Continental J. Applied Sciences
Ojewola (2026) 21 (2): 97 – 112 Doi: 10.5281/zenodo.21441058

Research Article

Assessing the Influence of Parenting Styles on Adult Health Outcomes in Ondo City, Nigeria

Justina Olunike Ojewola
Department of Community Health, Faculty of Health Sciences, Wesley University, Ondo. Email: justinaojewola1@gmail.com

Abstract

This study assessed the influence of parenting styles on adult health outcomes, including mental, physical, nutritional, and behavioural health in Ondo City. The research was guided by four objectives which focused on identifying predominant parenting styles and assessing their influence on different dimensions of health outcomes. A descriptive cross-sectional research design was adopted, and data were obtained from 3,000 participants using a structured questionnaire. Descriptive statistics (frequencies and percentages) and inferential statistics (chi-square tests) were used for data analysis at a 0.05 level of significance. Findings revealed that authoritative parenting was the most commonly reported style, followed by authoritarian, permissive, and neglectful parenting. Descriptive results showed that individuals exposed to authoritative parenting generally reported better mental, physical, nutritional, and behavioural health outcomes, while neglectful parenting was associated with poorer outcomes across the three domains. However, chi-square analysis indicated no significant association between parenting style and both mental health (χ^2 (12) =12.68, p = .393) and physical health outcomes (χ^2 (6) = 9.27, p = .160). In contrast, a significant relationship was found between parenting style, nutritional and behavioural health outcomes (χ^2 (6) = 16.94, p = .010). The study concludes that while parenting style may not independently determine all health outcomes, it plays a significant role in shaping nutritional and behavioural health patterns. It recommends the promotion of authoritative parenting through targeted family education, community support programmes, and policy interventions aimed at improving overall child and adolescent wellbeing.

Keywords: Parenting styles, mental health outcomes, physical health, behavioural health, nutritional status, adolescent development.

ISSN: 3043-6087. Science and Education Development Inst., Nigeria

Received: 15 April 2026 **Accepted: 12 June 2026**

Citation: Ojewola, J.O. (2026). Assessment of Influence of Parenting Styles on Adult Health Outcomes in Ondo City, Nigeria. Continental J. Applied Sciences, 21(2), 97-112 . Doi: 10.5281/zenodo.21441058

Introduction

Parenting is a fundamental social institution that underpins the survival, development, and continuity of human society. It involves the processes through which children are nurtured, guided, and socialized within the family, which serves as the primary environment for early learning and development (Bornstein, 2019). From birth, children possess innate biological and psychological tendencies such as emotional expression, sensitivity to environmental stimuli, and instinctive behavioural responses (Shonkoff et al., 2016). However, the development of higher-order abilities such as reasoning, communication, emotional regulation, and social competence is largely shaped by environmental influences, particularly the family (Center on the Developing Child, 2016; Lansford,2025). Thus, while certain traits may be biologically predisposed, the extent to which children develop into healthy, functional members of society is strongly determined by parenting practices and the quality of care they receive (Jeong et al., 2021).

The family, regardless of its structure or size, remains the most influential socializing agent in a child's life (Amato, 2018; Conger et al., 2017). It is within the family that children first learn norms, values, beliefs, and acceptable patterns of behaviour. Parenting practices vary widely across families due to differences in cultural values, religious beliefs, socioeconomic status, educational background, and personal experiences (Bornstein, 2019; Dwairy et al., 2017). In some families, for instance, formal education may not be prioritized due to generational beliefs, while others emphasize strict adherence to religious doctrines or cultural traditions. In many Nigerian communities, including Ondo City, cultural expectations such as respect for elders, conformity, and discipline significantly shape parenting approaches (Ogunyemi and Adeyemi,2018; Akinola,2020). These variations in parenting practices inevitably produce diverse developmental outcomes among children, affecting their academic performance, emotional stability, health behaviours, and social interactions (Pinquart, 2017).

Parenting, derived from the Latin word *parrire* meaning "to bring forth," encompasses a wide range of behaviours and attitudes that parents adopt in raising their children. Parents serve as the earliest role models, and their actions, communication styles, and disciplinary strategies significantly influence their children's development (Smetana, 2017; Kuppens and Ceulemans, 2019). As such, parenting is widely recognized as a major social determinant of child health and well-being (Jeong et al., 2021; WHO, 2018). Effective parent-child interaction fosters positive developmental outcomes, while

dysfunctional parenting practices may predispose children to a range of adverse physical, emotional, and behavioural conditions (Gershoff et al., 2017; Lansford et al., 2018). Therefore, understanding parenting styles and their implications is crucial for promoting healthy child development.

Scholarly literature has identified four major parenting styles based on the works of Baumrind and later expanded by Maccoby and Martin: authoritative, authoritarian, permissive, and neglectful parenting. These styles differ primarily in terms of responsiveness (emotional warmth and support) and demandingness (control and expectations) (Kuppens et al., 2019; Pinquart, 2017). Authoritative parenting, characterized by high responsiveness and high demandingness, is generally associated with positive outcomes such as self-discipline, emotional regulation, and social competence (Pinquart, 2017; Steinberg, 2016). Authoritarian parenting, on the other hand, is characterized by high control but low responsiveness, often resulting in children who may be obedient but lack confidence and autonomy (Gershoff et al., 2017). Permissive parenting is marked by high responsiveness but low control, which may encourage creativity but often leads to poor self-regulation and impulsivity (Kuppens et al., 2019). Neglectful parenting, characterized by low responsiveness and low demandingness, is associated with the most negative outcomes, including emotional detachment, poor academic performance, and increased vulnerability to health and behavioural problems (Lansford et al., 2018; Jeong et al., 2021).

Globally, there is substantial empirical evidence linking parenting styles to child health outcomes. Studies conducted in Europe and other developed regions have shown that harsh or inconsistent parenting practices are associated with increased risks of mental health disorders such as anxiety, depression, and behavioural problems (Gershoff et al.,2017; Pinquart, 2017). Conversely, supportive and structured parenting has been found to act as a protective factor, promoting resilience and overall well-being (Jeong et al., 2021; Steinberg, 2016). These findings are further supported by physiological research indicating that negative parenting practices can activate stress responses in children, leading to long-term health consequences, including chronic illnesses and impaired cognitive development (Shonkoff et al., 2016; Center on the Developing Child, 2016).

In the African context, parenting practices are influenced by a complex interplay of cultural traditions, communal living systems, and socioeconomic realities (Ezeh et al., 2019; Masarik and Conger, 2017). Traditionally, child-rearing was a collective responsibility supported by extended family networks. However, rapid urbanization,

economic hardship, and changing social structures have significantly altered these traditional systems (Ezeh et al., 2019). In many urban and semi-urban areas, including Ondo City, parents face increasing economic pressures that limit their ability to provide adequate emotional support and supervision (Akinola, 2020). As a result, there is a growing tendency towards authoritarian and neglectful parenting styles, which may have adverse implications for children's health and development (Masarik and Conger,2017). Additionally, cultural norms that emphasize obedience and respect for authority may further reinforce strict and controlling parenting practices (Dwairy et al., 2017).

In Nigeria, empirical studies have demonstrated similar trends. Research has shown that authoritative parenting is positively associated with better mental health outcomes among children, while authoritarian and permissive parenting styles are linked to negative behavioural and psychological outcomes (Ogunyemi and Adeyemi, 2018; Akinola, 2020). Socioeconomic challenges, including poverty and unemployment, often reduce parental availability and emotional engagement, thereby affecting parenting quality (Ezeh et al.,2019). Furthermore, the gradual erosion of extended family support systems has left many parents without the traditional safety nets that previously aided child-rearing (Masarik et al., 2017). These factors collectively contribute to variations in parenting practices and their outcomes across different regions of the country.

Despite the growing body of literature on parenting styles and child outcomes, significant gaps remain. First, much of the existing research is concentrated in Western societies, where cultural, economic, and social conditions differ considerably from those in Nigeria (Pinquart, 2017; Bornstein, 2019). While some Nigerian studies have attempted to address these issues, they are often limited to specific states such as Akwa Ibom, Rivers, and Kwara, with little attention given to Ondo State. This creates a geographical gap in the literature, as the unique socio-cultural and economic dynamics of Ondo City are not adequately represented.

Second, many existing studies adopt a narrow focus, examining only one aspect of child development, such as academic performance or mental health, without considering the broader spectrum of health outcomes (Jeong et al., 2021). Child health is multidimensional, encompassing physical, psychological, nutritional, and behavioural components. A fragmented approach to studying these outcomes limits the ability to fully understand the comprehensive impact of parenting styles on children's well-being (Lansford et al., 2018).

ISSN: 3043-6087. Science and Education Development Inst., Nigeria

Third, there is insufficient attention to the contextual factors that shape parenting practices in semi-urban environments like Ondo City. Unlike highly urbanized cities or rural communities, semi-urban areas exhibit unique characteristics, including moderate access to resources, transitional cultural values, and evolving family structures. These factors may influence parenting styles in distinct ways that are not captured in studies conducted in other settings (Dwairy et al., 2017).

Furthermore, although previous research (Ogunfemi et al.2018) has established associations between parenting styles and child outcomes, there is still a lack of context-specific evidence that explores how these relationships manifest in everyday family life within Ondo City. Without such localized data, it becomes challenging to design effective interventions, policies, and parenting education programmes tailored to the needs of the community (Jeong et al., 2021).

In addition, existing literature (Lansford,2025) has not sufficiently examined the combined effects of parenting styles on multiple health outcomes simultaneously. Understanding how parenting practices influence mental, physical, nutritional, and behavioural health in an integrated manner is essential for developing comprehensive child health strategies. The absence of such holistic studies represents a critical gap in both academic research and public health practice.

Therefore, the central problem addressed by this study is the lack of comprehensive, context-specific empirical evidence on how different parenting styles affect the multidimensional health outcomes of children in Ondo City. This gap limits the ability of policymakers, educators, and health professionals to develop targeted interventions that promote positive parenting and improve child health outcomes.

In response to these gaps, this study seeks to provide a detailed examination of parenting styles within Ondo City and their effects on children's mental, physical, nutritional, and behavioural health outcomes. By adopting a holistic and context-sensitive approach, the study aims to contribute to existing literature while providing practical insights for improving parenting practices and child well-being within the local context.

Specifically, the study seeks to determine the predominant parenting styles adopted by parents in Ondo City, examine how these parenting styles influence children's mental health outcomes, assess the effects of parenting styles on children's physical health outcomes, and evaluate how parenting practices affect children's nutritional status. The following questions are formulated:

ISSN: 3043-6087. Science and Education Development Inst., Nigeria

i. What are the predominant parenting styles adopted by parents in Ondo City?
ii. How do different parenting styles influence children's mental health outcomes in Ondo City?
iii. What is the effect of parenting styles on children's physical health outcomes in Ondo City?
iv. How do parenting styles affect children's nutritional status in Ondo City?

Methodology

This study adopted a descriptive research design to examine the relationship between parenting styles and child health outcomes in Ondo City. The design was considered appropriate because it allows for the systematic description of variables and the assessment of relationships among them without manipulation. It also provides a reliable framework for understanding patterns and trends in parenting practices and their implications for child health outcomes.

The study population comprised parents and caregivers residing in Ondo City. A structured sampling approach was employed to select participants, ensuring adequate representation across key socio-demographic characteristics such as age, gender, and relationship status. A total of 3,000 participants were included in the analysis, providing a sufficiently large sample size to enhance the reliability and generalizability of the findings.

Data were collected using a structured questionnaire designed to obtain information on parenting styles and child health outcomes. The instrument was divided into sections capturing parenting style categories (authoritative, authoritarian, permissive, and neglectful), as well as indicators of children's mental, physical, and nutritional health. Additional variables such as social support and relationship satisfaction were measured using scaled items. The questionnaire was subjected to validity and reliability checks to ensure consistency and accuracy of responses.

Descriptive and inferential statistical methods were employed for data analysis. Descriptive statistics were used to summarize the dataset, with frequency and percentage calculated for categorical variables such as parenting styles and health classifications. Means and standard deviations were computed for continuous variables, including social support and relationship satisfaction.

ISSN: 3043-6087. Science and Education Development Inst., Nigeria

Inferential statistics were applied to test the relationships between variables. Chi-square tests were used to examine associations between parenting styles and categorical outcomes such as mental health status, behavioural patterns, and other health classifications. All analyses were conducted using established statistical software packages, ensuring transparency and reproducibility of the analytical process.

The results were presented in tabular and graphical formats to facilitate clear interpretation. Confidence intervals were included to indicate the precision of estimates, and a two-tailed significance level of $p < 0.05$ was adopted for all statistical tests.

Results and Discussion

Table1: Socio-Demographic Characteristics of Respondents

Variable	Category	Frequency (n)	Percentage (%)
Age	17–25 years	980	32.7
	26–35 years	1,120	37.3
	36–45 years	620	20.7
	46–50 years	280	9.3
Gender	Male	1,370	45.7
	Female	1,361	45.4
	Non-binary	149	5.0
	Prefer not to say	120	4.0
Relationship Status	Ina relationship	1,018	33.9
	Single	888	29.6
	Married	803	26.8
	Divorced	205	6.8
	Widowed	86	2.9

Source: Field Survey, 2026

ISSN: 3043-6087. Science and Education Development Inst., Nigeria

Table 1 shows that a total of 3,000 participants were included in the analysis. The mean age of respondents was 33.7 years (SD = 9.8), ranging from 17 to 50 years. The gender distribution comprised 1,370 males (45.7%), 1,361 females (45.4%),149non-binary individuals (5.0%), and 120 participants (4.0%) who preferred not to disclose their gender. In terms of relationship status, 1,018 respondents (33.9%) reported being in a relationship,888 (29.6%) were single, 803 (26.8%) were married, 205 (6.8%) were divorced, and 86 (2.9%) were widowed.

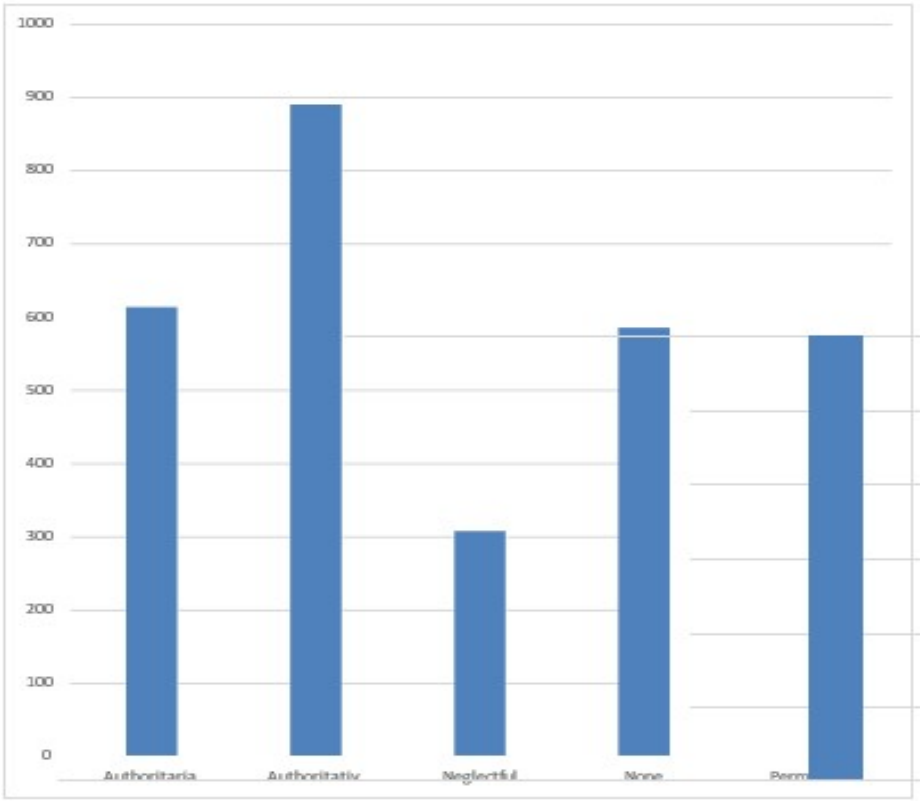

Figure 1: Parenting Styles

Figure 1 shows the distribution of parenting styles in the present study revealed that authoritative parenting was the most frequently reported style (n = 890, 29.7%). This suggests that a considerable proportion of respondents were raised in environments characterized by warmth, responsiveness, and balanced discipline. This finding aligns with Baumrind's foundational framework, which identifies authoritative parenting as the most developmentally supportive style and is associated with positive psychosocial and behavioural outcomes (Bornstein, 2019). Similarly, Steinberg (2017) reported that individuals raised under authoritative parenting tend to exhibit higher emotional

ISSN: 3043-6087. Science and Education Development Inst., Nigeria

regulation, academic success, and healthier interpersonal relationships.

The prevalence of authoritarian parenting (20.4%) observed in this study is also consistent with global findings, particularly in more traditional or collectivist societies. Lansford et al. (2018) found that authoritarian parenting remains common in many cultural contexts where obedience and strict discipline are emphasized. Likewise, Pinquart (2017) reported that authoritarian parenting is often associated with lower emotional expressiveness but higher conformity to rules, depending on cultural norms.

Permissive parenting accounted for 20.2% of responses in this study, indicating a relatively significant presence of low-discipline, high-warmth parenting styles. Dawairy et al. (2017) noted that permissive parenting is increasingly observed in modern households due to shifting societal values toward child autonomy. However, Shonkoff et al. (2016) cautioned that permissive parenting is often associated with weaker behavioural control and inconsistent rule enforcement, which may influence adolescent developmental outcomes.

Interestingly, 19.5% of respondents reported "none," suggesting either absence of a clearly dominant parenting style or mixed/uncategorized parenting experiences. This finding is supported by complexity-based parenting research by Bornstein (2018), who argued that parenting styles are not always distinct categories but often overlap depending on situational contexts and child age. Similarly, Masarik et al. (2017) emphasized that real-life parenting practices frequently combine multiple styles rather than fitting neatly into one classification.

Neglectful parenting was the least reported style (10.2%) in this study. This is consistent with global research indicating that neglectful parenting is less frequently reported in self-recall surveys but remains highly significant due to its strong association with adverse developmental outcomes. According to Kuppens et al. (2019), neglectful parenting is strongly linked to poor emotional regulation, attachment insecurity, and increased risk of behavioural problems. Likewise, Steinberg (2016) highlighted that neglectful parenting often results in reduced psychological support and weaker parent-child bonding.

Overall, the distribution pattern in this study aligns with established literature suggesting that authoritative parenting is generally the most prevalent and developmentally beneficial style, while authoritarian, permissive, and neglectful styles remain significant but less dominant. The presence of mixed or undefined parenting categories further

ISSN: 3043-6087. Science and Education Development Inst., Nigeria

supports contemporary views that parenting practices are dynamic rather than rigidly fixed categories.

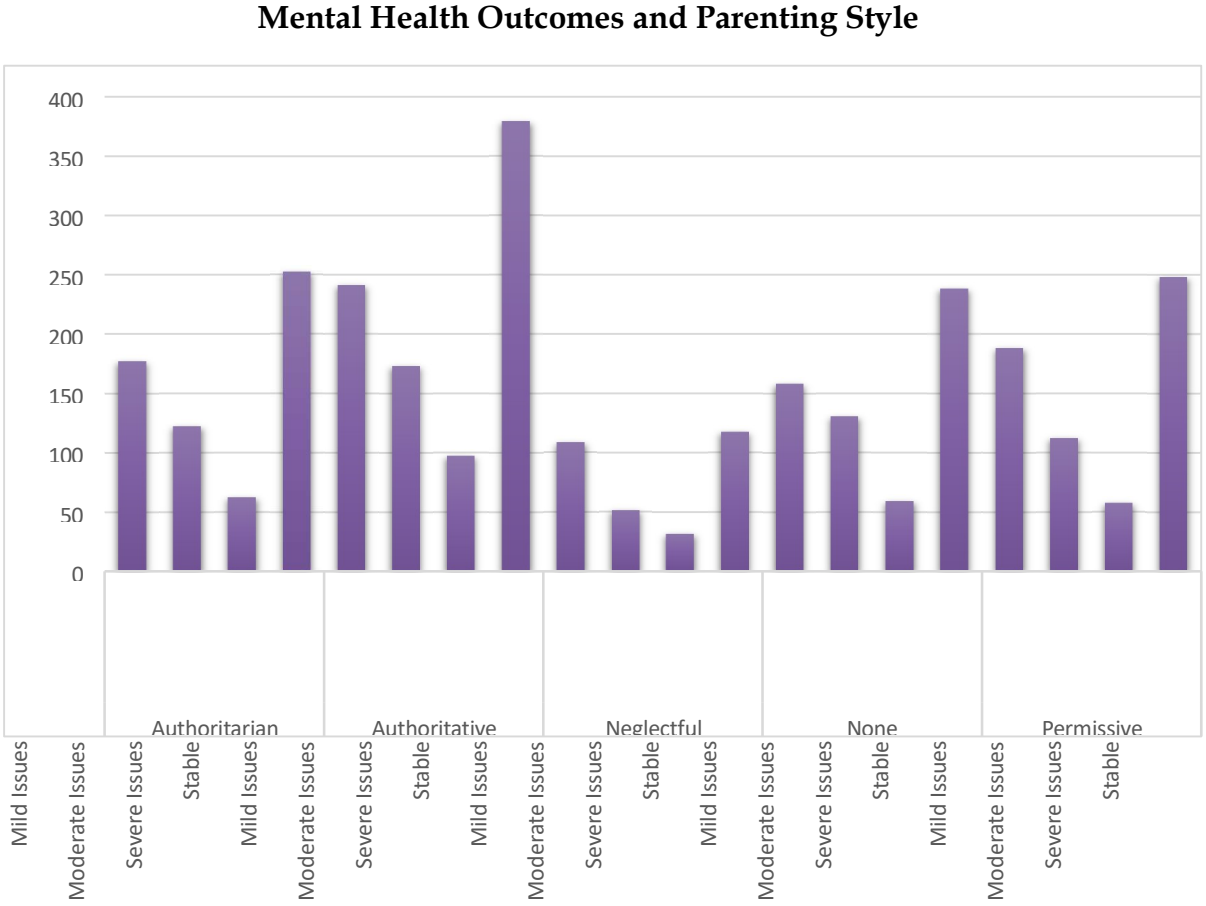

Figure 2: Mental Health Outcomes and Parenting Style

Figure 2 shows that among the 3000 respondents,1,234 participants (41.1%) reported being mentally stable, 872 (29.1%) experienced mild issues, 588 (19.6%) reported moderate issues, and 306 (10.2%) indicated severe issues. When stratified by parenting style, authoritative parenting showed the highest proportion of stability (379 stable out of 890, 42.6%). Authoritarian (252 stable, 41.1%) and permissive (248 stable, 41.0%) parenting also demonstrated comparable levels of stability. Neglectful parenting was associated with the lowest stability (117 stable out of 307, 38.1%) and relatively higher proportions of mild to moderate issues.

ISSN: 3043-6087. Science and Education Development Inst., Nigeria

The distribution of mental health outcomes varied across parenting styles. Adults who experienced authoritative parenting reported the highest levels of mental stability, suggesting that consistent structure paired with emotional support contributes positively to psychological resilience. Authoritarian and permissive parenting produced comparable outcomes, with a moderate share of stable participants but also noticeable proportions reporting mild to moderate difficulties. Neglectful parenting, however, showed the lowest levels of stability and the highest prevalence of moderate to severe mental health concerns.

These findings suggest that while authoritative parenting is most supportive of long-term psychological well-being, neglectful parenting may heighten vulnerability to mental distress. Nevertheless, the statistical analysis of health outcomes yielded χ^2 (12) = 12.68, p = .393, indicating no statistically significant association between reported parenting style and mental health outcomes in this sample. indicated no significant association, which implies that additional related and individual-level factors, such as socioeconomic stressors, trauma, and coping resources, interact with parenting experiences to shape adult mental health trajectories.

The lack of statistical significance suggests that, within this dataset, parenting style alone may not be a strong determinant of adult mental health outcomes. While descriptive results showed some variation (e.g., lower stability in participants exposed to neglectful parenting), the differences were not large enough to establish a reliable association. This finding resonates with research emphasizing that mental health outcomes are shaped by intersecting influences such as socioeconomic background, peer relationships, life stressors, and genetic predispositions, rather than parenting style in isolation (Masarik et al., 2017)

Theoretical frameworks support this interpretation. Bronfenbrenner's ecological systems theory highlights the interconnectedness of multiple contexts in shaping development, suggesting that parenting is one part of a wider system of influence (Bornstein,2019). Resilience and risk models propose that negative parenting may increase vulnerability, but protective factors such as supportive social networks and access to resources can buffer adverse effects (Shonkofff et al., 2016). Similarly, the diathesis–stress model emphasizes the interaction between individual predispositions and environmental exposures, positioning parenting as a contextual factor rather than a deterministic one (Akinola, 2020). From this perspective, the current findings align with broader evidence that adult mental health cannot be fully explained by parenting style alone but must be

ISSN: 3043-6087. Science and Education Development Inst., Nigeria

situated within a bio-psychosocial framework that accounts for both risks and protective mechanisms.

Physical Health Outcomes

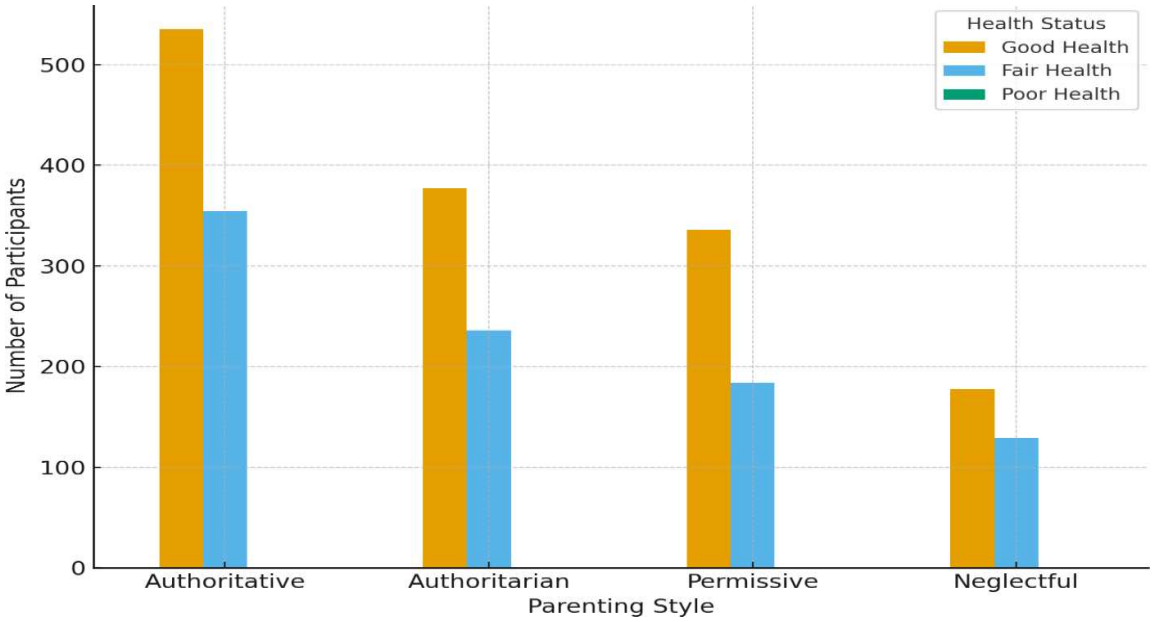

Figure 3: Physical Health Outcomes

Figure 3 explains that across the sample, 1,756 participants (58.5%) reported good physical health, 812 (27.0%) indicated fair health, and 432 (14.5%) reported poor health status. When disaggregated by parenting style, the data showed meaningful variations. Authoritative parenting was associated with the highest proportion of good health (535 out of 890; 60.1%), followed by authoritarian (377 out of 613; 61.5%) and permissive parenting (336 out of 520; 64.6%). Neglectful parenting, by contrast, showed the lowest proportion of good health (178 out of 307; 58.0%) and a comparatively higher proportion of poor health (69 out of 307; 22.5%). A chi-square test of independence indicated no statistically significant association between parenting style and physical health outcome, χ^2 (6) = 9.27, p = .160. While descriptive findings suggested that participants exposed to neglectful parenting were more likely to report poor health, the absence of significance means these differences could be due to chance rather than a consistent underlying effect. Taken together, the results suggest that while parenting style may exert some influence

on physical health in adulthood, it is not a sole determinant. Instead, health outcomes are likely shaped by broader factors, such as socioeconomic conditions, healthcare access, lifestyle practices, and genetic predispositions. Parenting style appears to contribute more as a contextual background than as a direct, singular predictor of adult physical health. The statistical distribution of the health outcome is shown in Figure 3.

Limitations of the Study

This study has several limitations that must be acknowledged. First, the dataset was cross-sectional and based on self-reported measures, which may introduce recall bias and social desirability bias in reporting both parenting experiences and health outcomes. Second, the data primarily focused on adults reflecting retrospectively on their childhood parenting experiences, which may limit accuracy and temporal validity. Third, although the sample size was large, the distribution of participants across parenting styles was uneven, with neglectful parenting underrepresented compared to authoritative and permissive groups, potentially affecting statistical power in subgroup analyses.

Additionally, the reliance on categorical measures of health outcomes (mental, physical, and nutritional/behavioral) restricted the depth of interpretation, as continuous measures could have provided more nuanced insights. The chi-square test results also indicate that some associations were not statistically significant, which may reflect limitations in measurement sensitivity rather than the absence of real effects. Furthermore, confounding factors such as socio-economic status, cultural background, peer influences, and genetic predispositions were not fully accounted for, which may obscure the true relationship between parenting styles and health outcomes.

Finally, as the dataset was premade and secondary in nature, the study was constrained by the variables available. This limited the ability to explore other relevant constructs such as resilience, social support, or access to healthcare, which could interact with parenting styles to influence long-term health trajectories.

Conclusion

This study examined the relationship between parenting styles and adult health outcomes, including mental, physical, and nutritional/behavioral health. While descriptive analysis suggested that authoritative parenting was generally associated with more favorable outcomes and neglectful parenting with poorer outcomes, the chi-

ISSN: 3043-6087. Science and Education Development Inst., Nigeria

square tests did not reveal statistically significant associations. These findings highlight that parenting style, although important, may not act as a sole determinant of health trajectories. Instead, outcomes appear to be shaped by complex interactions among individual, familial, and broader contextual factors. From a theoretical perspective, the results align with Bronfenbrenner's ecological systems theory, resilience models, and the diathesis–stress framework, all of which emphasize that development emerges from multi-layered influences rather than single determinants. Then, significant associations underscore the need to investigate parenting within broader bio-psychosocial contexts, considering socioeconomic status, cultural norms, peer networks, and individual predispositions.

Overall, the findings reinforce the importance of parenting style as one piece of the developmental puzzle while drawing attention to the multifactorial nature of health outcomes. Future studies should adopt longitudinal designs, integrate diverse cultural settings, and consider moderating and mediating variables to better capture the complex pathways linking parenting to lifelong health.

Recommendations

1. Parents should adopt authoritative parenting practices, as findings show it consistently produces the most positive mental health outcomes compared to authoritarian, permissive, and neglectful styles. This will help improve emotional stability, self-esteem, and psychological well-being among children and adolescents.
2. Parenting education and awareness programmes should be strengthened to reduce the prevalence of authoritarian and neglectful parenting styles, which were associated with higher levels of negative mental health outcomes such as anxiety, depression, and emotional distress.
3. Schools, healthcare providers, and community stakeholders should collaborate to support parents through counselling, workshops, and family-life education, as parenting practices were found to significantly influence behavioural, emotional, and physical health outcomes.
4. Government and relevant agencies should implement family support and economic empowerment programmes to reduce stressors that contribute to poor parenting practices, while also promoting integrated child health interventions that address mental, physical, and nutritional wellbeing holistically.

ISSN: 3043-6087. Science and Education Development Inst., Nigeria

5. Parents should offer direction with empathy to enforce discipline, and Christian, Islamic, or traditional ideas should be used as religious techniques to correct the children.

References

Amato, P. R. (2018). The changing family context and child well-being. *Journal of Marriage and Family*, 80(1), 1–14.

Akinola, O. (2020). Parenting styles and child development outcomes in Nigeria. *African Journal of Social Sciences*, 10(2), 45–60.

Bornstein, M. H. (2019). Parenting infants. *Handbook of Parenting*, 1, 3–55.

Center on the Developing Child. (2016). From best practices to breakthrough impacts. *Harvard University Working Paper*.

Conger, R.D., Conger, K.J., & Martin, M.J. (2017). Socio-economic status and parenting. *Annual Review of Psychology*, 68, 253–277.

Dwairy, M., Achoui, M., Abouserie, R., & Farah, A. (2017). Parenting styles in Arab societies. *Journal of Cross-Cultural Psychology*, 48(1), 1–15.

Ezeh, A., Bongaarts, J., & Mberu, B. (2019). Global population trends and urbanization. *The Lancet*, 393(10184), 168–178.

Gershoff, E.T., Sattler, K.M., & Ansari, A. (2017). Strengthening causal estimates for parenting effects. *Annual Review of Developmental Psychology*, 1, 1–26.

Jeong, J., Franchett, E.E., RamosdeOliveira, C.V., Rehmani, K., & Yousafzai, A.K. (2021). Parenting interventions. *Pediatrics*, 147(3), e2020017781.

Kuppens, S., and Ceulemans, E. (2019). Parenting styles: A closer look. *Developmental Review*, 51, 1–23.

Lansford, J. E. (2025). Theories of Parenting and Child Development in Different Cultural Contexts. *Theory Society*. 54(5), 857–865.

ISSN: 3043-6087. Science and Education Development Inst., Nigeria

Masarik, A. S., & Conger, R. D. (2017). Stress and parenting. *Journal of Family Psychology*, 31(7), 1–10.

Ogunyemi, A.O., & Adeyemi, B.A. (2018). Parenting styles and adolescent behaviour in Nigeria. *Nigerian Journal of Educational Research*, 15(1), 89–102.

Pinquart, M. (2017). Associations of parenting styles. *Educational Psychology Review*, 29(3), 1–31.

Shonkoff, J.P., Garner, A.S., & Committee on Psychosocial Aspects. (2016). Early childhood adversity. *Pediatrics*, 129(1), e232–e246.

Steinberg, L. (2016). Adolescence (11th ed.). McGraw-Hill.

World Health Organization (WHO). (2018). Nurturing care framework. WHO Press.

ISSN: 3043-6087. Science and Education Development Inst., Nigeria