an individual's belief about their abilities to execute a task improves their mental health

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