MODERATING ROLE OF BOUNDARIES ON FAMILY STRUCTURE AND ADOLESCENTS' PSYCHOSOCIAL WELL-BEING IN SELECTED PUBLIC HIGH SCHOOLS IN RUIRU SUB-COUNTY, KIAMBU COUNTY, KENYA

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DECLARATION

This thesis is my original work and has not been presented for the award of a degree in any other university.

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This thesis has been submitted for review with my approval as university supervisor.

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DEDICATION

I dedicate this thesis to my family for all the support they have accorded me in my research and thesis writing journey.

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ABSTRACT

Adolescent period is a critical stage of human development, characterized by the acquisition of life values and behaviours that can last a lifetime. The family is crucial in determining psychosocial development throughout this formative period. The purpose of this study was to investigate how family boundaries affect the relationship between family structure and adolescents' psychosocial well-being in selected public high schools in Ruiru Sub-County, Kiambu County, Kenya. The objectives were: to establish the relationship between family subsystems and psychosocial well-being among adolescents in selected public High Schools in Ruiru Sub-County, to investigate the relationship between family hierarchy and adolescents' psychosocial well-being in selected public high schools in Ruiru Sub-County; and to examine the intervening effect of family boundaries in the relationship between family structure and adolescents' psychosocial well-being in public high schools in Ruiru Sub-County. The study was underpinned by two key theories: the Structural Family Theory and the Social Integration Theory. The study utilized correlational research design. The target population was 5,392 students of 10 public high schools in Ruiru Sub-County of Kiambu County, Kenya. From this, a stratified sample of 373 students was selected. Data was collected using the Family Assessment Device and Adolescent Mental Health Continuum-Short Form instruments. The data was analysed in SPSS version 31 using chi-square, correlation and linear regression techniques. Results showed that adolescents from two-parent families had the highest proportion of high psychosocial well-being (85.5%), followed by those from single-parent families (82.0%). In contrast, lower levels of psychosocial well-being were more common among adolescents from step-parent (30.0%) and extended families (35.3%). Chi-square tests showed these variations were statistically significant, $\chi^2(3, N = 327) = 9.10$, $p = .028$. Family hierarchies explained 5.4% of the variance in adolescent psychosocial well-being ($R^2 = .054$). However, only the family interactions dimension of family hierarchies emerged as a significant positive predictor ($\beta = .192$, $p = .002$). Approximately 4.9% of the variance in adolescents' psychosocial well-being was explained by the combined influence of family structure, family boundaries, and their interaction. However, family boundaries were not a significant moderating factor ($p>.05$). A conclusion was drawn that well-functioning family structures play an important role in enhancing adolescents' psychosocial well-being. Family hierarchies that promote shared power and decision-making positively influence adolescents' psychosocial well-being. Family-based counselling and parenting workshops could help families, especially step-parent and extended ones, to manage relational challenges. In addition, schools should create platforms such as parent–adolescent forums and mentorship programs that encourage family engagement in adolescents' social and emotional development.

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ABBREVIATIONS

AMHC-SF	Adolescent Mental Health Continuum-Short Form
APHRC	African Population and Health Research Centre
FAD	Family Assessment Device
IPV	Intimate Partner Violence
ISERC	Institutional Scientific Ethics Review Committee
NACOSTI	National Commission for Science Technology and Innovation
RCA	Regional Committee for Africa
SFT	Structural Family Therapy
SRH	Sexual and Reproductive Health
UN	United Nation
WHO	World Health Organization

OPERATIONAL DEFINITION OF TERMS

Adolescence

Adolescence, spanning ages 10 to 19, is a critical stage of growth with unique health needs and rights (World Health Organization, Regional Office for Africa, 2022). It is a key period for developing knowledge, skills, and emotional resilience, shaping long-term well-being (Chen et al., 2022). In this study, "adolescents" specifically refers to high school students form two and three aged 13 to 19.

Emotional Well-being

Emotional well-being is a state of positive mental health characterized by a balanced and adaptive emotional state (García et al., 2019). In this study, it is operationalized as an adolescent's feelings of contentment, resilience, self-esteem, and the ability to manage and express emotions effectively.

Family Boundaries

Family boundaries, which help distinguish members and separate different groupings like parents and children (Thomas & Hovick, 2021), exist on a spectrum categorized as enmeshed, regular, or rigid (Becvar et al., 2023). In this study, "family boundary" refers to how varying aspects of boundaries i.e. communication and level of engagement, in the family shape interactions among family members and, in turn, impact the psychosocial well-being of adolescents.

Family Hierarchy

Hierarchies provide insight into family structure by defining subsystems, boundaries, and the positioning of members under primary decision-makers (Bernier et al., 2023; Ibrahim et al., 2022). In this study, "family hierarchy" specifically refers to how hierarchical relationships within the family impact decision-making and power processes, which in turn affect adolescents' psychosocial well-being.

Family Structure

Family structure refers to the organization of individuals related by blood, marriage, or adoption within a relational unit, encompassing family dynamics such as roles, responsibilities, interaction patterns, communication, and overall organization (Rovelli et al., 2022; Wang, 2020). In this study, family structure refers to family subsystems and family hierarchies in single-parent families, stepparent families, and two-parent families configurations.

Family Subsystems

The family is a structured system with interconnected subsystems, where dyadic relationships, such as parent-child bonds, influence broader family dynamics (Bernier et al., 2023; Lee et al., 2023). In this study, the term "family subsystems" specifically refers to those subsystems within families that relate to the adolescents' psychosocial well-being (i.e., parental, marital, parent-child, sibling, and extended family subsystems).

Psychological Distress

Psychological distress is a state of emotion that interfere with an individual's overall well-being and daily functioning (Brummelman & Sedikides, 2020). Psychological distress utilized in this study refers to the adolescents' experience of emotional suffering characterized by symptoms such as anxiety, depression, irritability, and difficulty coping with daily stressors.

Psychosocial Well-Being

Psychosocial well-being is a multifaceted concept encompassing psychological, social, and subjective elements that influence overall functioning and the ability to reach one's full potential (Kumar, 2020). In this study, psychosocial

well-being is conceptualized as a multi-dimensional concept indicated by emotional well-being, psychological distress, and social functioning.

Single Parent Family

A single-parent family consists of one parent raising their child or children alone due to circumstances such as out-of-wedlock births, separation, divorce, or widowhood (Chavda & Nisarga, 2023; Sullins, 2021). In this study, a single parent is defined as an individual who has a child or children and is not currently in a marital relationship.

Social Functioning

This is an individual's ability to interact effectively and appropriately with others in various social contexts (Liu, 2023). In this study, social functioning encompasses the ability to form and maintain positive relationships, demonstrate effective social skills, engage appropriately with peers, adapt to social norms, and regulate emotions in social contexts.

Two-parent Family

A two-parent family consists of two parents, typically a mother and father who live together and share the responsibilities of raising their children together (Sullins, 2021). In this study, a two-parent family refers to a family described by the respondent as comprising a biological father and mother living together.

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CHAPTER ONE: INTRODUCTION AND BACKGROUND TO THE STUDY

Introduction

The chapter comprises the introduction, problem statement, and the background study. The study examines how family boundaries moderate the relationship between family structures and adolescents' psychosocial well-being. It also contains the study objectives, research questions, study hypotheses, assumptions, and justification. Finally, it discusses the study's significance, limitations, and delimitations. Together, these sections set the foundation for understanding the interaction between family structure, family boundaries, and adolescent psychosocial well-being. The chapter ends with a summary.

Background to the Study

The global mental well-being of children is a matter that worries policymakers. Another Organization for Economic Co-operation and Development (OECD, 2024) report on the status of psychological well-being of children, indicating that in 2024, 11% of the global population of children had low psychological well-being. This is further supported by Yu et al. (2023), who noted that 1 in 7 children has mental problems globally, the study adding that 50% of mental problems can be traced to having begun early in life. That this problem is a major issue is buttressed by the fact that the United Nations Children's Fund (UNICEF, 2024) indicated 35 million children, their parents, and their caregivers sought mental health support. This suggests that parents with mental problems are likely to be associated with a parental mental health condition.

The well-being of children and adolescents is a growing concern due to rising separation and divorce rates, particularly in Europe and North America (Steinbach et

al., 2021). In the U.S., around 30% of households are now stepfamilies, often headed by younger adults (Wiemers et al., 2019). Studies show that adolescents from non-intact families face more behavioural, emotional, social, and cognitive challenges compared to those living with both biological parents (Steinbach et al., 2021). This issue extends to countries like China, where divorced single motherhood has become more common since the early 2000s (Zhang, 2020). These trends highlight the global impact of family disintegration on adolescent well-being.

A child's healthy development is aided by the functioning of the family (Lin et al., 2019). Family cooperation, mutual respect, and communication are highly valued aspects of family life. How well a family gets along is critical in determining its ability to function (Yöntem, 2019). Adolescent and child happiness is correlated with positive family functioning (Izzo et al., 2022). Thus, it is anticipated that cohesive, adaptable, and transparent families will be able to meet the requirements of teenagers without causing significant problems. On the other hand, rigid families, inflexibility, and not encouraging candid communication can be unsuitable for the growth of adolescents, which is predicted to result in a rise in stress levels among them (Mastrotheodoros et al., 2020).

In Western countries, a growing proportion of children live in non-intact households, either led by a single parent or where one or both parents are not biological (Ferrer & Pan, 2020). Boccio and Beaver (2019) found that about 35% of children in the United States live in non-traditional family structures, often involving a single parent or a non-biological parent like stepparents or grandparents. While some researchers have noted a few positive aspects of divorce on adolescents, other studies report that divorce and single parenthood are generally associated with poorer outcomes for children (Roper et al., 2020; Wikle & Hoagland, 2020; Zhang, 2020).

Divorce or other factors causing parental absence can negatively impact a child's development and psychosocial well-being, as missing parental roles and functions can negatively affect growth (Yuxiao et al., 2019). Hence, children from disjointed families experience more emotional difficulties, unpleasant emotions, and lower psychological health than children from intact households (Lynam et al., 2020).

Several models support the potential psychosocial aspects connected to adolescents' psychological well-being. Some of these models integrate a framework for developing and accessing psychological and educational constructs like social skills, empathy, self-concept, anxiety, and emotional intelligence (Morales-Rodríguez et al., 2020). The most typical residence model was one in which the mother was the primary caregiver to the children (Maqubela et al., 2020). At the same time, they saw their father less frequently, leading to different arrangements, such as the sharing of childcare after separation (Berman & Daneback, 2022). However, the family, being a mutually reliant system, will have its members influence one another, and their responsibilities and values are consistently linked to more favourable teenage outcomes and support within the family (Yan et al., 2022).

Contemporary study outcomes suggest that family structures are also becoming less nuclear or immediate to include or involve extended family members (Kwan, 2021). The family plays a vital function in enabling the adult and child to meet their fundamental requirements (Stych, 2021). A critical factor affecting a child's general well-being throughout their lives is the parent-child bond, while having strained family ties can harm mental and physical health (Demir-Dagdas, 2021). Parenting, parent-child relations, and parental involvement mediate the relationship between family structure and adolescent outcomes (Childs et al., 2022). Therefore, family bonds and positive interactions between parents or caregivers and adolescents

are linked to teenagers' healthy development, with the inclusion of the social capital of grandparents and other extended family members (Kwan, 2021).

Family structures are growing increasingly diverse and complicated in various ways, with single-parent households being one of the more prevalent phenomena (Petersen & Lesch, 2022). Kroese et al. (2021) suggested that having a single parent at home can hurt a child's emotional health, cognitive growth, and academic success. They added that different homes with one parent would exhibit different kinds of inadequacies in school regulation in their children. Zhang (2020) further suggested that teenage development while in a single-parent family is threatened by different challenges. Adolescents in a family going through separation and divorce may experience the family's instability and encounter adjustment problems, including disruptive behaviours (Emery, 2019). Thus, the impact of growing up in a single-parent home should be carefully considered, as the growth rate of single parenthood rises in the upcoming years (Kroese et al., 2021).

Adolescence is a developmental stage where persons transitioning to adulthood are more likely to have psychological health problems (Orth & van Wyk, 2022). Whereas positive interactions in the family are essential for healthy adjustment, Pandya (2022) posited that children's psychological health suffers when they live in single-parent families due to marital disintegration (such as parental widowhood, divorce, or separation). Many different family structures exist, and it is observed that a nuclear family has superior health outcomes to a single-parent family or a stepfamily and links family structure to children's and adolescents' health and well-being (Lin et al., 2019). Thus, social integration and various forms of support for one another, such as emotional, practical, or informational help, all contribute to resilience and are crucial family functions (Herke et al., 2020).

According to the 2017 UN World Population Prospects, 14% of the global population resides in sub-Saharan Africa, with adolescents aged 15–19 constituting 23% of this group (Wainaina et al., 2021). At the same time, the proportion of children in Africa growing up without both biological parents is rising (Wasserman, 2020). This issue is compounded by endemic conflicts, which result in many men being either killed or deployed at war fronts, further straining adolescent psychosocial well-being (Mabrouk et al., 2022). Additionally, Somefun (2020) highlights that the growing youth population and limited resources put significant pressure on regional family structures (Somefun, 2020). This shift in family dynamics affects the traditional system of social control that typically helps safeguard children from external harm.

Abuya et al. (2019) noted that the prevalence of children growing up without two biological parents is increasing in Kenya, although research on its effects remains limited. While some studies have examined related issues, such as the impact of single parenting on secondary school adolescents' psychological well-being (Kodero & Kimani, 2021) and psychosocial interventions on youth quality of life and associated emotional and behavioural problems (Magai & Koot, 2019), there remains a significant gap in research explicitly exploring the relationship between family structure and adolescents' psychosocial well-being (Buehler, 2020; Umberson & Thomeer, 2020). Erskine et al. (2024) found that 5.5% of Kenyan youth experienced psychosocial problems, with 4.6% reporting suicidal ideation, 0.2% having attempted suicide, and 1.4% engaging in self-harm. The study, which focused on extreme cases, suggests that the actual prevalence of psychosocial issues among adolescents may be higher.

Wambua et al. (2021) conducted a study in Kajiado County, Kenya, on the effects of parental separation on adolescents' well-being, highlighting that when both parents collaborate effectively in raising a child, they provide essential support, encouragement, and opportunities for growth. This cooperative parenting fosters the mastery of lifelong developmental skills, reinforcing the idea that adolescents' transitions are deeply influenced by both family dynamics and broader societal factors (Kathuri-Ogola & Kabaria-Muriithi, 2024). However, when family structures are dysfunctional, children often face profound psychological struggles, battling low self-esteem and emotional instability due to unmet emotional needs. Over time, these unresolved wounds shape their self-worth, relationships, and overall well-being, making it more challenging for them to grow into confident, well-adjusted adults (Malama et al., 2023).

The family is a social organization with subsystems that interact and affect each other, in turn affecting the psychological well-being of the young children (Ullah & Saeed, 2024). Family structure, on the other hand, refers to the emotional bond that family members have and which determines how they relate to each other (Zafar & Iqbal, 2025). A firm family structure helps in regulating relationships, reducing the severity of economic pressure, and supporting emotional well-being (Novak et al., 2023). However, with the escalated level of economic difficulties, technological trends, and social changes, the family structure continues to loosen, negatively affecting parental development and impeding children's development (Zafar & Iqbal, 2025). For the sake of this study, family structure has been conceptualized as including family subsystems and family hierarchies.

Family subsystems are groups within families that play distinct roles while interacting with others to keep the family functioning (Baptist & Hamon, 2022). It

distinguishes members of their families based on the roles, responsibilities, and relationships (Paley & Hajal, 2022). When the family members optimally play their roles, there is likely to be an elevated level of marital conflict, leading to higher levels of depression and anxiety and impeding their social functioning (Crespo, 2026). Again, the inability to sustain optimal functioning may lead to family dysfunction, as the subsystems may fail to communicate with each other and set their rules, confusing children, who are the most vulnerable (Baptist & Hamon, 2022). In this study, family subsystems are conceptualized as including parental subsystems, child-parent subsystems, marital subsystems, siblings' subsystems, and extended family subsystems.

Family hierarchies are the level of control that individuals have over the rest of the family members (Akter et al., 2022). The leverage may be defined by issues like the age of the individuals compared to others, the economic power, and the social power (Paley & Hajal, 2022). Family hierarchy also defines boundaries, thus sustaining communication flow and emotional stability (Ullah & Saeed, 2024). In a typical family, parents have authority over their children, though the level of authority may shift as children take more responsibilities (Fitrianto et al., 2025). Scholars have noted that an unhealthy family hierarchy leads to poor communication, thus escalating family conflicts and disrespect of privacy and boundaries, which lead to emotional problems (Mujiyono et al., 2024). Among children, dysfunctional family boundaries may also lead to rivalry and jealousy, which linger into adulthood, SUD, and mental health problems (Osuji, 2023). In this study, family hierarchies are conceptualized as including decision-making and the power individuals enjoy.

Family boundaries define personal and emotional boundaries to encourage healthy relationships between family members (Burke et al., 2022). It is about

balancing personal interest, thus recharging emotional and physical energy, among other resources, so that the individual can take care of the needs of other family members (Chernata, 2024). Lack of boundaries can lead to emotional problems, including feelings of being overwhelmed, resentment, burnout, and anxiety, thus severely reducing the ability of family members to support each other (Burke et al., 2022). It also encourages perpetual conflict as roles are not clearly defined (Kossek et al., 2023). For children, unhealthy family boundaries negatively impact their psychosocial well-being and their self-esteem (Osuji, 2023). In this study, family boundary is defined by rigid relationships, healthy relationships, enmeshed relationships, open communication, and family engagement.

The focus on Kiambu County is informed by empirical evidence that suggests there is an elevated level of family breakdown, which is linked to the psychosocial well-being of adolescents. For example, Njeri (2025) noted that there is a concerning level of divorce, separation, and single parenthood in Kiambu County, noting that the teenagers exhibited an elevated level of psychological problems and diminished self-esteem. Again, Njeri's (2025) research showed that there was a significant and negative impact of divorce and separation on adolescents' meaning/purpose, with such children showing signs of psychosocial problems. Such children had SUD and had problems relating with others in school. Similarly, Johnson et al. (2023), in a study conducted using a sample of 2,192 adolescents drawn from Kiambu County and the neighboring Nairobi County, showed a high prevalence of depression and anxiety, traced to a dysfunctional family.

The highlighted studies have shown a concerning link between family dysfunction, relationship dynamics, and the outcome of adolescents. The studies have shown that marital dissolution impedes the marital social and psychological health of

children, leading to a decrease in children's development. For this reason, the researcher seeks to examine the role of family structure and psychosocial well-being among adolescents, with family boundaries as a moderating variable. The literature synthesis has also demonstrated that Kiambu County is affected by a high level of divorce and separation and single parenthood, thus negatively impacting teenagers' psychosocial well-being. This justifies the focus on adolescents in selected public high schools in Ruiru Sub-County, Kiambu County, Kenya.

Statement of the Problem

Psychosocial problems among adolescents in Kenya are an escalating concern for scholars, given the nation's substantial teenage population of 13 million. This concern is supported by alarming statistics by Wado et al. (2022), which reported that 44.3% of adolescents had experienced psychosocial health problems within the year preceding the study. These statistics underscore the urgent need for targeted research and interventions to address the growing psychosocial problems faced by Kenyan adolescents. Specifically, psychosocial challenges among adolescents in Kiambu County have reached alarming levels, with 9% of adolescents clinically diagnosed with related disorders (Chege, 2019). These issues impede students from achieving their academic potential and engaging in social activities (Duraku et al., 2023). However, the growing phenomenon of psychosocial health problems among adolescents has barely been investigated from a structural family lens.

Adolescence is a crucial developmental stage where family support plays a key role in psychosocial well-being (Simcock et al., 2020). However, disruptions in parental behavior and variations in family structures have been linked to increased psychosocial problems Babajide et al., 2020). While stable family environments enhance adolescents' life satisfaction and social integration, shifts in family structures

influence family dynamics, affecting their sense of belonging and interpersonal relationships (Bi & Wang, 2021; Tong et al., 2023). Given the growing prevalence of non-traditional family structures and family disruptions, it is essential to examine how these variations impact adolescent psychosocial well-being and whether family boundaries moderate this relationship.

Prior studies in Kenya offer valuable insights into how family dynamics and structures influence adolescents' academic and psychosocial outcomes, but leave significant gaps. Among these are Kimaru et al. (2020) and Wanjao et al. (2023), who focused on Ruiru Sub-County, Kiambu County, though the former's outcome variable was on academic performance, and the latter's dependent variable was on parental relationships. The closest study was by Owuor et al. (2023), which was conducted in Homabay County, which has different underlying issues from Kiambu County. The present study addressed the research gap by examining adolescents' psychosocial well-being problems through a structural family theory perspective in Ruiru subcounty, Kiambu County.

Purpose of the Study

The study aims to investigate the moderating role of family boundaries on the relationship between family structure and psychosocial well-being among adolescents in selected public high schools in Ruiru Sub-County, Kiambu County, Kenya.

Objectives of the Study

The objectives of the study were:

1. To establish the relationship between family subsystems and psychosocial well-being among adolescents in selected public high Schools in Ruiru Sub-County, Kiambu County, Kenya.

2. To investigate the relationship between family hierarchy and adolescents' psychosocial well-being in selected public high schools in Ruiru Sub-County, Kiambu County, Kenya.
3. To analyze the moderating role of family boundaries in the relationship between family structure and adolescents' psychosocial well-being in selected public high schools in Ruiru Sub-County, Kiambu County, Kenya.

Research Questions

The study aimed to answer the following questions:

1. What is the relationship between family subsystems and psychosocial well-being among adolescents in selected public high schools in Ruiru Sub-County, Kiambu County, Kenya?
2. What is the relationship between family hierarchy and psychosocial well-being among adolescents in selected public high schools in Ruiru Sub-County, Kiambu County, Kenya?
3. What is the moderating role of family boundaries on the relationship between family structure and psychosocial well-being among adolescents in selected public high schools in Ruiru Sub-County, Kiambu County, Kenya?

Assumptions of the Study

The researcher made the following assumptions about the study. The study assumed that there are different family structures among the adolescents in public high schools in Ruiru Sub-County, Kiambu County. The researcher also presumed that the type of household an adolescent grows up in is nuclear, single-parent (whether father or mother), stepfamily, or blended family. Secondly, the adolescents in public high schools in Ruiru Sub-County, Kiambu County, go through psychosocial aspects brought about by having and living in different family structures.

Thirdly, the study presumed that the family boundary affects the way family boundaries are defined and maintained can significantly influence the emotional and psychological well-being of adolescents.

Methodologically, the study assumed the correlational research design was sufficient in guiding the field study, and a sample of 373 participants was enough to understand the role of family structure on psychosocial well-being, with family boundary as a moderating variable. Similarly, the study assumed the Family Assessment Device (FAD) was suitable for collecting data for family structure and family boundaries, and the Adolescent Mental Health Continuum-Short Form (AMHC-SF) for psychosocial well-being.

Justification/Rationale of the Study

The psychosocial well-being of adolescents is a crucial issue in educational settings, affecting both mental health and academic performance (Maloney et al., 2024). This is particularly important in Kenya, where family dynamics play a significant role in students' well-being (Duraku et al., 2023). Understanding how family structure and boundaries influence adolescent well-being can offer valuable insights into the factors that contribute to or buffer against psychosocial challenges. The research focuses on Ruiru Sub-County in Kiambu County, Kenya, where diverse family structures highlight the complexity of these influences. Examining local dynamics in this context can shed light on specific needs and strategies to support adolescent psychosocial health (Wanjao et al., 2023).

Family structure, which includes subsystems and hierarchies within single-parent, two-parent, stepfamilies, and extended families, may significantly impact adolescents' experiences and outcomes (Pothisiri et al., 2023). Current research has shown that family structure affects academic performance and psychosocial well-

being, yet often overlooks the moderating effect of family boundaries (Childs et al., 2022; Kaestle et al., 2021; Schlecht, 2024; Yan et al., 2022). This study sought to fill this gap by examining how different family boundaries influence the relationship between family structure and adolescents' psychosocial health. By investigating this relationship, the research aims to offer a more nuanced view of how family environments shape adolescent development. Understanding these dynamics could inform interventions that support adolescents' well-being more effectively.

Significance of the Study

This study holds significant value for marriage and family therapists as it provides insights into how different family structures impact adolescents' psychosocial well-being. By understanding these dynamics, therapists can develop tailored interventions that address the specific challenges adolescents face in different family contexts. The findings could help refine therapeutic approaches by highlighting the importance of family structure in improving mental health. Therapists may also use this knowledge to strengthen family relationships. Ultimately, the study could enhance family therapy models by focusing on key factors that influence adolescent well-being.

This study is crucial for school guidance and counseling master's students and secondary school principals, as it provides insights into how family boundaries influence adolescents' well-being and academic performance. Counselors can use the findings to design targeted psychosocial interventions, identify at-risk students, and develop support strategies for diverse family structures, enhancing the effectiveness of school counseling programs. Likewise, principals can leverage this knowledge to foster a supportive school environment, collaborate with teachers and parents, and

implement policies aimed at reducing absenteeism, dropouts, and behavioral issues related to family dynamics.

This study provides valuable insights for the Kiambu County Government to develop targeted programs supporting adolescent psychosocial well-being, particularly for those from disadvantaged backgrounds. By examining the role of family boundaries, the county can implement mental health services, family support programs, and educational outreach to foster a healthier community. Additionally, the research contributes to academic discourse on family dynamics and adolescent development, offering a non-Western perspective and a framework for further exploration by Kenyan scholars. It enriches literature in developmental psychology, social work, and education while laying the foundation for comparative studies and interventions addressing the impact of family structures.

Scope of the Study

The study was also conceptually designed to understand how family structure affects students' psychosocial well-being, with family boundaries as a moderating variable. Specifically, the conceptual scope of the study includes the relationship between family subsystems and psychosocial well-being, the relationship between family hierarchy and adolescents' psychosocial well-being, and the moderating role of family boundaries in the relationship between family structure and adolescents' psychosocial well-being. Contextually, the study primarily focused on adolescents in selected public high schools within Ruiru Sub-County, Kiambu County. Methodologically, this was a cross-sectional study, framed under a correlational study design, and the population comprised teenage students aged between 13 and 19 years.

Limitations of the Study

The field study was guided by a correlational study design as it helped in demystifying the relationship between family structure and psychosocial well-being among adolescents with family boundaries as a moderating variable. Thus, the study was conducted using quantitative methods, which limits the findings. The researcher mitigated this risk by using validated instruments for data collection and involving informant interviewees, including guidance and counselling teachers.

Moreover, another limitation of the researcher is having no control over what a respondent provides through questionnaires, even if it is far from reality. The researcher managed the risk by committing to maintaining confidentiality and anonymity during data collection, analysis, and reporting. Time may have been a limiting factor as the study had to be scheduled, considering the schools' curriculum. Measures were implemented to overcome the time factor by scheduling appointments in tandem with the class breaks, and the other was to liaise with the class teachers to align with their programs.

Delimitations of the Study

This study excluded Form One and Form Four students. Currently, there are no Form One students due to the adoption of a new curriculum, Competency-Based Education (CBE), in the country. Form Four students were excluded because they were preparing for the Kenya Certificate of Secondary Education (KCSE) exams and may not have had time to participate in the study. In addition, students under 13 and above 19 years were excluded, as the study title included adolescents. This delimitation was enforced by asking the students who were not in the age group not to take the study.

The study was conceptually delimited to two Structural Family Theory elements: subsystems and hierarchy. The delimitation of the theory was informed by the fact that it traces family problems to dysfunctional families. The delimitation of subsystems and hierarchy is informed by the fact that the study has conceptualised subsystems and hierarchy as its independent variables.

Chapter Summary

This chapter has provided a comprehensive introduction and background to the study. The background of the study explored global, regional, and Kenyan perspectives to contextualize the moderating role of family boundaries in the relationship between family structure and adolescents' psychosocial well-being. The statement of the problem has also been presented, and the research gap clearly articulated. The general purpose of the study has been outlined, along with specific objectives and corresponding research questions. The chapter has also addressed the study's assumptions, justification, rationale, and significance. Additionally, it detailed the scope of the study, including its limitations and delimitations. In the next chapter, a critical review of the literature is presented.

CHAPTER TWO: LITERATURE REVIEW

Introduction

This chapter constitutes a review of empirical and theoretical literature. The empirical literature is organised in line with the study objectives. Accordingly, the empirical literature covers the relationship between family subsystems and psychosocial well-being, the relationship between family hierarchy and adolescents' psychosocial well-being, and the moderating role of family boundaries on the relationship between family structure and adolescents' psychosocial well-being. This is followed by a discussion of the theoretical framework. Lastly, the conceptual framework to be used is presented and explained, followed by a chapter summary.

The Relationship between Family Subsystems and Psychosocial Well-being of Adolescents

Rovelli et al. (2022) investigated the role of family subsystems in the mental health of the members of the family. Guided by the Resource-Based View (RBV), the study was conducted in Peru, and the findings were informed through an empirical literature review. The findings observed that a supportive parent-child relationship, marked by open communication and emotional support, can improve a child's self-esteem, emotional regulation, and overall well-being, a finding that is consistent with Frosch et al. (2021). The study also indicated that, in contrast, dysfunctional subsystems characterized by conflict or neglect can contribute to psychological issues like anxiety, depression, or low self-worth, a view supported by Skinner et al. (2022b). However, it was structured to provide an overview of the role of family subsystems in the family business, thus opening a context that the current study addressed by focusing on secondary school students.

There is a strong connection between family subsystems and adolescents' well-being guided by the family systems theory. A descriptive analysis study was conducted by Swanson et al. (2021) to establish the role of psychological well-being of students on their academic outcomes. The findings of the study, which was conducted in the USA, showed that parental subsystem influence extends beyond psychosocial health to affect adolescents' physical and cognitive development. Explained through the theory of change, the findings also indicated that families with a well-functioning parental subsystem are more likely to thrive, a sentiment shared by Anderson et al. (2020). However, the study was conducted using existing literature, thus opening a methodological gap, which the study addressed using primary data.

Research from Western contexts shows that the interaction between family subsystems is crucial in stabilizing and harmonizing family functioning guided by Social Support Theory. This observation was made by Skinner et al. (2022b), who investigated marital relationship dynamics and children's outcomes in the USA. The study, which was anchored on the family systems theory, was longitudinal and showed that marital stability directly shapes the psychosocial well-being of children, with children from the church unable to form sustainable relationships. The findings also indicated that economic conditions significantly influence parent-child relationships, with a warm parent-child bond more likely when parents have favorable economic circumstances, a view similarly shared by Frosch et al. (2021). However, this was a longitudinal study design, thus opening a methodological gap, which the current study bridged by using a cross-sectional correlational study design.

Effective communication is crucial for maintaining marital bonds and is reflected in the behavior of children and blended families. Guided by the Family System Theory, Onchi and Lami (2024) studied the effect of family characteristics on

the psychological well-being of children, and the findings were informed by synthesizing existing literature. The study was conducted in Nigeria, and the findings were explained through the lens of attachment theory and family systems theory**.** The findings showed that family stability was supported by emotional support and prioritizing the child's best interests over personal conflicts, fostering resilience, and helping children adjust positively after separations. The findings also demonstrated that secure bonds with both parents foster resilience and healthy development, a finding similarly shared by Aduloju (2019). However, the study was conceptualized to explore the challenges of co-parenting, thus opening a conceptual gap. The present study addressed the gap by investigating the relationship between family subsystems and psychosocial well-being.

The traditional African family structure extends beyond the conventional parental, sibling, parent-child, and marital subsystems to involve the broader community, guided by Social Support Theory. This was an observation made by Musiimenta et al. (2024), who sought to explain the nexus between parenting style and children’s behavioral formation in Uganda. A cross-sectional design was conducted using 88 teachers, one school inspector, and 819 primary school students. The findings of the study suggested that while parents are central in modeling behavior, the community also guides and corrects children. The findings additionally indicated that the interaction between family subsystems influences how children from different family structures model their relationships, a finding mirrored by Balogun and Oyekola (2024). However, the study was conducted using young children, thus opening a contextual gap, which the current study filled by focusing on secondary school children.

In Kenya, family subsystems exist but vary in their strength and functionality, an observation made by Onsando et al. (2021). Guided by Social Support Theory, the study, which was explained through the family systems theory, sought to explain family subsystems and juvenile delinquency using a sample of 120 delinquent children. The study showed that the majority of the participants were coming from single-parent or absent-parent households or living with grandparents. The study observed that while the parental subsystem remains active, rising cases of juvenile delinquency and street children suggest a decline in family stability and consistency, a finding shared by Nyabundi (2023). The study also established that marital dysfunction was seen in the increasing number of children born out of wedlock and higher rates of separation and divorce, particularly in urban areas. However, the study focused on delinquent children, thus creating a contextual gap, which the current study addressed by focusing on secondary school children.

Parental Subsystem

The parental subsystem is centred on the harmony between the parents, who are the primary initiators of the family relationship according to a study done in mainland China (Hu et al., 2024). It serves as the foundation for other family dynamics and is essential for the healthy development of children (Buehler, 2020). This subsystem defines the roles and responsibilities of family members, establishes communication patterns, and shapes parenting styles, discipline approaches, and decision-making processes (Buehler, 2020). The stability and well-being of the parental subsystem are critical in fostering a nurturing environment that supports children's psychological, social, and emotional growth (Cantor et al., 2021). Children are more likely to experience consistency, security, and positive role modelling when this subsystem is strong, leading to favourable developmental outcomes (Petegem et

al., 2022). Conversely, dysfunction or strain within the parental subsystem can result in instability, adversely affecting children's development and the overall family structure.

Zhu and Shek (2020) explored the relationship between the parental subsystem and adolescent outcomes in a study conducted in China and Hong Kong involving 2,669 adolescents. The study was guided by the Family Systems theory. Their findings revealed that parents often respond to disruptive behaviours by withdrawing warmth, which exacerbates the adolescents' behaviour and diminishes their quality of life. This suggests that improving the well-being of adolescents with externalizing behaviours is crucial. Additionally, the study emphasized the need for parents to develop strategies to better understand and respond to their children's emotional and behavioural challenges. Gao et al. (2019) supported these findings by demonstrating that increased parental emotional involvement can reduce adolescents' externalizing behaviours. This study highlighted the importance of the parental system in shaping adolescent outcomes, revealing a conceptual gap in understanding this relationship fully.

Shek and Dou (2020) studied parent-child relationships in a student population in Hong Kong, examining how these dynamics change as children mature guided by the Family Systems Theory. The research found that as adolescents seek more independence, parents tend to reduce direct control to accommodate their growing autonomy. While parent-adolescent relationships may experience tension during middle school, they generally improve as adolescents mature. This improvement reflects an adjustment period for both parents and children, ultimately leading to more stable and positive relationships over time. The study also noted differences in the roles of mothers and fathers, with variations in control levels and relational quality

influenced by societal expectations and parenting styles. These findings align with those of Zhang et al. (2022), further supporting that the parent-child relationship is dynamic and influenced by various factors. However, this was a longitudinal study design, thus opening a methodological gap, which the current study filled by using cross-sectional correlational study design.

Charak et al. (2021) investigated the impact of the parental subsystem on children's development in Burundi, involving 227 parent-child dyads guided by the family systems theory. The study revealed that 69.5% of the participating parents had experienced some form of child abuse, and the percentage was even higher for their children, reaching 89.4%. The study found that a parent's history of childhood maltreatment (CM) raises the risk of their children experiencing CM, partly due to weakened parent-child bonds and parental depression. Additionally, children's aggressive behaviours following CM are influenced by post-traumatic stress symptoms (PTSS) rather than peer or sibling victimization. The study suggests that addressing parental mental health and strengthening parent-child relationships are crucial in breaking the cycle of maltreatment across generations. These findings align with Greene et al. (2020), though they highlight a conceptual gap in exploring the intergenerational impact on children's development.

Chege and Kathungu (2021) investigated the role of family structure in adolescent substance abuse in Kajiado County, Kenya, with 356 respondents guided by Social Support Theory. The study found that family structure did not significantly influence youth drug use, despite differences in prevalence between single-parent and two-parent families. This contrasts with Hoffmann's (2022) study in the USA, which argued that family structure impacts adolescent behavior, particularly in single-parent households. Chege and Kathungu (2021) suggested that the strong extended family

system in the rural study area may have influenced societal norms and behaviors, affecting the results. The study only examined parental subsystems, leaving out other factors like socioeconomic status, parental involvement, and community influences. Further research is needed to explore these factors and their relationship with family structure in adolescent substance abuse.

In Kiambu County, Kenya, the psychological well-being of adolescents is deeply shaped by the parental subsystem and the Family Systems Theory. Ngata and Mvungu (2023) found that destructive interparental conflicts are associated with increased depressive symptoms in adolescents, highlighting the crucial role of positive parental relationships in supporting their mental health. Evidently, authoritarian, permissive, and uninvolved parenting styles have been linked to increased rates of substance use among adolescents in the county's treatment facilities, indicating that parenting practices have a direct influence on their behaviour (Gatune, 2020). Furthermore, it has been discovered that post-divorce parental alienation negatively impacts adolescents' interpersonal interactions and sense of purpose, demonstrating the important impact of family dynamics on adolescent development (Wanjao et al., 2023). However, these studies primarily focus on direct parental influences, potentially overlooking the broader socio-cultural factors that may also contribute to adolescents' psychosocial well-being in the area.

Marital Subsystem

Liu et al. (2024) investigated the impact of marital subsystems on children's psychological well-being in China, involving 976 marital couples. Their study, which was guided by Social Support Theory revealed that improvements in marital quality led to better child behaviour, whereas children's behaviour did not influence marital quality. This indicates that stronger marital relationships can contribute to fewer

behavioural problems in children. Additionally, the study found that problematic child behaviour resulted in stricter parental discipline. Specifically, better paternal marital quality was associated with reduced psychological aggression. However, marital quality did not affect child behaviour through changes in discipline. These findings align with Wang et al. (2024), who also noted that marital harmony predicted the severity of discipline. The study's focus on parental perspectives introduces a methodological gap, as it may only capture some relevant factors influencing the observed dynamics.

Ji et al. (2023) examined the effects of co-parenting versus a traditional two-parent relationship on adolescent well-being guided by Social Support Theory. They found that maternal positive co-parenting is crucial for developing adolescent ego-identity, highlighting the importance of supportive and collaborative parenting in shaping adolescents' self-concept and identity. This suggests that peer interactions also play a significant role in converting positive parenting into robust ego-identity development. Although paternal marital satisfaction influences overall family dynamics, its direct impact on the relationship between maternal co-parenting and adolescent ego-identity is minimal. These findings are supported by a study by Ding et al. (2022) and Ronaghan et al. (2024), which confirm that both co-parenting and two-parent family structures are beneficial. However, the studies also indicate that two-parent families offer additional stability, as adolescents have more consistent access to both parents. The study's focus on co-parenting and two-parent family structures introduces a conceptual gap, as it may need to address other family dynamics that could impact adolescent well-being fully.

Mohapanele et al. (2023) explored the impact of stepfamilies on the psychological well-being of 15 street children in South Africa using purposive

sampling. The study, which was anchored on the Family Systems theory, found that stepfamily structures often negatively affect children, with many feelings unloved and abused, which drives them to prefer street life. This situation is worsened by inadequate economic resources. These findings are consistent with Debowska et al. (2021), who noted that stepfamilies in England expose children to violence. In contrast, Jensen and Sanner (2021) reported that while positive stepparent-child relationships can improve children's well-being over time, the relationship between stepparents and biological parents does not significantly impact child outcomes. This highlights a contextual gap, as the results may not apply to all stepfamily situations or cultural settings. Additionally, purposive sampling introduces a methodological gap, limiting the generalizability of the findings.

Ayako et al. (2021) explored the psychological well-being of children whose mothers were forced into arranged marriages in Wajir County, Kenya, through focus group discussions with 40 participants. The study was guided by mixed findings and the findings explained through the Family Systems theory. On one hand, some children appeared to adjust well psychologically, aligning with Schaffnit et al. (2023), who noted that cultural factors might positively influence outcomes. The authors argue that the lack of choice in arranged marriages often fosters resentment, sometimes leading to violence, which negatively impacts children's well-being (Abera et al., 2020). Moreover, they highlight how the gradual decline of arranged marriage practices raises broader societal questions about their relevance and long-term effects. However, by focusing primarily on arranged marriages, the study overlooks other crucial factors influencing children's psychological well-being, leaving room for further research.

Parent-Child Subsystem

The parent-child subsystem is shaped by both parental and marital dynamics, making it a complex and evolving relationship (Gao et al., 2022). This relationship determines how parents and children interact and support one another (Jiménez-Picón et al., 2021). Supportive and approachable parenting fosters a safe environment where adolescents feel comfortable seeking guidance, which bolsters their psychosocial well-being. Adolescents with solid and positive connections to their parents tend to show better emotional and social adjustment (Gao et al., 2022). Effective communication, secure attachment, and positive interactions within the parent-child relationship promote healthier emotional and behavioural outcomes (Lindstedt et al., 2024).

The parent-child relationship also has implications for the psychosocial well-being of children. Van Petegem et al. (2022) explored the impact of the parent-child relationship on adolescents' mental health in a study conducted in Switzerland involving 174 adolescents. The qualitative study design, which was guided by Social Support Theory, found that adolescents' perceptions of their parents' dynamics – especially when they feel caught in parental conflicts (triangulation) – can significantly affect their mental well-being. In clinical practice, this suggests that interventions aimed at reducing adolescent anxiety should not only focus on the individual but also seek to improve overall family dynamics, particularly the relationship with the parents. Liu et al. (2023) validated these findings, highlighting the critical role of parental overindulgence in children's lives. However, this raises a conceptual gap that requires further exploration to understand the full implications of parental overindulgence on adolescent outcomes.

Kumar et al. (2018) explored the evolving role of parents in Kenya's Nairobi slums amidst extreme poverty, guided by the Family Systems theory. The

phenomenological study design, which involved interviews with seven informants, including teachers and health workers, found that parents struggled to maintain family cohesion despite their efforts. The pressures of poverty exacerbated mental stress in adolescents and often led to emotional detachment or abandonment, especially by male parents. These findings were supported by Ho et al. (2022), who also identified that poverty-induced stress negatively affects the parent-child relationship. The study's reliance on interviews with educators and healthcare professionals highlights a methodological gap, suggesting further research incorporating additional perspectives to understand the impact of poverty on parenting dynamics fully.

Sibling Subsystem

The sibling subsystem significantly shapes an adolescent's psychosocial well-being by offering emotional support and fostering social skills (Rawat & Malik, 2024). Positive sibling interactions reduce loneliness, build resilience, and lower stress (Çitak et al., 2023). Siblings help adolescents develop empathy, communication, and conflict-resolution skills through everyday exchanges. Older siblings often act as role models, impacting their younger siblings' academic and social behaviours (Szymańska, 2021). Supportive sibling relationships contribute to a positive family environment, bolstering emotional health and aiding in identity formation and self-esteem (Rawat & Malik, 2024).

Katz et al. (2023) examined the psychological well-being of siblings who experienced childhood abuse, focusing on 20 adults in Israel. Data was collected through in-depth interviews, and the findings were explained through the Stress–Coping Framework. The study found that siblings often formed a strong, collaborative bond to protect each other from abuse and navigate challenging life situations. This protective collaboration was crucial in managing the challenges posed by their shared

experiences of abuse. Additionally, the research revealed that sibling relationships tended to deepen with age, with increased affection as they grew older. However, the study also noted that sibling bonds could become strained if some siblings received preferential treatment, leading to drift between them. These findings align with those of Van Petegem et al. (2022), highlighting the complex dynamics within sibling relationships in the context of childhood abuse. However, the study was limited to children who had gone through maltreatment, thus opening a contextual gap, which the current study seeks to fill by focusing on secondary school children.

Zhang and Holden (2024) studied the impact of sibling support on educational outcomes in Niger and Ghana using the Family Systems Theory. They found that sibling status had a minor effect on academic performance for both children with disabilities and those without. While some positive and negative effects emerged based on sibling type and gender, particularly in Ghana, sibling support alone was not a strong factor in school performance. These findings contrast with those of Krejčová et al. (2019), who found a positive link between sibling support and better academic achievement. The study highlights a gap in understanding the broader role of sibling dynamics in education, especially across different contexts.

Extended Family Subsystems

The extended family subsystem, including relatives like grandparents, aunts, uncles, and cousins, is vital in supporting adolescent psychosocial well-being (Herke et al., 2020). This network provides emotional, financial, and practical assistance, helping reduce stress and guiding adolescents through challenges (Oropesa-Ruiz, 2022). Extended family members also pass down cultural traditions, which fosters identity development and a sense of heritage (Herke et al., 2020). They can act as mentors or role models, offering diverse perspectives that aid decision-making and

personal growth. Additionally, the extended family offers stability and critical support during crises such as parental separation or financial hardship (Herke et al., 2020).

Bai et al. (2023) conducted a scoping review in the USA, synthesizing findings from 42 studies to explore the impact of family history on family well-being. The study, which was guided by Stress–Coping Framework, revealed that extended family subsystems in the developed world, particularly in the West, were constrained by legal boundaries that limit grandparents' involvement in parenting, unlike in Africa and Asia, where grandparents are culturally expected to play an active role in guiding parenting. Another study by Nwanmouh et al. (2024) observed a weakening of the extended family structure in Africa, with grandparents playing a diminishing role in their grandchildren's lives. However, they still hold essential cultural responsibilities, such as overseeing rites of passage. Bai et al.'s (2023) review highlights methodological and conceptual gaps, particularly regarding the changing role of extended families across different cultural contexts.

Mabetha et al. (2024) investigated the impact of family subsystems on child upbringing in South Africa, involving 24 community leaders through in-depth interviews. The study, which was guided by Family Systems Theory, found that the strength of family ties and the level of active involvement from kin are crucial for effective kin caregiving. These findings align with Wu et al. (2020), who conducted a systematic review and reached similar conclusions. However, Gómez (2021) challenged this perspective by highlighting that community involvement, rather than family subsystems alone, is essential for improving children's resilience. Further research could address this gap by incorporating diverse methodological approaches and exploring the role of broader community involvement alongside family subsystems.

Psychosocial Well-being

Gaspar et al. (2022) investigated the role of parental care on children's psychosocial well-being, guided by a descriptive study design. The study was conducted in Portugal and guided by family systems theory, and the findings were informed by interviewing a sample of 1757 parents of adolescents. The study showed that parental support directly and positively influenced adolescent resilience. The findings additionally demonstrated that better family functioning was linked to higher child well-being. However, that study also demonstrated that conflict and extreme poverty exacerbate adolescent vulnerability, a finding supported by Mabrouk et al. (2022). However, the field study was guided through a descriptive study design, thus opening a methodological gap, which the current study addressed by leveraging a correlational study design.

In a study drawing a sample of participants from Ghana, Nigeria, and Angola, Mazzucato et al. (2015) investigated the role of parental proximity and the psychosocial well-being of their children. The study, which was anchored on attachment theory, and the field study guided on quantitative, cross-sectional study design, relied on a sample of 7171 secondary school students. The study showed that children living with one parent generally scored worse on psychosocial well-being compared to peers living with both parents, a finding buttressed by Nwagwu et al. (2024). The study also demonstrated that caregiver changes were consistently linked to poorer outcomes across all three countries. The study also picked out cultural norms as buffering children from Ghana from the negative effect of parental deficiency. In Nigeria, the study reported that fathers as caregivers were associated with poorer psychosocial outcomes, while in Angola**,** both maternal and paternal migration worsened well-being. However, the study was conceptualized to test the

effect of parental migration on children's well-being, thus opening a conceptual gap, a gap which was filled by not discriminating on the participants based on the presence of their parents/caregivers.

Again, Okoth (2023) investigated the link between parental relationship status and the psychosocial well-being of university students. This was a mixed study design, explained through the lens of attachment theory and family systems theory, and the findings were informed by interviewing 123 university students. The study demonstrated that parental marital status significantly influenced anxiety and depression and the extent to which they function behaviorally and socially, a finding that is reinforced by Panula et al. (2020). This is further shown by the fact that 50% of male students in the sample abused alcohol following parental divorce, emphasizing how marital status can predict psychosocial problems. However, the study was conceptualized to understand the psychosocial well-being of students from the lens of their parents' marital status, opening both contextual and conceptual gaps.

Relationship between Family Hierarchy and Adolescents' Psychosocial Well-Being

Family hierarchy organizes authority and roles within a family, shaping interactions and influencing adolescent psychosocial well-being through established boundaries. This was demonstrated by Lansford (2022), who investigated the family structure on family stability by evaluating existing literature. The study demonstrated that in most collectivist societies, there is a non-written rule imposed on males and females that ensures family stability. This slightly varies in individualistic societies, as individuals are more detached from the rest of the families. The study also observed that cultural differences influence how authority is perceived and exercised, impacting whether adolescents experience supportive or restrictive boundaries, a

finding that was supported by Hünteler (2022). However, the study relied on extant literature, thus opening a methodological gap, which the current study addressed by using primary data.

Similarly, Cowan and Cowan (2020) investigated the role played by parents in children's outcomes. The study, which was anchored on the ecological family system model, was conducted in Switzerland, and the findings were informed through an empirical review of relevant literature. The study established that a clear hierarchy provides stability by defining roles and responsibilities, creating a secure environment with clear expectations, which was replicated. The study also noted that it is expected that the quality of marital life declines after children are born and that after 15 years, children that appear to be coming from stable families start to have mental problems, a finding supported by Kravdal and Wörn (2023). However, this study was anchored on Ecological Family System theory, a gap that was filled by anchoring the study on Structural Family theory and Social Integration theory.

Moreover, Tabrizi et al. (2024) explored the determinants of mental health behavior among adolescents. The scoping review study was conducted in Iran, and the findings were explained through the transtheoretical model. The study observed that the family structure, the level of income, social support, and spiritual factors played a significant role in family stability. Parental authority, when well exercised, was particularly helpful in laying a good foundation for children. The same study noted that, however, overly rigid or poorly managed hierarchies can lead to conflict, restrict adolescent autonomy, and contribute to psychosocial distress, a finding that was supported by Basto-Pereira and Farrington (2022). However, the study relied on extant literature, thus opening a methodological gap, which the current study managed by using primary data.

Moreover, Rejaän (2024) investigated how family hierarchy impacts children's autonomy through a longitudinal study involving 277 divorced parents. The study was conducted in the Netherlands, and the findings were explained through the Family Systems Theory. The findings showed that adolescents reported greater belonging when the coparenting responsibility was more cooperative and devoid of conflict. The findings noted that as family structures change, maintaining a balance between authority and flexibility is essential for fostering adolescent well-being, autonomy, and identity development, a finding supported by Cross et al. (2022). However, the study participants were divorced parents, thus opening a methodological gap, which the present study addressed by focusing on secondary school students.

Decision Making

Lück and Castrén (2018) explored the cultural norms that promoted harmony in families in Europe. The study was conducted in German through documentary evidence and explained through the lens of families and feminist theory. The findings observed that in nuclear families, which are more common in Western and increasingly in urban African contexts, decision-making is typically confined to the parents. However, the emphasis on individualism in these cultures often leads to decisions being made quickly to address the immediate needs and desires of the nuclear family. Individualism can place significant pressure on parents, especially in the absence of extended family support, as they may face challenges without the broader input of extended family members, an observation similarly made by Smith & Johnson (2022). However, the study was conducted through documentary evidence, thus opening a methodological gap, which the current study filled, relying on primary

Domínguez and Millán-Franco (2023) investigated how blended families support each other. The study, which was conducted in France, involved 12 blended

families and was explained using a sociological and social work–oriented framework. The findings showed that blended families, which include parents and children from previous relationships, face unique challenges in decision-making. Poor decision-making can be risky, potentially leading to family breakdown and instability. Past relationship trauma may affect adolescents' psychosocial health, making their adjustment to the blended family structure more difficult, an observation also shared by Sloan (2021). The complexities of these relationships often result in conflicts and divided loyalties, complicating decision-making. However, the study focused on blended families, thus excluding other types of families, thus opening a contextual gap, which the current study addressed by focusing on secondary school students.

In Kenya, Gachaki (2020) investigated the role of single parenting in children's outcomes. This was a descriptive and correlational research design, and 138 university students were involved, with the findings explained through attachment theory. The study indicated that hierarchical structure allows for quicker decision-making, as consultations were typically limited to the single parent and the adolescent. The findings additionally observed that single parenting did not significantly affect academic performance or antisocial behavior. However, the study was conducted among university students, thus opening a contextual gap, which the current study bridged by focusing on secondary school students.

Power Dynamics

Causadias (2020) investigated the role of culture in family formation and its impact on children’s outcomes through a literature review. The study was conducted in the USA, and findings are explained through the lens of race theory and the dynamic relational theory of power. The findings suggested that in traditional family structures, adults typically hold significant sway over family functioning and

decision-making. This is highly regulated by societal expectations, such as ensuring children attend school and adhere to social norms. The finding is further supported by Lyna (2022), who noted that power dynamics among blended families can be very complex as they merge family units from previous relationships (Lyna, 2022). However, the study was conducted to establish how culture shapes societies, suggesting a conceptual gap, which the present study addresses by investigating the power dynamics and adolescent outcomes.

Similarly, Smith & Johnson (2022) investigated the role of power dynamics in children's development. The study was conducted in the USA using a review of existing literature, and the findings were explained through the family systems theory. The study found that in nuclear families, power was usually concentrated within the parents, particularly the primary caregivers. The emphasis on individualism and autonomy in Western cultures often leads parents to make decisions based on their immediate needs and preferences. The study also noted that power struggles often erupt between biological parents, stepparents, and children, especially when negotiating roles and responsibilities, as each party may be inclined to protect their interests, as also noted by Allan and Power (2024). However, the study was conducted using existing literature, thus opening an empirical gap, which the present study addressed using primary data.

Hailu et al. (2025) studied the family structure on adolescent outcomes in Africa through a systematic literature review. The study, which was conducted in Ethiopia, and the findings were explained through the lens of public health and social care theory. The study found that various factors, including culture, economic conditions, and societal expectations, influence power dynamics within a family. The findings also observed that concentration of power allows for more rapid decision-

making but can also result in decisions that lack broader input, potentially overlooking diverse perspectives that could benefit the family, a finding supported by Yeji et al. (2025). However, the study was conducted using secondary sources, thus opening a methodological gap, which the current study addressed by using primary data.

In Kenya, Ochieng investigated the role of the extended family in children's outcomes in Kenya. The descriptive study design was grounded in family systems theory, and 156 families were sampled for the study. The study noted that in traditional extended families, power is shared among multiple family members, particularly elders and extended relatives. The findings are reinforced by Jones and Smith (2023), who observed that involving multiple family members in decision-making ensures diverse perspectives, resulting in balanced decisions. Additionally, the collective approach helps preserve cultural values and family traditions, reinforcing social cohesion. Furthermore, the shared decision-making process reinforces cultural values, social cohesion, and family support systems, which may serve as protective factors in adolescent psychosocial adjustment. The study was contextually limited as it dealt with the extended family, a gap that the current study filled by focusing on secondary school children, regardless of their caregivers.

Moderating Role of Family Boundaries on the Relationship Between Family Structure and Adolescents' Psychosocial Well-being

This part will focus on examining the moderating effect of family boundaries on the relationship between family structure and adolescents' psychosocial well-being. It explores how clear, flexible, or rigid family boundaries can shape the influence that different family structures have on young people's emotional and social adjustment. The section, hence, emphasises the significance of boundary dynamics in

comprehending differences in adolescent outcomes across various family environments by emphasising this moderating effect.

Family Structures and Adolescents' Psychosocial Well-being

Tafà et al. (2022) investigated the relationship between family structure and adolescent outcomes guided by Family System Theory. The study was conducted in Italy, and the findings were informed by existing literature and explained through family systems theory. The findings showed that boundaries are crucial for maintaining a balance between individual autonomy and family cohesion, contributing to a secure environment where each family member understands expectations and roles, which fosters healthy relationships and better psychosocial health. This was further supported by Hernandez et al. (2020), who noted that clear and well-communicated boundaries help prevent misunderstandings and conflicts, while unclear or rigid boundaries can create tension and isolation. Family boundaries are essential for understanding family dynamics, as they impact how family members interact and navigate their relationships within and outside the family. However, the field study was grounded on existing literature, thus opening a methodological gap, which the current study addressed by using primary data.

Similarly, Herke et al. (2020) explored the family structure's effect on family climate in Germany. The longitudinal study design involved 6838 preteen children and was explained through the lens of family systems theory. Research has demonstrated that family boundaries played a significant role in shaping the psychosocial health of teenagers (Herke et al., 2020). The finding was supported by Park and Lee (2020), who noted that open communication, where family members freely share their thoughts, feelings, and concerns, led to a healthy family structure. Restricted communication, characterized by limited emotional sharing, often resulted

in misunderstandings and hierarchical communication. Again, the study findings suggested that authority structure within the family causes certain voices to hold more influence than others, thus inhibiting family structure. However, the study focused on preteen children, suggesting a contextual gap, which the current study filled by concentrating on secondary school children.

***Family Boundaries and Communicatio*n**

Murphy et al. (2021) investigated the role of communication on adolescents' psychosocial well-being. The study was conducted in the USA, and 85 adolescents were sampled, and the insights for explaining the findings were gleaned from attachment theory. The study established that open communication fosters trust between adolescents and their parents or caregivers, a finding supported by Gergerich et al. (2018). On the contrary, the study also observed that restricted communication can contribute to feelings of isolation, frustration, and a lack of trust within the family, potentially leading to negative behaviors and strained relationships. The study therefore observed that for open communication to be effective, parents must remain approachable, be honest and transparent, and use positive reinforcement. However, the study was linked to adolescents living in major urban centers, thus opening a contextual gap, which the present study filled by focusing on secondary school students in Ruiru Subcounty, Kiambu County.

Zapf et al. (2023) explored the effect of children’s open communication on children’s well-being in the USA, guided by a systematic literature review. Guided by family systems theory, social control theory, and developmental & attachment perspectives, the researchers observed that open communication helped in the development of healthy emotions, affirming self-worth, and improving decision-making skills. It also strengthens family bonds and promotes positive behavior, a

finding replicated by Brown et al. (2020). In the same vein, the study noted that teenagers who felt their opinions were respected and their emotions validated sought support and guidance from their parents. Conversely, adolescents who felt their opinions were disregarded withdrew and adopted behaviors that harmed their future. However, the study relied on an empirical literature review, thereby creating a methodological gap that the present study bridged by using primary data.

Moreover, Bi and Wang (2021) examined the role of communication between parents and their adolescent children in China. Guided by Self-Determination Theory (SDT) and Evolutionary Life History Theory, the study leveraged the views collected from 442 college students. The study found that effective management requires balancing authority with open dialogue to ensure all members feel heard and respected, a view shared by Ye and Agarwal (2024). However, the top-down communication limited the voices of lower-ranking members, leading to misunderstandings or feelings of isolation. The researchers also noted that healthier family interactions promoted emotional resilience and stability among adolescents across diverse family structures. However, the study was conceptualized to investigate the top-down communication approach, thereby creating a conceptual gap that the present study bridged by using decision-making and defining clear roles.

Family Communication and Adolescents' Well-being. Huang et al. (2023) conducted a longitudinal study in China with 100 adolescents to explore the impact of family communication on psychosocial well-being. The study, which was anchored on Family Systems Theory found that ineffective or strained family communication exacerbates adverse outcomes, including increased family violence, which in turn contributes to higher levels of depression and anxiety among adolescents. This finding indicates that low-income family communication can lead to family violence, which

partially explains the link between poor communication and mental health issues. The study's results are supported by Ying et al. (2015), who found that effective communication fosters trust between adolescents and their parents. Huang et al. (2023) also introduced problematic internet use as a mediator, highlighting a new conceptual angle. However, as a longitudinal study, it also raises methodological considerations regarding its design and long-term implications.

Grey et al. (2022) examined the impact of parental communication on adolescents' well-being in England. The empirical review study design was anchored on Family Systems Theory, the Social Control Theory, and the Social Support Theory. The study established that positive parental communication attracts teenagers to their parents, affirming their self-worth and fostering positive psychosocial well-being. Conversely, hostile communication pushes adolescents away, leading to rebellion against parental authority and exposing them to poor mental health. This finding is supported by Paine et al. (2020), who found that healthy parental communication is crucial for effective parenting, particularly for adopted adolescents. In addition, Ranieri et al. (2022) highlighted that ineffective communication obstructs the development of a productive relationship between parents and their adopted children. However, Grey et al.'s (2022) study, being a systematic review, introduces both methodological and conceptual gaps.

Akatukwasa et al. (2022) examined the impact of parental communication on adolescents' psychosocial well-being. This study specifically focused on sexual purity and engagement as indicators of mental health among 208 caregivers in Uganda. The study outcomes, which were anchored on family systems theory, demonstrated that a higher comfort level with sexual and reproductive health (SRH) communication was positively associated with more frequent discussions on SRH topics. This finding is

supported by Vongsavanh et al. (2020), who suggested that caregivers more comfortable discussing SRH were likely to have more comprehensive and frequent conversations with their adolescents. Additionally, Akatukwasa et al. (2022) revealed that comfort with SRH communication decreases as the number of young adolescents in the household increases, suggesting that managing these discussions becomes more complex for caregivers with multiple adolescents—however, the focus on caregivers as participants presents a methodological gap.

Skinner et al. (2022) conducted a longitudinal study across Kenya, China, Thailand, and Sweden to examine how parental communication influences children's outcomes. With a sample of 472 participants, including both children and their parents, and anchored on family systems theory. The findings demonstrated that positive and supportive maternal interactions significantly reduce adolescent behavioral issues such as aggression and defiance, reinforcing the conclusions of Cutrín et al. (2022). Furthermore, effective dyadic coping, in which parents support each other and manage stress well, was found to enhance maternal warmth, indirectly reducing externalizing behaviors—a result consistent with Vongsavanh et al. (2020). While these findings highlight the importance of parental communication and stress management, the study's broad scope raises concerns about cultural variations and the need for context-specific analyses.

Family Boundaries and the Level of Engagement

Waid and Kelly (2020) conducted a scoping review in the USA to examine the impact of parental engagement on the psychosocial well-being of adolescents with mental health issues guided by the Family Systems Theory. By synthesizing findings from 40 articles, the study concluded that parental engagement plays a crucial role in the recovery of adolescents facing mental health challenges. This finding aligns with

Mackova et al. (2022), who found that parental ignorance often hinders adequate support for mentally ill teenagers and may even contribute to the development of mental health issues in the first place. Waid and Kelly (2020) also emphasized the importance of parents being perceived as available by their adolescent children, underscoring the benefits of parental presence. However, the study's reliance on secondary materials for data introduces a methodological gap.

Anyakoha et al. (2023) investigated the role of communication in the relationship between parents and their children. The study, which was grounded in the family systems theory, was anchored on a descriptive survey design and involved 186 participants. suggested that family engagement facilitated transparent and honest dialogue between parents and adolescents, which supports adolescent psychosocial development in Nigeria. This study also underscores the significant role of modern communication tools in maintaining connections and effective engagement between parents and adolescents. However, challenges like busy parental schedules and differing communication styles can hinder effective interaction and relationship-building. These findings were validated by Olusanya and Jagede (2022), who observed that opportunities for emotional connection, guidance, and relationship-building significantly influence family bonds and adolescents' sense of support. The study's focus on university students introduces a contextual gap, as the findings may only partially apply to other age groups or family settings.

Nyongesa et al. (2022) explored the impact of community support on the psychosocial well-being of adolescents in Nairobi, Kenya. The qualitative study, which was explained through the Transcultural Translation and Adaptation (TTA) framework, involved 20 caregivers who participated in focus group discussions and 42 adolescents. The findings revealed that community engagement positively

influenced the psychosocial well-being of adolescents. However, the study also noted that Nairobi's multicultural setting posed challenges to effective community interaction, as different cultures had varying perspectives on issues, including mental health. This observation aligns with Gopalakrishnan (2018), who found that cultural differences lead to diverse interpretations of mental illness. These results reinforce the argument by Sharpe et al. (2024) that while community support is essential, interventions must be culturally sensitive to maximize their effectiveness in promoting adolescent well-being.

Family Boundary Types and Adolescents' Psychosocial Well-being

Adolescents who feel close to their parents and understand the expectations and limits set by them are less likely to develop behavioural and emotional issues (Skinner et al., 2022). For instance, Frosch et al. (2021) examined the supporting structures that help families raise well-adjusted children, focusing on the role of healthy boundaries within the family. The study in the USA reported that rigid boundaries may restrict adolescents, hindering their ability to express themselves. In contrast, overly flexible or unclear boundaries can lead to confusion and a lack of direction, heightening the risk of behavioural and emotional disorders. In contrast, Selman et al. (2024) suggested that healthy boundaries in child development are crucial for fostering solid parent-child relationships, serving as protective factors against psychosocial issues. These findings by Frosch et al. (2021) and Selman et al. (2024) align with findings from Colizzi et al. (2020), who emphasized the family's role as the most critical platform for shielding adolescents from mental health problems.

A longitudinal study in the USA involving 674 families by Krauss et al. (2020) demonstrated that family structure significantly influences how boundaries are set and

maintained, with adolescents from families exhibiting strong cohesion and well-defined boundaries showing better psychosocial outcomes. This finding is supported by Chavda and Nisarga (2023), who highlighted the positive effects of cohesive family environments. Conversely, the study by Krauss et al. (2020) proposed that adolescents from families with disrupted boundaries, such as those experiencing parental separation or divorce, are at a higher risk of psychological distress. While the longitudinal nature of the study provides valuable insights over time, it also suggests a methodological gap. The study addressed the gap by using a correlational study design under the cross-sectional study framework.

Timothy (2021) investigated the impact of family boundaries on the psychosocial well-being of adolescents in Uganda, involving 201 participants, including adolescents, their parents, and community leaders. The study found that adolescents who maintain healthy and supportive relationships with family, peers, and others are more likely to experience higher levels of psychological well-being, a result validated by Blum et al. (2021). This emphasizes the importance of fostering positive social connections during adolescence. Additionally, the study revealed that adolescents engaged in personal development, learning, and goal achievement experience greater psychological satisfaction, a finding supported by An et al. (2024). Furthermore, the study established that a stable and well-maintained environment – characterized by a structured family setting, consistent routines, and supportive systems – positively impacts adolescent mental health. The study involved parents, community leaders, and adolescents, raising a methodological gap, which the current study bridged the gap by collecting data from secondary school students.

Shihundu (2019) explored how family boundaries function as a protective factor for adolescents infected with HIV/AIDS in Kiambu County, Kenya. The study,

which involved 345 adolescents in foster homes, found that the quality of care from foster families significantly impacts the children's mental and emotional well-being, aligning with Mancinelli et al. (2021). Additionally, robust community support services were found to positively affect the well-being of these children, supporting findings from Zhan et al. (2019). The study also highlighted the importance of effective coping strategies for improving psychological health. However, the focus on adolescents with AIDS presents a contextual gap in understanding broader applications.

Theoretical Framework

In this research, the study is underpinned by Structural Family Theory. The Structural Family Therapy (SFT), developed by Salvador Minuchin in the 1960s, offers a comprehensive framework for examining the impact of family structures on the psychosocial well-being of adolescents (Jiménez et al., 2019). The theory posits that the organization of a family, defined by its subsystems and boundaries, is pivotal in shaping its members' behaviour, emotional health, and overall mental well-being (Eddy et al., 2021). Within this framework, the roles and interactions between family members are central to understanding how individuals' function within the family unit. This theoretical perspective is particularly relevant to the present study, which investigates how family boundaries influence the relationship between family structure and adolescents' psychosocial well-being in selected public high schools in Ruiru Sub-County, Kiambu County, Kenya. By applying SFT, the study aims to uncover how varying family structures contribute to or mitigate psychosocial challenges faced by adolescents in this context. This approach underscores the importance of understanding family dynamics in addressing mental health and well-being among young people.

According to SFT, family structure refers to the organized patterns of interaction within a family, determined by rules, roles, and boundaries (Eddy et al., 2021). These patterns dictate how family members relate to each other and are crucial for maintaining family stability (McDowell et al., 2022). A well-functioning family typically has clear boundaries that balance closeness and independence among its members (Coe et al., 2024). However, family structure variations, such as single-parent households, can disrupt these patterns, leading to challenges in maintaining healthy boundaries and a strong family hierarchy (Zhao et al., 2022). For adolescents, these disruptions can result in increased psychosocial difficulties, as they may struggle with identity formation and emotional regulation without the support of a stable family structure (McDowell et al., 2022).

Subsystems and hierarchies are central concepts in SFT that help explain the dynamics within different family structures (Jiménez et al., 2019). In a nuclear family, the presence of both parents often ensures more explicit boundaries and more defined subsystems, such as parental and sibling roles (Drzymala et al., 2023). However, in single-parent families, these boundaries can become blurred, leading to role reversals where adolescents might take on more adult responsibilities (DiMarzio et al., 2022). This shift can negatively affect their psychological development, as they are forced to navigate complex emotional and social challenges without the appropriate support. Understanding these dynamics is crucial for identifying how family boundaries moderate the effects of family structure on adolescents' psychosocial outcomes (Drzymala et al., 2023).

The family hierarchy is another critical element of SFT, highlighting the importance of a well-defined leadership structure within the family (Herke et al., 2020). In well-functioning families, parents or caregivers occupy leadership roles,

providing guidance and security for children (Koch et al., 2021). Disruptions in this hierarchy, such as in single-parent families, can create instability and confusion, negatively impacting adolescents' mental health (Jiménez et al., 2019). For example, the absence of a father figure in a single-parent household might lead to adolescents seeking external sources of validation or authority, which could expose them to risky behaviours and psychosocial stress. This aspect of SFT is particularly relevant to the study's focus on how different family structures influence adolescents' well-being (Masnawati & Masfufah, 2023).

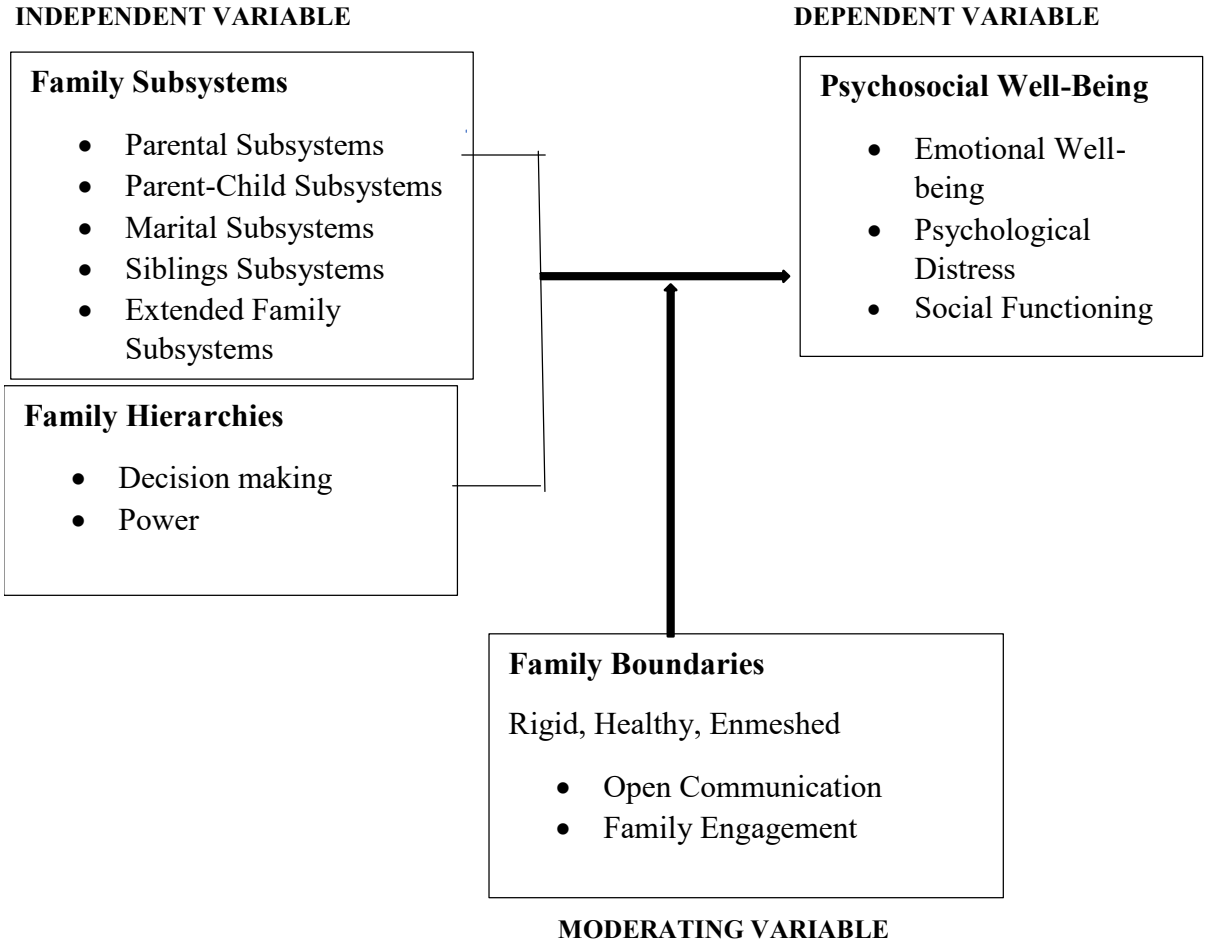
However, various criticisms have been levied against the structural family theory. For one, the theory was developed in an individualistic culture, where there is a clear relationship boundary, as opposed to a collectivist culture, where extended families play significant roles. Issues have also been raised regarding the emphasis on family subtle ties and restructuring at the expense of individuals, leaving the needs of other family members unattended. However, the study has undergone major empirical verifications, demonstrating its usefulness in addressing family issues and enhancing adolescent development. Various studies have also used the theory in varied contexts; for example, Roy and Allen (2022) used the theory to explain muscularity in the USA, and Moisă (2022) used the theory to explain dysfunctional families in Romania. Similarly, they have been used by Yang et al. (2023) to explain adolescent health in China, Oladejo and Adenuga (2022) to evaluate the status of the family structure in Nigeria, and Kathuri-Ogola and Kabaria-Muriithi (2024) to explain the adolescent transition crisis in Kenya. The use of the structural family theory in different cultures shows that the theory is versatile and has gained wide scholarly acceptance.

Conceptual Framework

A conceptual framework is a diagram that visually represents the relationships between a study's fundamental elements (Luft et al., 2022). It offers a concise overview of the research, allowing the researcher to explain the study's core components as depicted in Figure 1. The framework depicts family structures comprising family subsystems as reflected in family roles and interactions, and family hierarchy demonstrated through decision-making and power as the independent variables. Family boundaries are displayed as the moderating variable represented by open communication and family engagement. Psychosocial well-being is the dependent variable and is measured by emotional well-being, psychological distress, and social functioning.

Figure 1

Conceptual Framework



Source: Author (2025)

Chapter Summary

This chapter has synthesized relevant literature that informed the investigation. It began by exploring empirical literature aligned with the study objectives. For each objective, the chapter has examined the dimensions that influence it. The chapter has also discussed the theoretical framework, providing a comprehensive understanding of its application and relevance to the research. The conceptual framework that guided the study has also been analysed. In the next chapter, the methodology to be used is discussed.

CHAPTER THREE: RESEARCH METHODOLOGY

Introduction

This chapter provides an overview of the research methodology used to examine the moderating role of family boundaries on the relationship between family structure and adolescents' psychosocial well-being. The chapter discusses the research design, target population, sampling design, types of data, and data collection methods. It also discusses the research instruments and instrument validity and reliability. Subsequently, the research procedures are explained, and the data analysis plan is described. The chapter concludes by discussing the ethical considerations to be made and ends with a chapter summary.

Research Design

A research design is a guide that refers to the plan a researcher adopts to consistently and logically combine the many components of the study (Muzari et al., 2022). This study utilised a correlational research design to examine the relationship between the variables and determine whether a statistically significant association exists. The design measures variables quantitatively and uses statistical methods to assess the strength and direction of relationships between them. It helps identify patterns, associations, and potential predictive relationships. Therefore, it was suitable for this study because family structure, boundaries, and psychosocial well-being naturally occur and cannot be manipulated.

Target Population

The study was conducted in Ruiru Sub-County, Kiambu County, Kenya, which is part of the larger Nairobi metropolitan area. This region is characterized by a diverse population with various family structures and socio-economic conditions, making it an ideal setting for examining the moderating role of family boundaries on

psychosocial well-being. The target population was 5,392 students of 10 public secondary schools in Ruiru Sub-County, as shown in Table 1. Seven of these were mixed schools, two were boys' only schools, and one was a girls' only school.

Table 1

Population Distribution

	School	Boys	Girls	Total	Percentage
1.	Ruiru Girls ' High School	0	289	289	5.4
2.	Ruiru Boys Secondary School	520	0	520	9.6
3.	Spinners Boys School	277	0	277	5.1
4.	Githunguri mixed school	189	271	460	8.5
5.	Gitothua Mixed Secondary School	152	167	319	5.9
6.	Kihunguro Mixed Secondary School	321	338	659	12.2
7.	Kwihota Mixed Secondary School	556	634	1190	22.1
8.	Gikumari Mixed Secondary School	145	184	329	6.1
9.	Devki Mixed Secondary School	498	611	1109	20.6
10.	Uhuru Kenyatta Secondary School	93	147	240	4.5
	Total	2751	2641	5392	100.0

Source: Ruiru Subcounty education office (2025).

Sampling Method

Sampling involved selecting a subset of a population that accurately represents its characteristics, ensuring valid and reliable conclusions about the whole (Andrade, 2021; Zickar & Keith, 2023). In this study, a stratified sampling method was applied. This probability sampling technique divided the population into subgroups or strata with similar characteristics. From each stratum, a random sample was drawn in proportion to its size relative to the overall population. This method

ensured that all relevant subgroups are represented in the final sample, making the results more reflective of the diversity within the population (Nyimbili & Nyimbili, 2024).

In this study, the criteria for stratification were schools and gender. This ensured adequate representation of respondents from each school and each gender. The researcher randomly recruited Form Two and Form Three students aged 13-19 within each stratum. The study then used a purposive sampling method, with that user the age of 13 and over 19 being eliminated. Form Four students were not recruited because they were preparing for their national examinations, and as such, schools did not want their program interrupted (Macharia, 2024; Majimbo et al., 2023).

Sample Size

Sampling is used to collect data representing the target population when the entire population cannot participate in a study or be independently identified (Stratton, 2021). Yamane's formula was used to determine the sample size as follows:

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

Where *n* is the sample size, N is the population size, *e* is the margin of error (at 5%).

$$n=\frac{5392}{1+5392(0.05^2)}$$

$n\approx373$

This was distributed for each school as shown in Table 2.

Table 2

Sample Size Distribution

School	Population				Sample		
	Boys	Girls	Tota	%	Boys	Girls	Total

				1			
Ruiru Girls ' High School	0	289	289	5.4	0	20	20
Ruiru Boys Secondary School	520	0	520	9.6	36	0	36
Spinners Boys School	277	0	277	5.1	19	0	19
Githunguri mixed school	189	271	460	8.5	13	19	32
Gitothua Mixed Secondary School	152	167	319	5.9	11	12	22
Kihunguro Mixed Secondary School	321	338	659	12.2	22	23	46
Kwihota Mixed Secondary School	556	634	1190	22.1	38	44	82
Gikumari Mixed Secondary School	145	184	329	6.1	10	13	23
Devki Mixed Secondary School	498	611	1109	20.6	34	42	77
Uhuru Kenyatta Secondary School	93	147	240	4.5	6	10	17
Total	2751	2641	5392	100.0	190	183	373

Type of Data

There are two types of data: primary data and secondary data. Secondary data refers to information previously collected and stored for future use (Taherdoost, 2021). In contrast, primary data is newly explicitly collected for the study at hand. This research utilized primary data gathered directly from the field. Primary data was preferred because it is current and accurately reflects the study participants' views at the time of collection (Kotronoulas et al., 2023). This ensured the data was relevant and aligned closely with the study's objectives. Consequently, the findings derived from this study accurately represented participant perspectives and could be effectively implemented to address the research aims.

Data Collection Methods

Data was collected using a structured questionnaire that comprised three key sections. Section A elicited the respondents' demographic details such as gender, age, level of study, type of school, and family type. Section B was the Family Assessment

Device for measuring the independent variable, namely, family structure. Developed by Epstein et al. (1983), the Family Assessment Device (FAD) is highly effective for evaluating family structures within the framework of Structural Family Theory.

Regarding family subsystems, the FAD captures how roles are allocated and executed within the family, reflecting the functioning of various subsystems (Sperry, 2024). By assessing how family members interact and perform their roles, the FAD provides valuable insights into the dynamics and coherence of family interactions, aligning well with the theory's focus on subsystem functionality (Tura, 2022). Family subsystems were measured using 12 items on a 4-point scale from Strongly Disagree=1 to Strongly Agree=4. Sample items were: ‘Family members clearly understand their roles’, ‘Family members have defined roles and responsibilities’, ‘Family members listen to each other’, ‘Family members openly discuss problems’, and ‘Family members support each other in difficult times’ (see Appendix I).

The FAD is also adept at capturing aspects of family hierarchy, such as decision-making processes and power dynamics (Xu, 2024). The Structural Family Theory posits that a clear hierarchy and effective decision-making are essential for family stability and proper functioning (Pirsaghi, 2024). The FAD's items on decision-making and power distribution offer a detailed understanding of how decisions are made and how authority is shared among family members, which are crucial for assessing the family's hierarchical structure and its impact on overall family dynamics (Foran et al., 2020). This study measured family hierarchy using 12 items on a 4-point scale from Strongly Disagree=1 to Strongly Agree=4. Sample items included: ‘Decisions are made jointly by family members’, ‘Family members agree on major decisions’, ‘Family members share power and authority’, and ‘One person in the family tends to make most decisions.

The FAD also addresses family boundaries through its measures of communication and engagement (Amente et al., 2021). The Structural Family Theory highlights the need for clear, open communication and active participation from all family members to maintain healthy boundaries and ensure effective family functioning (Pirsaghi, 2024). The FAD's focus on these elements allows for an evaluation of how well family members maintain boundaries and engage with each other, providing a comprehensive view of how these factors influence family dynamics and psychosocial well-being (Coleman, 2022). This part on family boundaries was measured using 12 items on a 4-point scale from Strongly Disagree=1 to Strongly Agree=4. Sample items included ’Family members openly express their feelings’, ‘Family members feel free to talk about their concerns’, ‘Family members are involved in each other's lives’, and ‘Family members actively participate in family activities’. In terms of scoring, negatively worded items were first reversed. Subsequently, the sum of the scores for each dimension yielded a total score.

Section C comprised the Adolescent Mental Health Continuum-Short Form (AMHC-SF) developed by Williams and Roberts (2010). This tool assesses mental health across three dimensions: emotional well-being, psychological distress, and social functioning. It contained 14 items on a scale of 1 to 5, where 1=Never, 2=Rarely, 3=Sometimes, 4=Often, and 5=Always. Sample items included: ‘I feel happy and content most of the time’, ‘I feel hopeful about the future’, ‘I have trouble sleeping because of worrying thoughts’, ‘I feel irritable or easily frustrated’, ‘I get along well with my friends’, and ‘I have friends who I can talk to about my problems’. Scores were calculated by summing the responses in each domain to provide subscale scores, and the total score reflects the overall psychosocial well-being of the

adolescent (Khazaei et al., 2023). Higher scores indicated higher levels of well-being and vice versa (Yousefi & Janjani, 2023) (see Appendix I).

Instrument Reliability

Instrument reliability concerns the consistency or stability of a measurement tool in producing the same results under consistent conditions (Ahmed & Ishtiaq, 2021). The Family Assessment Device (FAD) exhibits high reliability, ensuring consistent and stable measurements. Internal consistency is confirmed by high Cronbach's alpha coefficients for its scales (α>.80), indicating that the items within each scale reliably measure the same construct (Cong et al., 2022). Test-retest reliability is supported by the FAD's ability to provide stable results over time, assuming family dynamics remain unchanged (Cong et al., 2022). Similarly, the reliability of the Adolescent Mental Health Continuum-Short Form (AMHC-SF) is supported by its internal consistency (Cronbach's α of 0.74 to 0.89) (Kennes et al., 2020). In this study, the reliability analysis was performed using Cronbach's alpha as per the output in Table 3. The Cronbach's alpha coefficients indicated acceptable to good internal consistency across the scales. Specifically, the Family subsystems scale (10 items) had a reliability coefficient of α = .725, the Family hierarchies scale (12 items) showed α = .772, and the Family boundaries scale (12 items) demonstrated α = .829. The Psychosocial Well-being Scale (14 items) yielded a Cronbach's alpha of .677, which is considered acceptable.

Table 3

Reliability Analysis

Variable	N of Items	Cronbach Alpha
Family subsystems	10	.725
Family hierarchies	12	.772
Family boundaries	12	.829
Psychosocial well-being	14	.677

Instrument Validity

Instrument validity is the degree to which a measurement tool or instrument accurately measures what it is intended to measure (Sürücü & Maslakci, 2020). The Family Assessment Device (FAD) demonstrates strong convergent and divergent validity (Almeida et al., 2020). Based on a well-defined theoretical framework, content validity is established through its comprehensive coverage of critical dimensions, such as problem-solving, communication, roles, and affective responsiveness. Construct validity is supported by factor analysis, which confirms that the FAD's items cluster into the intended scales, accurately reflecting the constructs of family dynamics (Amente & Tefera, 2021). Additionally, criterion-related validity is evidenced by the FAD's strong correlations with other established measures of family functioning, indicating that it effectively captures the outcomes related to family dynamics (Shek et al., 2024).

The AMHC-SF has shown strong construct validity, effectively assessing various aspects of psychosocial well-being (Kennes et al., 2020). This means it accurately measures emotional, social, and psychological well-being. Its validity is reinforced by the tool's ability to differentiate between levels of mental health.

Additionally, it correlates well with other established mental health measures, supporting its accuracy (Yousefi & Janjani, 2023). The AMHC-SF also demonstrates content validity by covering essential mental health domains, aligning with theoretical views on adolescent psychosocial well-being (Faradiba et al., 2023).

Pilot Testing

Pilot testing is crucial in instructional design as it assesses the feasibility of the survey process, including data collection, analysis, recruitment strategies, and sampling (Kovach et al., 2022; Malmqvist et al., 2019). The questionnaires were tested and discussed item by item with a separate group of adolescents before adapting and validating them through an iterative process of researcher discussion and face validation (Wardropper et al., 2021). To the Family Structure and Adolescent Psychosocial Well-Being used in this study, piloting was conducted in a public mixed secondary school in Kiambu County. Thirty-eight students were targeted for this purpose, representing 10% of the sample size. The pilot study also assisted the researcher in identifying potential obstacles, estimating the time required for the actual study, and identifying ambiguous questions. The researcher also used the collected instruments to compute the Cronbach alpha score of the various constructs. A reliability score (Cronbach's alpha) of less than .7 required the researcher to adjust the instrument by deleting the items with the most contribution (Izah et al., 2023). This was done iteratively till the threshold Cronbach’s alpha of .7 was attained.

Research Procedure

The data collection process started with obtaining a research authorization letter from Pan Africa Christian University after seeking clearance from the Ethical Review Committee. The researcher applied for a research permit from the National Commission for Science, Technology, and Innovation (NACOSTI) to go to the field

to collect data. The researcher also required consent to access the high schools and research authorization from the Kiambu County Director of Education. The researcher then presented the letter to the school administration in the selected schools where the study was conducted to allow students access. Furthermore, the researcher also liaised with the school principals and other school administrators to contact the student respondents, who were introduced to the study and obtained their consent (Appendix I). The researcher collected data through questionnaires administered to the participants.

Data Analysis Plan

Data analysis is a process that translates the questionnaire data into meaningful information (Mishra et al., 2019). Data was analysed using the Statistical Package for Social Sciences (SPSS version 29). Descriptive statistical analysis techniques were used to analyse the data collected, including percentages, mean scores, and standard deviation scores. Inferences were drawn using correlation and regression techniques. Correlations are used to assess, show, and explain relationships between measured variables, while regression modelling helps estimate the explanatory power of the independent variable on the dependent variable (Saccenti et al., 2020). Chi-square test and correlation technique was applied to analyse data about the two objectives: to establish the relationship between family subsystems and psychosocial well-being and to investigate the relationship between family hierarchy and adolescents' psychosocial well-being in selected high schools in Ruiru Sub-County.

A moderated regression analysis method was applied to examine the moderating role of family boundaries in the relationship between family structure and adolescents' psychosocial well-being. In this case, an interaction term was created by

multiplying the independent variable (family structure) by the moderator (boundaries) using SPSS version 31. The following steps were then followed to complete the moderation test process.

Model 1: A simple regression model predicting psychosocial well-being based only on family structure was run using the following equation:

$Y=\beta_0+\beta 1X_1+\epsilon$

Where:

Y = Psychosocial well-being

X_1 = Family structure

β_0, β_1 = Regression coefficients

ϵ = Error term

Model 2: Family boundary (the moderator) was added to the regression model to see its direct effect on psychosocial well-being using the following equation:

$Y=\beta 0+\beta_1X_1+\beta_2M+\epsilon$

Where:

M = Boundaries

Model 3: The interaction term (family structure × boundaries) was added to the model to examine the moderating effect using the following equation.

$Y=\beta_0+\beta_1X_1+\beta_2M+\beta_3(X_1\times M)+\epsilon$

A significant interaction suggests that boundaries moderate the relationship between family structure and psychosocial well-being. Data was presented in tables to summarize key findings such as descriptive statistics, regression coefficients, and interaction effects, providing a structured and easily interpretable format. Scatter diagrams were used to visually illustrate the relationships between family structure

and psychosocial well-being, as well as how these relationships are moderated by family boundaries.

Ethical Consideration

Every researcher is required to uphold ethics throughout a research endeavour. Research ethics establish standards for carrying out qualified studies and are used to instruct and govern researchers to adhere to a set code of ethics in their work (Hasan et al., 2021). The study involved obtaining a research permit from the National Commission of Science, Technology, and Innovation (NACOSTI) (Appendix III), satisfying ethical review requirements, and receiving an ethical clearance certificate from the Institutional Scientific Ethics Review Committee (ISERC) at PAC University.

The study was conducted within schools, requiring formal permission from the county education offices (Appendix II). This process is crucial to ensure compliance with legal and administrative requirements, given that the study involved students. Permission was also obtained from the respective school principals before accessing the students. The study ensured that each participating school's administrator received and comprehended an informed consent form (Appendix VI). This allowed students to make an informed decision about their participation if they chose to participate, thus respecting their autonomy and ensuring ethical research practices. Among those details contained in the consent form given to the participants included the rights of the respondents, the right to decline from participating in the study, the right to withdraw from the study at any point and the right to skip specific uncomfortable questions. The consent letter also informed the participants of the commitments made by the researcher, including the commitment to maintain confidentiality.

The researcher stored all collected data in a secure, lockable room with access limited to the researcher and her authorized representative. Data entry was performed using an encrypted laptop to ensure that the data remains protected from unauthorized access even if the laptop is misplaced. To uphold confidentiality, the study excluded the names of schools and individual participants from reports, using pseudonyms such as "School A" and "Participant B" instead. Participants were also instructed not to make handwritten notes that could reveal their identities. Upon completion and approval of the study, all questionnaires would be securely destroyed to protect participants' privacy.

Chapter Summary

This chapter has described the research methodology that was used to investigate the moderating role of family boundaries on the relationship between family structure and adolescents' psychosocial well-being. The researcher used a correlational research design to guide the study. A detailed description of the sample size, target population, and sampling procedures has been provided in this chapter, and the ethical considerations have been highlighted. The study's findings are explained in the next chapter.

CHAPTER FOUR: RESULTS AND DISCUSSIONS

Introduction

This chapter presents, analyses and discusses the findings of the study. The chapter commences by providing a descriptive summary of the response rate and demographic profile of the respondents. The rest of the chapter is organized in line with the specific objectives of the study. These were: to establish the relationship between family subsystems and psychosocial well-being among adolescents in selected public high Schools in Ruiru Sub-County, Kiambu County, Kenya; to investigate the relationship between family hierarchy and adolescents' psychosocial well-being in public high schools in Ruiru Sub-County, Kiambu County, Kenya; and, to analyze the intervening effect of family boundaries in the relationship between family structure and adolescents' psychosocial well-being in public high schools in Ruiru Sub-County, Kiambu County, Kenya.

Response Rate and Demographic Analysis

This section comprises the analysis and discussion of the obtained response rate, gender of respondents, education level, distribution of respondents by school category, and family type.

Response Rate

Table 4 summarizes the response rate of the study participants, which depicts the share of respondents who successfully completed and submitted the questionnaire tool.

Table 4

Response Rate

Respondent Category	Frequency	Percent
Responded	329	88 %
Non-respondent	44	12%
Total	373	100.0%

Out of a total of 373 targeted respondents, 329 participated in the study which represented 88% of the sample while 44 did not respond, accounting for 12%. The obtained response rate indicates a strong level of participation and provides confidence that the data collected are highly representative of the target population. This high response rate is consistent with a study by Macharia (2024), which reported a response rate of 87.1% in research that investigated the influence of dysfunctional families on academic performance among students in public day secondary schools in Juja Sub-County, Kiambu County, Kenya.

Gender of Respondents

Table 5 shows the distribution of respondents by gender.

Table 5

Distribution of Respondents by Gender

Gender category	Frequency	Percent
Male	163	49.5%
Female	166	50.5%
Total	329	100.0%

The findings indicate that male respondents constituted 163 (49.5%) of the sample, while female respondents were 166 (50.5%). This nearly equal gender

distribution suggests a balanced representation of both male and female participants in the study. The finding compares favourably with the research by Boned-Gómez et al. (2025), which also reported a balanced gender representation at 48.33% males and 51.67% females. Such proportional representation enhances the credibility of the study by minimizing gender-related sampling bias.

Education of Respondents

Table 6 presents the distribution of respondents by level of education.

Table 6

Distribution of Respondents by Level of Education

Level of education	Frequency	Percent
Form 2	141	42.8%
Form 3	188	57.2%
Total	329	100.0%

The results show that 42.8% of the respondents were in Form 2, while 57.2% were in Form 3. This indicates that both levels of education were adequately represented in the study, thereby providing a balanced representation of the target population.

Respondents' School Category

Table 7 illustrates the distribution of respondents by school category.

Table 7

Distribution of Respondents by School

School Category	Frequency	Percent
Mixed school	218	66.3%

Boys only	68	20.7%
Girls only	43	13.1%
Total	329	100.0%

The findings reveal that the majority of respondents (66.3%), attended mixed schools, while 20.7% were from boys-only schools and 13.1% were from girls-only schools. This distribution indicates that most respondents were drawn from mixed-school environments, providing a broader perspective across gender-diverse settings.

Relationship Between Family Subsystems and Psychosocial Well-Being

The first objective of the study was to establish the relationship between family subsystems and psychosocial well-being among adolescents in selected public high Schools in Ruiru Sub-County, Kiambu County, Kenya. This section presents both descriptive statistics and inferential analysis of the data.

Descriptive Statistics of Family Structure

This sub-section provides and interprets the descriptive results of family structures, namely: family-subsystems and family hierarchies.

Respondents' Family Subsystems. Table 8 presents the distribution of respondents by family subsystems.

Table 8

Distribution of Respondents by Family Subsystems

Which of the following family types bests describe your family	Frequency	Percent
Two-parent family	173	52.6%
Single-parent family	112	33.9%

Step-parent family	10	3.1%
Extended family	34	10.4%
Total	329	100.0%

The results indicate that a majority of the respondents (52.6%) came from two-parent families. This was followed by 33.9% from single-parent families, which may consist of either a mother or a father as the sole caregiver, 10.4% respondents from extended families, and 3.1% respondents from step-parent families. These findings suggested that over half of the participants were raised in two-parent family structures, with a notable proportion also coming from single-parent households. This finding compares well with the study by Macharia (2024) which also found that majority (68%) of the students were from two-parent family while 32% were from separated/divorced parents. The results suggest that while the traditional two-parent family still represents the majority of family subsystems, a significant proportion of adolescents are being raised in single-parent families. This finding supports Petersen and Lesch's (2022) observation of the rising trend in single-parent families and affirms Kwan's (2021) argument that family structures are becoming less nuclear, with extended family types emerging.

Mean and Standard Deviation Scores of Family Roles. Table 9 displays the mean and standard deviation scores of items measuring family roles.

Table 9

Mean and Standard Deviation Scores of Family Roles Items

Family roles items	Mean	Std. Deviation
Family members know what is expected of them	3.09	.710

Family members clearly understand their roles	2.92	.756
Family members have defined roles and responsibility	2.88	.922
Roles are flexible and change as needed	2.73	.855
Family roles clarity aggregate score	2.91	.811

The results show that respondents generally agreed that family members know what is expected of them (M = 3.09, SD = 0.710) and clearly understand their roles (M = 2.92, SD = 0.756). The item family members have defined roles and responsibility recorded a mean of 2.88 (SD = 0.922), while roles are flexible and change as needed had a slightly lower mean of 2.73 (SD = 0.855). The overall aggregate score for family role clarity was M = 2.91 (SD = 0.811), suggesting a moderately high level of agreement among respondents regarding the clarity and flexibility of family roles. This finding aligns with Cowan and Cowan (2020), who noted that defined roles and responsibilities provide a sense of security and clear expectations within the family system. Similarly, the moderately high flexibility observed supports Rejaän et al. (2024) assertion that balancing authority with adaptability fosters adolescent autonomy and identity development. However, the slightly lower mean on role flexibility (M = 2.73) suggests a tendency toward structured hierarchies, which, if overly rigid, could risk the psychosocial challenges identified by Tabrizi et al. (2024). Theoretically, these findings reinforce the Family Systems Theory by illustrating that balance between role clarity and adaptability potentially sustains healthy family functioning and adolescent well-being.

Distribution of Respondents by Family Role Clarity. Table 10 presents the distribution of respondents by clarity of family roles on aggregate.

Table 10

Distribution of Respondents by Clarity of Family Roles

Clarity of family roles	Frequency	Percent
Low	11	3.3%
High	318	96.7%
Total	329	100.0%

The findings in Table 10 show that the majority of respondents reported high clarity of family roles (96.7%), while only a small proportion indicated low clarity (3.3%). This suggests that most participants perceived well-defined roles within their families, which may contribute to stable family functioning and clear expectations among family members. The high proportion of respondents reporting clarity of family roles supports the view of Eddy et al. (2021) and McDowell et al. (2022) that organized interaction patterns and clear expectations promote family stability and effective functioning.

Mean and Standard Deviation Scores of Family Interactions. Table 11 presents the mean and standard deviation scores for family interaction items.

Table 11

Mean and Standard Deviation Scores of Family Interaction Items

Family interaction items	Mean	Std. Deviation
Family members support each other in difficult times	3.02	.847
Family members can express their needs and concerns	3.01	.850
Family members listen to each other	2.95	.878
Family integrations are positive and constructive	2.87	.865
Family members feel heard and understand	2.71	.942

Family members openly discuss problems	2.69	.963
Family interaction aggregate score	2.88	.890

The results indicate that respondents generally agreed that ‘family members support each other in difficult times’ (M = 3.02, SD = 0.847) and ‘can express their needs and concerns’ (M = 3.01, SD = 0.850). Slightly lower means were observed for ‘family members listen to each other’ (M = 2.95, SD = 0.878) and ‘family interactions are positive and constructive’ (M = 2.87, SD = 0.865). The items ‘family members feel heard and understood’ (M = 2.71, SD = 0.942) and ‘family members openly discuss problems’ (M = 2.69, SD = 0.963) received comparatively lower scores. The aggregate score for family interaction was M = 2.88 (SD = 0.890), indicating a moderate level of perceived positive interaction among family members. The statistics align with Eddy et al. (2021) and McDowell et al. (2022), who emphasized that organized patterns of interaction and open communication are essential for family stability. The respondents’ agreement that family members support one another and express their needs corresponds with Coe et al. (2024), who noted that effective families balance closeness and independence. The implication of these results is that while elements of family cohesion are present, limitations in open dialogue and mutual understanding may constrain achievement of optimal communication patterns necessary for relational stability.

Distribution of Respondents by Level of Family Interaction. Table 12 presents the distribution of respondents by level of family interaction.

Table 12

Distribution of Respondents by Level of Family Interaction

Level of family interaction	Frequency	Percent
Low	22	6.7%
High	307	93.3%
Total	329	100.0%

The results revealed that the majority of respondents reported a high level of family interaction (93.3%), while a smaller proportion indicated a low level (6.7%). This suggests that most participants experienced frequent and positive interactions within their families, reflecting strong relational ties and effective communication patterns at home. The findings support the Structural Family Theory, illustrating that balanced and supportive interactions within clearly defined family structures enhance cohesion and adolescent psychosocial adjustment (Jiang et al., 2025; Persram et al., 2025).

Descriptive Statistics of Psychosocial Well-Being

This part of the analysis focuses on the descriptive statistics of adolescent psychosocial well-being dimensions as reflected in emotional well-being, social functioning, and level of psychological distress.

Mean and Standard Deviation of Emotional Well-Being Items. Table 13 shows the mean and standard deviation scores for items measuring emotional well-being.

Table 13

Mean and Standard Deviation of Emotional Well-Being Items

Emotional well-being items	Mean	Std. Deviation

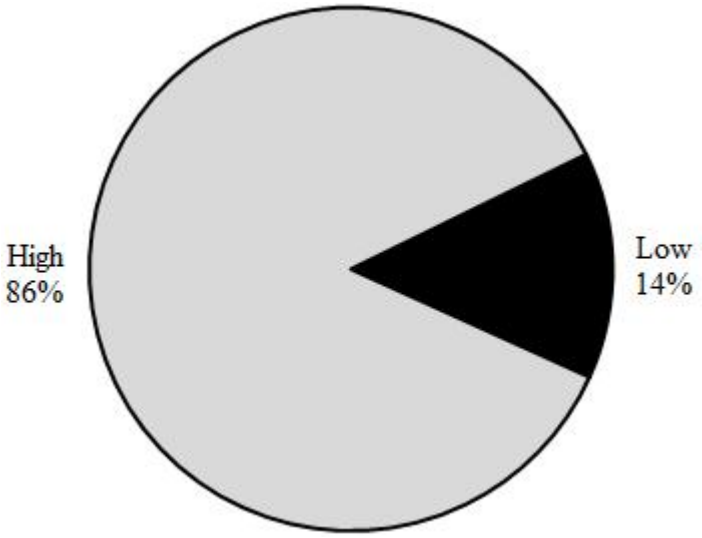
I feel good about myself	4.30	1.119
I feel hopeful about the future	4.28	1.208
I have a positive outlook on life	4.18	1.143
I feel happy and content most of the time	3.46	1.121
I feel that I can handle stress well	3.10	1.302
Emotional well-being aggregate score	3.86	1.179

The findings reveal that respondents generally expressed high levels of emotional well-being, with the highest mean reported for the statement 'I feel good about myself' (M = 4.30, SD = 1.119), followed closely by 'I feel hopeful about the future' (M = 4.28, SD = 1.208) and 'I have a positive outlook on life' (M = 4.18, SD = 1.143). Moderate agreement was noted for the statement 'I feel happy and content most of the timé' (M = 3.46, SD = 1.121) and 'I feel that I can handle stress well' (M = 3.10, SD = 1.302). The overall aggregate score for emotional well-being was M = 3.86 (SD = 1.179), suggesting that respondents generally reported positive emotional well-being. The generally high levels of emotional well-being among respondents, reflected in positive self-perception and optimism, align with Shihundu's (2019) observation that quality family care enhances emotional stability among adolescents. Similarly, the respondents' hopefulness and positive outlook resonate with Mancinelli et al. (2021) and Zhan et al. (2019), who found that supportive relationships and effective coping strategies contribute significantly to mental and emotional health.

Distribution of Respondents by Level of Emotional Well-Being. Figure 2 presents the distribution of respondents by level of emotional well-being.

Figure 2

Respondents' Overall Level of Emotional Well-Being



The findings show that a large majority of respondents reported high emotional well-being (86%), while a smaller proportion indicated low emotional well-being (14%). This suggests that most participants experienced positive emotional states, which is consistent with the research finding by Macharia (2024) which established that most respondents were emotionally stable.

Mean and Standard Deviation of Psychological Distress Items. Table 14 presents the mean and standard deviation scores for items measuring psychological distress.

Table 14

Mean and Standard Deviation of Psychological Distress Items

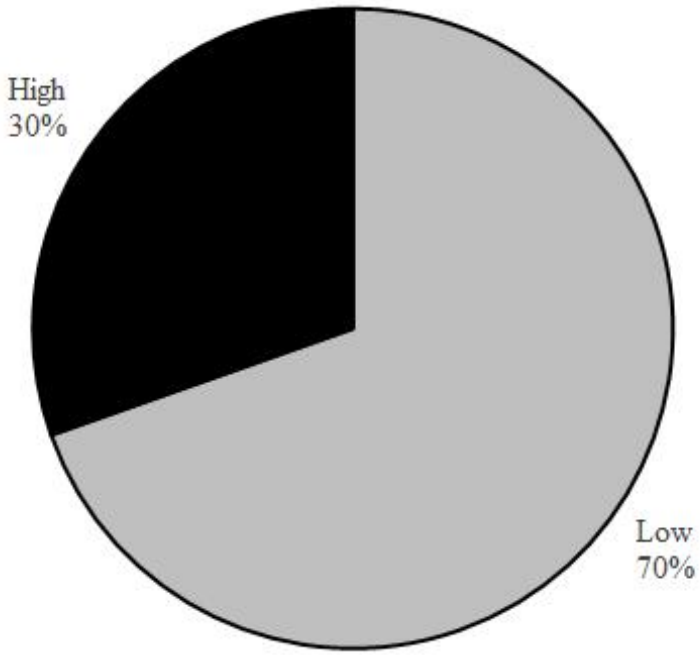
Psychological distress items	Mean	Std. Deviation
I feel overwhelmed by daily responsibility	2.90	1.348
I feel irritable or easily frustrated	2.84	1.365
I feel anxious or worried frequently	2.67	1.236
I feel sad or depressed often	2.67	1.128
I have trouble sleeping because of worrying thoughts	2.23	1.358
Psychological distress aggregate score	2.66	1.287

The analysis shows that respondents generally reported moderately low levels of psychological distress. They indicated feeling somewhat overwhelmed by daily responsibilities (M = 2.90, SD = 1.348) and reported occasional irritability or frustration (M = 2.84, SD = 1.365). Feelings of anxiety, worry, sadness, or depression were also described as moderately low (M = 2.67, SD = 1.236; M = 2.67, SD = 1.128, respectively). Respondents further reported experiencing minimal sleep difficulties due to worrying thoughts (M = 2.23, SD = 1.358). The overall aggregate score (M = 2.66, SD = 1.287) confirmed that levels of psychological distress among the participants were generally low to moderate. The results align with Herke et al. (2020), who emphasized that emotional and practical family support enhances resilience and reduces mental strain. These findings suggest that supportive family environments may function as protective factors within stress and coping frameworks, mitigating the intensity of psychological distress among adolescents.

Distribution of Respondents by Level of Psychological Distress. Figure 3 presents the distribution of respondents by level of psychological distress.

Figure 3

Respondents' Overall Level of Psychological Distress



The results indicate that most respondents reported low levels of psychological distress (70%), while a smaller proportion experienced high levels of distress (30%). This suggests that the majority of participants were generally able to manage stress and emotional challenges effectively, though a notable minority still faced considerable psychological strain. The low reports of overall psychological distress align with Lin et al. (2019) who suggest that family structures are responsible for psychological health of adolescents.

Mean and Standard Deviation of Social Functioning Items. Table 15 presents the mean and standard deviation of psychological functioning items.

Table 15

Mean and Standard Deviation of Social Functioning Items

Social functioning items	Mean	Std. Deviation
I feel supported by my family	4.17	1.205
I get along well with my friends	3.71	1.292

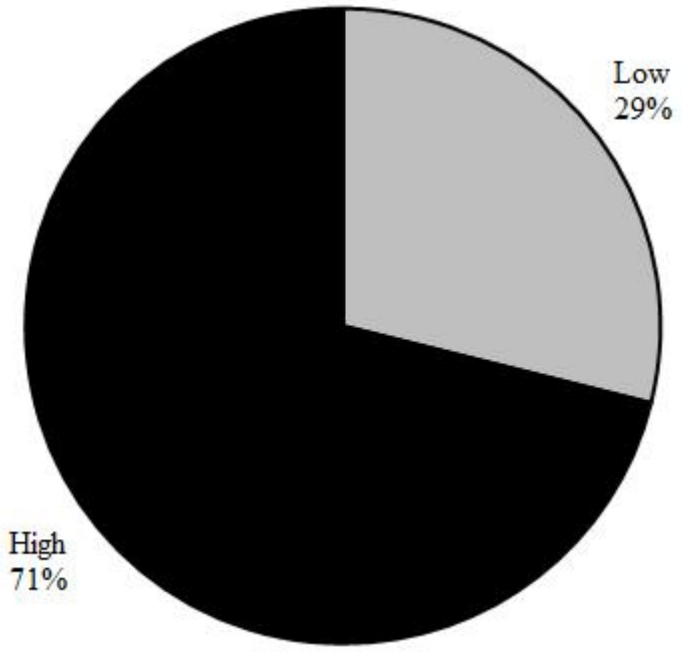
I feel I belonging at school	3.66	1.522
I have friends who can talk to about my problems	3.02	1.637
Social functioning aggregate score	3.64	1.414

The results indicate that respondents generally reported moderate to high levels of psychological functioning. They felt most supported by their families (M = 4.17, SD = 1.205), followed by positive relationships with friends (M = 3.71, SD = 1.292) and a sense of belonging at school (M = 3.66, SD = 1.522). However, the lowest mean score was observed for having friends to talk to about personal problems (M = 3.02, SD = 1.637), suggesting relatively lower emotional support from peers. The aggregate social functioning score (M = 3.64, SD = 1.414) reflected moderately high levels of well-being among the participants. The results are in accord with Herke et al. (2020) who posit that social integration and various forms of support for one another, such as emotional, practical, or informational help, all contribute to resilience and are crucial family functions.

Distribution of Respondents by Overall Social Functioning. Figure 4 presents the distribution of respondents by level of social functioning.

Figure 4

Respondents' Overall Level of Social Functioning



The results reveal that a majority of respondents reported high levels of social functioning (71%), while a smaller proportion indicated low levels (29%). This suggests that most participants maintained positive social relationships and effective interpersonal interactions, reflecting generally healthy social adjustment and engagement within their communities. This finding affirms Koch et al. (2021) who noted high levels of social functioning among adolescents in contexts characterised by stable family systems.

Family Subsystems and Adolescent Psychosocial Well-Being Cross-tabulation

Table 16 presents a cross-tabulation of family subsystems and adolescent psychosocial well-being.

Table 16

Family Subsystems and Adolescent Psychosocial Well-Being Cross-tabulation

	Family Subsystems				
	Two-parent family	Single-parent family	Step-parent family	Extended family	Total

Adolescent Overall Psychosocial Well-being	Low	Count	25	20	3	12	60
		% count	14.5%	18.0%	30.0%	35.3%	18.3%
	High	Count	149	91	7	22	269
		% count	85.5%	82.0%	70.0%	64.7%	81.7%
Total		Count	174	111	10	34	329
		% count	100.0%	100.0%	100.0%	100.0%	100.0%

The results show that adolescents from two-parent families had the highest proportion of high psychosocial well-being (85.5%), followed by those from single-parent families (82.0%). In contrast, lower levels of psychosocial well-being were more common among adolescents from step-parent (30.0%) and extended families (35.3%). The findings suggest that adolescents from two-parent and single-parent families generally reported better psychosocial outcomes compared to those from step-parent or extended family settings.

The high levels of psychosocial well-being reported among adolescents from two-parent and single-parent families align with Ding et al. (2022), Ji et al. (2023), and Ronaghan et al. (2024), who observed that co-parenting and two-parent family structures foster adolescent identity development and emotional stability. Conversely, the lower psychosocial well-being among adolescents from step-parent and extended families supports Debowska et al. (2021) and Mohapanele et al. (2023), who found that stepfamily contexts often expose children to conflict, neglect, or emotional instability, thereby compromising well-being. Although Jensen and Sanner (2021) acknowledged that positive stepparent-child relationships can mitigate these effects, such outcomes were not evident in the present study.

Relationship between Family Structure and Adolescent Psychosocial Well-Being

Chi-square test was performed to test the relationship between family subsystems and psychosocial well-being among adolescents in public high Schools in Ruiru Sub-County, Kiambu County, Kenya. Table 17 shows the output.

Table 17

Chi-Square Tests of Family Structure and Adolescent Psychosocial Well-Being

	Value	df	Asymptotic Significance (2-sided)
Pearson Chi-Square	9.101[a]	3	.028
Likelihood Ratio	8.039	3	.045
Linear-by-Linear Association	8.472	1	.004
N of Valid Cases	327		

a. 1 cells (12.5%) have expected count less than 5. The minimum expected count is 1.83.

The findings indicate a statistically significant association between the two variables, $\chi^2(3, N = 327) = 9.10$, $p = .028$. This suggests that adolescents' psychosocial well-being varied significantly across different family structures. The significant linear-by-linear association ($p = .004$) further implies a consistent trend in the relationship, where certain family subsystems were more strongly associated with higher levels of psychosocial well-being than others. The finding ligns with Babajide et al. (2020) and Simcock et al. (2020), who noted that family stability and supportive relationships enhance well-being, while disruptions increase vulnerability to emotional challenges. Similarly, the observed linear trend supports Bi and Wang (2021) and Tong et al. (2023), who found that adolescents from cohesive and stable family systems tend to exhibit higher psychosocial adjustment.

Relationship between Family Hierarchy and Adolescents' Psychosocial Well-Being

The second objective of the study was to investigate the relationship between family hierarchy and adolescents' psychosocial well-being in public high schools in

Ruiru Sub-County, Kiambu County, Kenya. This section presents descriptive analysis of family hierarchy, followed by inferential analysis to test the relationship.

Descriptive Analysis of Family Hierarchy

This sub-section of the chapter focuses on the mean and standard deviation scores of decision-making process and communication dimensions of family hierarchy.

Mean and Standard Deviation Scores of Decision-making Items. Table 18 presents the mean and standard deviation scores for decision-making items within families.

Table 18

Mean and Standard Deviation Scores for Decision Making Items

Decision making items	Mean	Std. Deviation
Important decisions are discussed openly	2.82	.940
Family members agree on major decisions	2.80	.850
Decision making processes are fair and equitable	2.76	.901
Decisions are made jointly by family members	2.65	.933
Family members feel included in decision making	2.64	.952
Family decisions are made with everyone's input	2.45	.982
-Shared decision-making aggregate score	2.69	.926

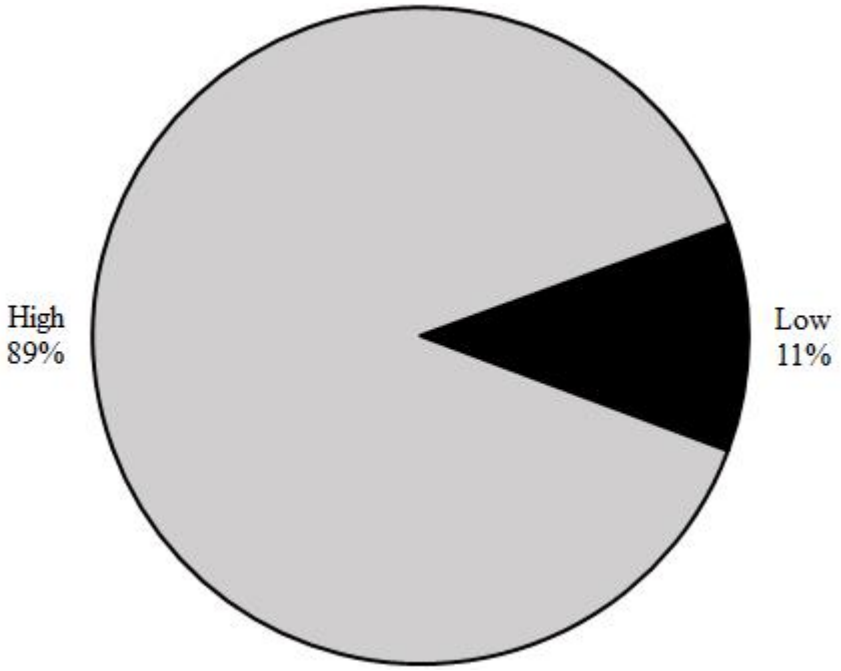
The results indicated moderate levels of shared decision-making among respondents. The highest mean score was recorded for open discussion of important decisions (M = 2.82, SD = 0.940), followed closely by agreement on major decisions (M = 2.80, SD = 0.850) and fairness in decision-making processes (M = 2.76, SD = 0.901). The lowest mean score was observed for making family decisions with everyone’s input (M = 2.45, SD = 0.982), suggesting limited inclusivity in some cases.

The aggregate score (M = 2.69, SD = 0.926) reflected a moderate level of participation and collaboration in family decision-making. The findings align with Jones and Smith (2023), who noted that involving diverse perspectives fosters fairness and balanced outcomes.

Distribution of Respondents by Family Decision Making. The distribution of respondents by their observed level of family sharing of decision making is shown in Figure 5.

Figure 5

Level of Family Decision Making Sharing



The findings presented in Figure 5 indicate that the majority of participants (89%) reported a high level of shared decision making, while only a small proportion (11%) reported a low level. This suggests that collaborative participation in decision processes is generally well established among the respondents. The findings agree with Gachaki (2020 and Ochieng (2020), who observed that traditional family

structures often engage multiple members in collective decision-making to enhance responsibility and stability.

Mean and Standard Deviation Scores of Power Dynamics Items. Table 19 presents the mean and standard deviation scores for power dynamics items measured on a 4-point scale.

Table 19

Mean and Standard Deviation Scores of Power Dynamics Items

Power dynamics items	Mean	Std. Deviation
Authority is clear and accepted by all members	2.83	.902
Power imbalances are addressed and managed	2.66	.923
Power is distributed among family members	2.55	.991
Family members have equal say in family matters	2.49	1.046
Family members share power and authority	2.35	1.053
One person in the family tends to make most decisions	2.31	.995
Power sharing dynamics aggregate score	2.53	.985

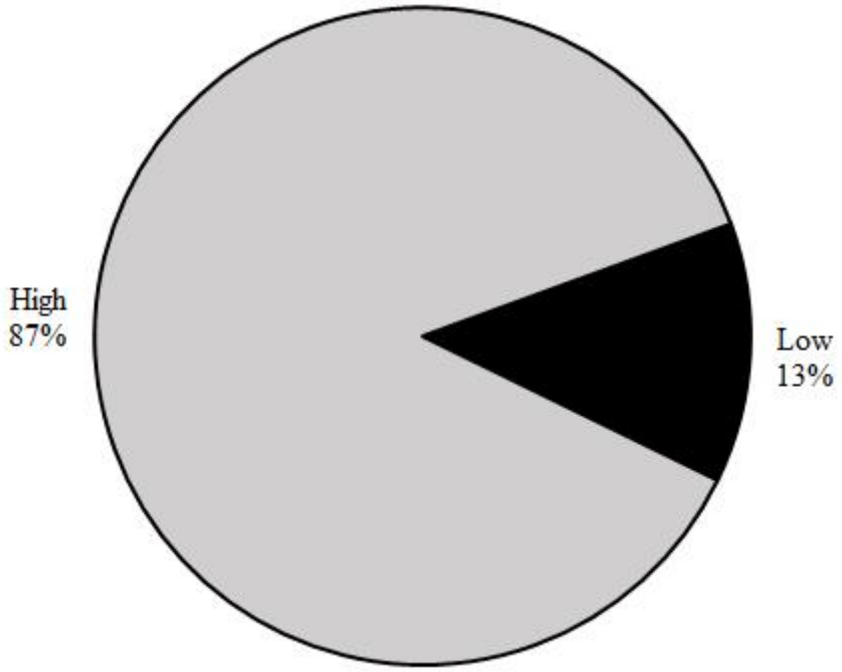
The findings indicate that respondents generally perceived moderate levels of power sharing within their families. The highest mean score was recorded for clarity and acceptance of authority among family members (M = 2.83, SD = 0.902), while the lowest mean was observed for the tendency of one person to make most family decisions (M = 2.31, SD = 0.995). Items such as equal say in family matters (M = 2.49, SD = 1.046) and shared power and authority (M = 2.35, SD = 1.053) received relatively lower ratings, suggesting that decision-making power was not evenly distributed in all cases. The aggregate score (M = 2.53, SD = 0.985) reflected a moderate perception of balance and fairness in family power dynamics. The research

results align with Gachaki (2020) and Ochieng (2020), who noted that traditional families distribute authority among relatives to promote stability and collective responsibility. However, the relatively low scores on shared power and equal say reflect the hierarchical tendencies described by Causadias (2020) and Hailu et al. (2025) where adults retain significant decision-making control.

Level of Power Sharing Dynamics. The distribution of respondents by observed level of family power sharing is shown in Figure 6.

Figure 6

Level of Family Power Sharing Dynamics



The results displayed in Figure 6 reveal that most participants (87%) experienced high levels of shared power dynamics, indicating that authority, influence, and decision-making responsibilities are widely distributed among members of the household. The relatively smaller percentage (13%) of respondents who reported low shared power dynamics may reflect areas where hierarchical tendencies or unequal

participation still persist. The finding agrees with Smith and Johnson (2022), who observed that modern families increasingly value input and autonomy.

Correlation between Family Hierarchy and Adolescent Psychosocial Well-Being. Table 20 presents the Spearman's rank-order correlations between family hierarchy dimensions and adolescent psychosocial well-being.

Table 20

Correlation between Family Hierarchy Dimensions and Adolescent Psychosocial Well-Being

Spearman's rho		1	2	3
1. Adolescent psychosocial well-being	Correlation Coefficient	1.000		
	Sig. (2-tailed)	.		
	N	329		
2. Family role clarity	Correlation Coefficient	.186**	1.000	
	Sig. (2-tailed)	.001	.	
	N	329	329	
3. Family interactions	Correlation Coefficient	.259**	.401**	1.000
	Sig. (2-tailed)	.000	.000	.
	N	329	329	329

**. Correlation is significant at the 0.01 level (2-tailed).

The results reveal a significant positive correlation between adolescent psychosocial well-being and family role clarity ($\rho = .186$, $p = .001$), as well as between psychosocial well-being and family interactions ($\rho = .259$, $p < .001$). Additionally, family role clarity was strongly correlated with family interactions ($\rho = .401$, $p < .001$). These findings suggest that higher clarity of family roles and stronger family interactions are associated with greater psychosocial well-being among adolescents, highlighting the importance of structured and supportive family

relationships. The positive correlations between psychosocial well-being and both family role and family interactions are consistent with Buehler (2020) and Hu et al. (2024), who noted that harmonious and well-structured family subsystems establish clear responsibilities and communication patterns that nurture healthy child development. Similarly, the strong correlation between family role clarity and family interactions supports Cantor et al. (2021) and Petegem et al. (2022), who found that stable and cohesive family dynamics create an environment of security and positive role modelling for adolescents.

Regression between Family Hierarchy and Adolescent Psychosocial Well-Being

Table 21 presents the regression analysis results examining the influence of family hierarchies specifically family role clarity and family interactions on adolescent psychosocial well-being.

Table 21

Regression of Adolescent Psychosocial Well-Being on Family Hierarches

Model Summary

Model	R	R Square	Adjusted R Square	Std. Error of the Estimate
1	.233[a]	.054	.048	.475

a. Predictors: (Constant), Family Interactions, Family Roles

ANOVA[a]

Model		Sum of Squares	df	Mean Square	F	Sig.
1	Regression	4.168	2	2.084	9.251	.000[b]
	Residual	72.767	325	.225		
	Total	76.935	327			

a. Dependent Variable: Adolescent Psychosocial Well-Being

b. Predictors: (Constant), Family Interactions, Family Roles

Coefficients[a]

		Unstandardized Coefficients		Standardized Coefficients		
Model		B	Std. Error	Beta	T	Sig.

1	(Constant)	2.720	.171		15.951	.000
	Family Roles	.069	.058	.072	1.190	.235
	Family Interactions	.164	.052	.192	3.176	.002

a. Dependent Variable: Adolescent Psychosocial Well-Being

The model was statistically significant (Table 21), F (2, 323) = 9.25, $p < .001$, explaining 5.4% of the variance in adolescent psychosocial well-being ($R^2 = .054$). Among the predictors, family interactions emerged as a significant positive predictor ($\beta = .192$, $p = .002$), indicating that higher levels of family interaction were associated with better psychosocial well-being among adolescents. In contrast, family role clarity did not have a significant effect ($\beta = .072$, $p = .235$). The findings suggest that the quality of family interactions plays a more influential role in promoting adolescent psychosocial well-being than role clarity alone. This finding is in agreement with the observation by Kwan (2021), that family bonds and positive interactions between parents or caregivers enhance supportive family environments that contribute to adolescents' psychosocial well-being.

Effect of Family Boundaries in the Relationship between Family Structures and Adolescents' Psychosocial Well-Being

The third objective of the study was to analyze the intervening effect of family boundaries in the relationship between family structure and adolescents' psychosocial well-being in public high schools in Ruiru Sub-County, Kiambu County, Kenya. Descriptive analysis of family boundaries is first presented, followed by inferential analysis to test the statistical significance of the association between the study variables.

Descriptive Analysis of Family Boundaries

This sub-section of the analysis presents and interprets the mean and standard deviation scores of family communication and engagement as reflections of family boundaries.

Mean and Standard Deviation of Family Communication. Table 22 presents the mean and standard deviation scores for items assessing family communication.

Table 22

Mean and Standard Deviation of Family Communication Items

Family communication items	Mean	Std. Deviation
Family members communicate in a respectful manner	3.00	.905
Family members are comfortable sharing their thoughts	2.76	.949
Communication problems are addressed promptly	2.69	.936
Family members feel free to talk about their concerns	2.68	.982
Communication within the family is open and honest	2.56	1.025
Family members openly express their feelings	2.54	1.071
Family communication quality aggregate	2.71	.978

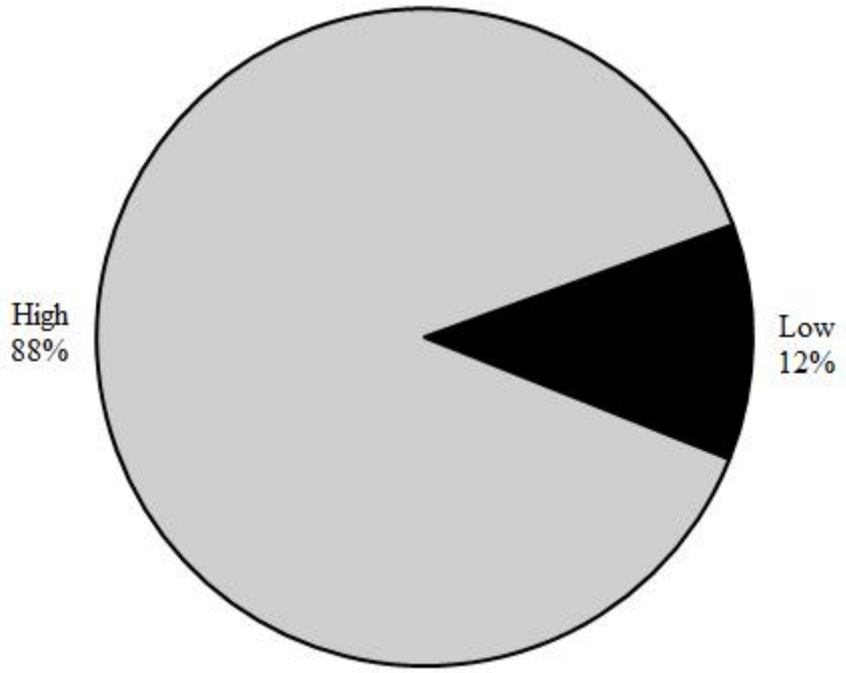
The results indicate that respondents generally reported moderate levels of positive communication within their families. The highest mean score (M = 3.00, SD = 0.905) was recorded for the item on respectful communication among family members, suggesting that courtesy and mutual regard are relatively well-practiced. On the other hand, the lowest mean (M = 2.54, SD = 1.071) was observed for the item on open expression of feelings, implying that emotional openness may be less consistently maintained within families. The aggregate mean score of 2.71 (SD =

0.978) reflects an overall moderate level of communication quality, indicating that while families tend to interact respectfully, there remains room for improvement in openness, honesty, and the timely addressing of communication challenges. The results align with Frosch et al. (2021) and Murphy et al. (2021), who observed that while many families maintain politeness and mutual respect, they often struggle with emotional transparency. This limited openness reflects characteristics of restricted communication described by Huang et al. (2023) and Zapf et al. (2023), where emotional withholding can hinder trust and psychological closeness.

Quality of Family Communication. Figure 7 presents the distribution of participants according to their reported levels of communication quality

Figure 7

Quality of Family Communication



The results indicate that majority of the respondents (88%) experienced high communication quality within their families, while only a small proportion (12%) reported low communication quality. The high proportion of respondents reporting

strong communication quality supports Shek and Dou's (2020) observation that communication quality is central to adolescent psychosocial functioning. The findings reinforce the Family Systems Theory, which posits that positive communication patterns within family systems are necessary conditions for the healthy psychosocial functioning of all members (Zhang et al., 2024).

Mean and Standard Deviation of Family Engagement Items

Table 23 presents the mean and standard deviation of items assessing family engagement.

Table 23

Mean and Standard Deviation Scores of Family Engagement Items

Family engagement items	Mean	Std. Deviation
Family involvement is encouraged and supported	2.91	.848
Family members actively participate in family activities	2.85	.908
Family members show interest in each other's lives	2.82	.959
Family activities are enjoyed by all members	2.74	.960
Family members are involved in each other's lives	2.73	.985
Family members make time for each other	2.72	1.005
Family engagement aggregate score	2.80	.944

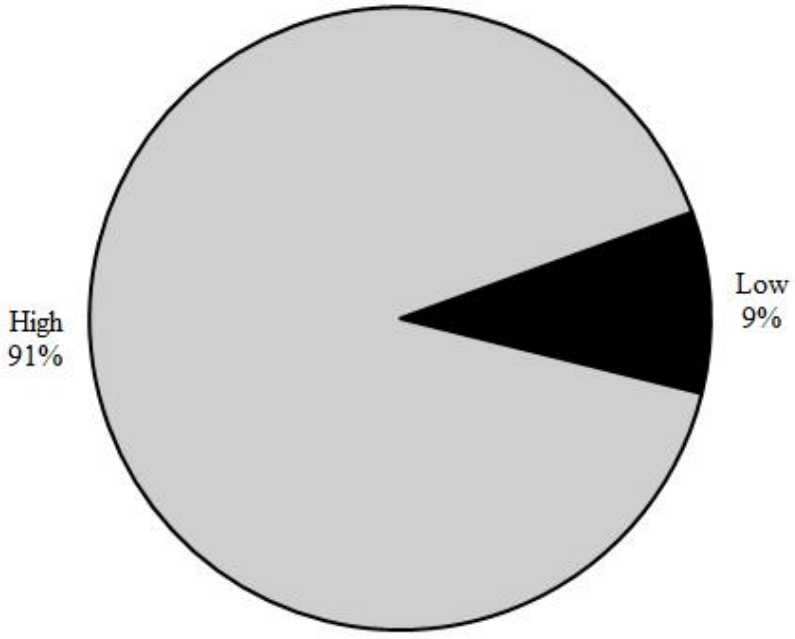
The results show that the mean scores ranged from 2.72 to 2.91, indicating a generally moderate level of family engagement among respondents. The highest mean score (M = 2.91, SD = 0.848) was recorded for the item reflecting encouragement and support for family involvement, suggesting that families value and promote participation in shared activities. Conversely, the lowest mean (M = 2.72, SD = 1.005)

was observed for making time for one another, indicating that time constraints or competing commitments may limit consistent engagement. The aggregate mean of 2.80 (SD = 0.944) suggests that, overall, families demonstrate a fair degree of involvement, shared interest, and participation in each other's lives. The research results support the assertions of Anyakoha et al. (2023) and Waid and Kelly (2020), that active parental involvement fosters open communication, emotional support, and positive developmental outcomes. However, the comparatively lower score for making time for one another echoes the challenges noted by Anyakoha et al. (2023) and Olusanya and Jagede (2022), who highlighted how busy schedules and communication barriers can limit consistent engagement.

Level of Family Engagement. Figure 8 presents the distribution of participants across levels of family engagement.

Figure 8

Level of Family Engagement



The results indicate that a majority (90.6%) of respondents reported high levels of engagement within their families, while only a small proportion (9.4%)

reported low engagement. This finding affirms the notion advanced by Park and Lee (2020), that family engagement is the mechanism for family interaction.

Regression Analysis between Family Boundaries, Family Structure, and Adolescents' Psychosocial Well-Being

Regression analysis was performed to test the effect of family boundaries in the relationship between family structure and adolescents' psychosocial well-being in selected public high schools in Ruiru Sub-County, Kiambu County, Kenya. Table 24 presents the output.

Table 24

Regression of Family Boundaries, Family Structure, and Adolescents' Psychosocial Well-Being

Model Summary

Model	R	R Square	Adjusted R Square	Std. Error of the Estimate
1	.222[a]	.049	.040	.487

a. Predictors: (Constant), Interaction Term, Family Structure, Family Boundaries

ANOVA[a]

Model		Sum of Squares	df	Mean Square	F	Sig.
1	Regression	3.946	3	1.315	5.554	.001[b]
	Residual	76.263	324	.237		
	Total	80.209	327			

a. Dependent Variable: Adolescent Psychosocial Well-being
b. Predictors: (Constant), Interaction Term, Family Hierarchy, Family Boundaries

Coefficients[a]

		Unstandardized Coefficients		Standardized Coefficients		
Model		B	Std. Error	Beta	T	Sig.
1	(Constant)	2.751	.536		5.130	.000
	Family Structure	.092	.206	.095	.448	.655
	Family Boundaries	.155	.205	.178	.759	.449
	Interaction Term	-.005	.073	-.026	-.069	.945

a. Dependent Variable: Adolescent Psychosocial Well-being

The regression model indicates that approximately 4.9% of the variance in adolescents' psychosocial well-being was explained by the combined influence of family structure, family boundaries, and their interaction. This means that 95.1% of the variance remained unexplained. The ANOVA results ($F(3, 322) = 5.554$, $p = .001$) show that the overall model was statistically significant, suggesting that these variables jointly contributed to variations in psychosocial well-being. However, the coefficient analysis revealed that none of the individual predictors were statistically significant. Family structure ($\beta = 0.095$, $p = .655$), family boundaries ($\beta = 0.178$, $p = .449$), and the interaction term ($\beta = –0.026$, $p = .945$) all showed non-significant effects. This indicates that family boundaries did not have a moderating influence on the relationship between family structure and adolescents' psychosocial well-being. These findings imply that the explanatory power of Structural Family Therapy may be context-dependent, indicating the need to integrate broader ecological or contextual factors when accounting for adolescents' psychosocial well-being.

The finding disagrees with Grey et al. (2022) and Skinner et al. (2022), who emphasized that family boundaries play a significant role in determining adolescents' psychosocial well-being. That the interaction between family boundaries and family structures did not significantly predict adolescents' psychosocial well-being partially disagrees with the principles of Structural Family Therapy (SFT), which according to the theory's proponents (Eddy et al., 2021; Jiménez et al., 2019), emphasize the importance of clearly defined family boundaries. While SFT posits that blurred boundaries can negatively impact adolescents' emotional regulation and identity formation, the results of the present study suggests that in this context, these factors may not exert a strong or direct influence.

Chapter Summary

This chapter has presented the results and findings of the study. This comprised both descriptive and inferential analysis. Descriptive statistics such as percentage frequencies, mean and standard deviation scores have been used to summarize and establish trends and patterns while chi-square tests, correlation, and regression analyses tested the statistical significance of the relationship between the study variables. The key findings of the study are summarized in the next chapter, where the theoretical and practical implications of the study are discussed.

CHAPTER 5: SUMMARY OF FINDINGS, RECOMMENDATIONS, AREAS FOR FURTHER RESEARCH, AND CONCLUSIONS

Introduction

The aim of this study was to investigate the moderating role of family boundaries on the relationship between family structure and psychosocial well-being among adolescents in selected public high schools in Ruiru Sub-County, Kiambu County, Kenya. This chapter begins by summarizing the key findings of the study in line with the specific objectives. This is followed by a discussion of the theoretical implications. Conclusions are then drawn in line with the discussions, and relevant recommendations proposed.

Summary of Findings

The first objective was to establish the relationship between family subsystems and psychosocial well-being among adolescents in public high schools in Ruiru Sub-County, Kiambu County, Kenya. The findings showed that the majority of respondents reported high clarity of family roles (96.7%) and high level of family interaction (93.3%). Further, the findings showed that a large majority of respondents reported high emotional well-being (86%), most respondents reported low levels of psychological distress (70%) and high levels of social functioning (71%), while a smaller proportion indicated low levels (29%). Adolescents from two-parent families had the highest proportion of high psychosocial well-being (85.5%), followed by those from single-parent families (82.0%). In contrast, lower levels of psychosocial well-being were more common among adolescents from step-parent (30.0%) and extended families (35.3%). Chi-square tests indicated a statistically significant association between the two variables, $\chi^2(3, N = 327) = 9.10$, $p = .028$.

The second objective was to investigate the relationship between family hierarchy and adolescents' psychosocial well-being in public high schools in Ruiru Sub-County, Kiambu County, Kenya. Majority of participants (89%) reported a high level of shared decision making and most participants (87%) experienced high levels of shared power dynamics. Correlation analysis showed a significant positive correlation between adolescent psychosocial well-being and family role clarity ($\rho = .186$, $p = .001$), as well as between psychosocial well-being and family interactions ($\rho = .259$, $p < .001$). Additionally, family role clarity was strongly correlated with family interactions ($\rho = .401$, $p < .001$). However, whereas the regression model was statistically significant, F (2, 323) = 9.25, $p < .001$, explaining 5.4% of the variance in adolescent psychosocial well-being ($R^2 = .054$), only family interactions emerged as a significant positive predictor ($\beta = .192$, $p = .002$), indicating that higher levels of family interaction were associated with better psychosocial well-being among adolescents. In contrast, family role clarity did not have a significant effect ($\beta = .072$, $p = .235$).

The third objective was to analyze the intervening effect of family boundaries in the relationship between family structure and adolescents' psychosocial well-being in selected public high schools in Ruiru Sub-County, Kiambu County, Kenya. The results indicated that the majority (88%) experienced high communication quality within their families and 90.6% of respondents reported high levels of engagement within their families. The regression model showed that approximately 4.9% of the variance in adolescents' psychosocial well-being was explained by the combined influence of family structure, family boundaries, and their interaction. The ANOVA results ($F(3, 322) = 5.554$, $p = .001$) showed that the overall model was statistically

significant, suggesting that these variables jointly contributed to variations in psychosocial well-being. However, the coefficient analysis revealed that none of the individual predictors were statistically significant.

Implications

As pertains the relationship between family subsystems and adolescent psychosocial well-being, the pattern of results characterized by high reported clarity of family roles and interaction alongside generally high emotional and social functioning, and the stronger well-being in two-parent and single-parent households largely affirms Structural Family Therapy which predicts that stable family structure support healthy functioning by organizing roles and interactions within the family (Marti-Garcia et al., 2021). The lower well-being among adolescents in some step-parent or extended households suggests that not all non-nuclear forms automatically provide protective social integration. If boundaries are confused, the potential social support of extra kin may be undermined (Stapley et al., 2021). The findings therefore support Structural Family Therapy's emphasis on the functional quality of subsystems (not merely family form) and reinforce the Social Integration Theory's claim that the presence of ties matters only when those ties produce meaningful support (Grunow & Krapf, 2023; Jiménez et al., 2019). This theoretically implies that interventions should target strengthening interactional processes rather than focusing on family type alone.

The high levels of shared decision-making and shared power reported by participants, together with regression in which only family interactions predicted well-being, suggests a refinement of hierarchical claims in the Structural Family Theory. Classical Structural Family Theory highlight clearly defined leadership and role structures as buffers for adolescent adjustment (Jiménez et al., 2019), yet these

results indicate that the quality and frequency of interactional processes may be more immediate determinants of adolescent psychosocial well-being than formal role clarity. Theoretically, this suggests that the Structural Family Theory should emphasize interactive engagement and shared decision-making as key mechanisms through which hierarchical organization influences outcomes — and that assessments and interventions ought to focus more on strengthening meaningful family interactions rather than merely clarifying formal role assignments (Bobek et al., 2024).

The high levels of reported communication quality and engagement, coupled with the absence of any single significant predictor, suggest the presence of context-dependent mechanisms that shape whether particular family structures function as risk or protective factors. This points to the need for theory that captures interaction effects. The results have demonstrated that family structure, family boundaries, and their interaction, when were considered together, made a real difference in adolescents' well-being. However, no single factor alone stood out as a significant main cause. Overall, the studies demonstrate that adolescents' psychosocial outcomes are shaped less by isolated family structures and more by the quality of patterned interactions, especially balanced boundaries, hierarchy, and cohesion, that characterize how the family system organizes and supports daily functioning (Shon & Lee, 2024).

Conclusions

The first conclusion drawn from the findings is that well-functioning family structures characterized by clear family roles and healthy interactions play an important role in enhancing adolescents' psychosocial well-being. Adolescents from two-parent families reported the highest levels of psychosocial wellness, suggesting that cohesive and stable family environments foster emotional stability, social

competence, and reduced psychological distress. Conversely, adolescents from step-parent and extended families exhibited lower levels of well-being, potentially due to weakened emotional bonds.

The study also concludes that family hierarchies that promote shared power and decision-making positively influence adolescents' psychosocial well-being. Although both role clarity and family interactions were related to well-being, only family interactions significantly predicted positive outcomes, underscoring that open communication, cooperation, and mutual respect within families are more influential than mere clarity of roles. It means that adolescents flourish in family environments where authority is balanced and interactions are warm and supportive.

The last conclusion drawn from the study is that while family boundaries, structure, and their interaction collectively influence adolescents' psychosocial well-being, their individual roles have minimal effects. This indicates that family systems operate as part of a broader system of interconnected family factors. Most variations in psychosocial well-being are shaped by factors beyond family boundaries. Therefore, family boundaries do not serve as a strong factor in this relationship.

Recommendations

Based on the research findings, the researcher makes recommendations as follows:

i) Marriage and Family Therapists should emphasize healthy interactions. Family-based counselling and parenting workshops could help families especially step-parent and extended ones to manage relational challenges. In addition, schools should create platforms such as parent–adolescent forums and mentorship programs that encourage family engagement in adolescents' social and emotional development.

ii) Given the positive influence of family interaction on psychosocial well-being, parents should adopt more inclusive decision-making practices that allow adolescents to voice opinions and participate in family matters. They should be encouraged to enrol in programs such as family therapy sessions, joint recreational activities, and communication skills training to enhance family relationships.

iii) Since family boundaries, structure, and their interaction jointly contribute to psychosocial well-being, families should establish clear yet flexible boundaries that balance closeness and independence among members.

iv) Given that a large share of adolescent psychosocial well-being remained unexplained, educationists should expand their repertoire of knowledge of other possible factors within and outside the family system that contribute to adolescent overall well-being.

Areas for Further Research

The research proposes three key areas for future research:

i) This study was conceptually limited to three dimensions of family systems: structure, hierarchy, and boundaries. In effect, it excluded other critical factors. This narrow conceptual scope potentially contributed to the little explanatory power on adolescent psychosocial well-being. Future research should therefore expand the conceptual framework to include additional constructs within family systems theory. Incorporating broader dimensions could provide a more comprehensive understanding of how different family processes interact to shape adolescent well-being.

ii) The study was conducted exclusively among adolescents in public high schools within Ruiru Sub-County, Kiambu County, which limits the

generalizability of the findings to other contexts. Therefore, a similar study can be conducted in other counties in Kenya for comparison purposes.

iii) Methodologically, the study drew conclusions from a quantitative study hence lost out on the nuanced insights that qualitative research would generate. Therefore, a future study should adopt a mixed-methods approach or apply qualitative methodology such as interviews or focus group discussions to enrich understanding by capturing deeper, contextualized insights into the lived experiences of adolescents within the various family structures.

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APPENDIX I: INFORMED CONSENT FORM

Introduction: You are being invited to participate in a research study conducted by Judith Wangari Kibui as part of her master's degree in Marriage and Family Therapy at Pan Africa Christian University. The purpose of this study is to explore how different family boundaries influence the relationship between family structure and the psychosocial well-being of adolescents.

Participation Details: If you agree to participate, you will be asked to complete a questionnaire that will take approximately 20 minutes. The questionnaire will include questions about your family life, school experiences, and overall well-being.

Voluntary Participation: Your participation in this study is completely voluntary. You may choose not to participate, or you may withdraw from the study at any time without any penalty or loss of benefits to which you are otherwise entitled. Your decision will not affect your relationship with your school or Pan Africa Christian University.

Confidentiality: All the information you provide will be kept confidential. Your responses will be anonymous, and no personal information will be shared. The data collected will be used solely for the purposes of this research and may be published in academic journals or presented at conferences, but your identity will remain protected.

Risks and Benefits: There are no significant risks associated with participating in this study. However, reflecting on certain aspects of your family life may bring up strong emotions. If you feel uncomfortable at any time, you may stop participating. The benefits of participating include contributing to research that may help improve support systems for students in schools.

Contact Information: If you have any questions or concerns about this study, please contact me on 0722 386 390.

Consent: By signing below, you are indicating that you have read and understood this consent form, and you agree to participate in the study.

Participant's Signature: _____

Date: _____

APPENDIX II: QUESTIONNAIRE TO STUDENTS

Dear respondent. This questionnaire contains three brief sections that should only take a moment of your time. Please place a tick against the box that closely represents the true picture.

Section A: Demographic Information

1. Please indicate your gender.
   Male ☐
   Female ☐

2. Which level of study?
   Form 2 ☐
   Form 3 ☐

3. What is the type of school?
   Mixed school ☐
   Boys only ☐
   Girls only ☐

4. Which of the following family types best describes your family?
   Two-parent family ☐
   Single-parent family ☐
   Step-parent family ☐
   Extended family (i.e., living with a relative) ☐

Section B: Family Structure

Please read each statement carefully and think about how well it describes your family's functioning over the past six months. Using the provided scale, indicate how frequently each statement applies to your family.

Scale: 1 - Strongly disagree; 2 – Disagree; 3 – Agree; 4 - Strongly Disagree

FAMILY STRUCTURE ITEMS	1	2	3	4
FAMILY SUBSYSTEM				
Family roles				
Family members have defined roles and responsibilities.				
Family members clearly understand their roles.				
Roles are flexible and change as needed.				
Family members know what is expected of them.				
Family interaction				
Family members listen to each other.				
Family members openly discuss problems.				
Family members support each other in difficult times.				
Family members feel heard and understood.				
Family interactions are positive and constructive.				
Family members can express their needs and concerns.				
FAMILY HIERARCHY				

FAMILY STRUCTURE ITEMS	1	2	3	4
Decision making				
Decisions are made jointly by family members.				
Family members agree on major decisions.				
Important decisions are discussed openly.				
Family decisions are made with everyone's input.				
Decision-making processes are fair and equitable.				
Family members feel included in decision-making.				
Power dynamics				
Family members share power and authority.				
One person in the family tends to make most decisions.				
Power is distributed among family members.				
Authority is clear and accepted by all members.				
Family members have equal say in family matters.				
Power imbalances are addressed and managed.				
FAMILY BOUNDARIES				
Communication				
Family members openly express their feelings.				
Family members feel free to talk about their concerns.				
Communication within the family is open and honest.				
Family members are comfortable sharing their thoughts.				
Communication problems are addressed promptly.				
Family members communicate in a respectful manner.				
Engagement				
Family members are involved in each other’s lives.				
Family members actively participate in family activities.				
Family involvement is encouraged and supported.				
Family members show interest in each other’s lives.				
Family activities are enjoyed by all members.				
Family members make time for each other.				

SECTION C: ADOLESCENT PSYCHOSOCIAL WELL-BEING

Please read each statement carefully and reflect on how often you have experienced the feelings or behaviors described over the past month. Using the provided scale, indicate how frequently each statement applies to you.

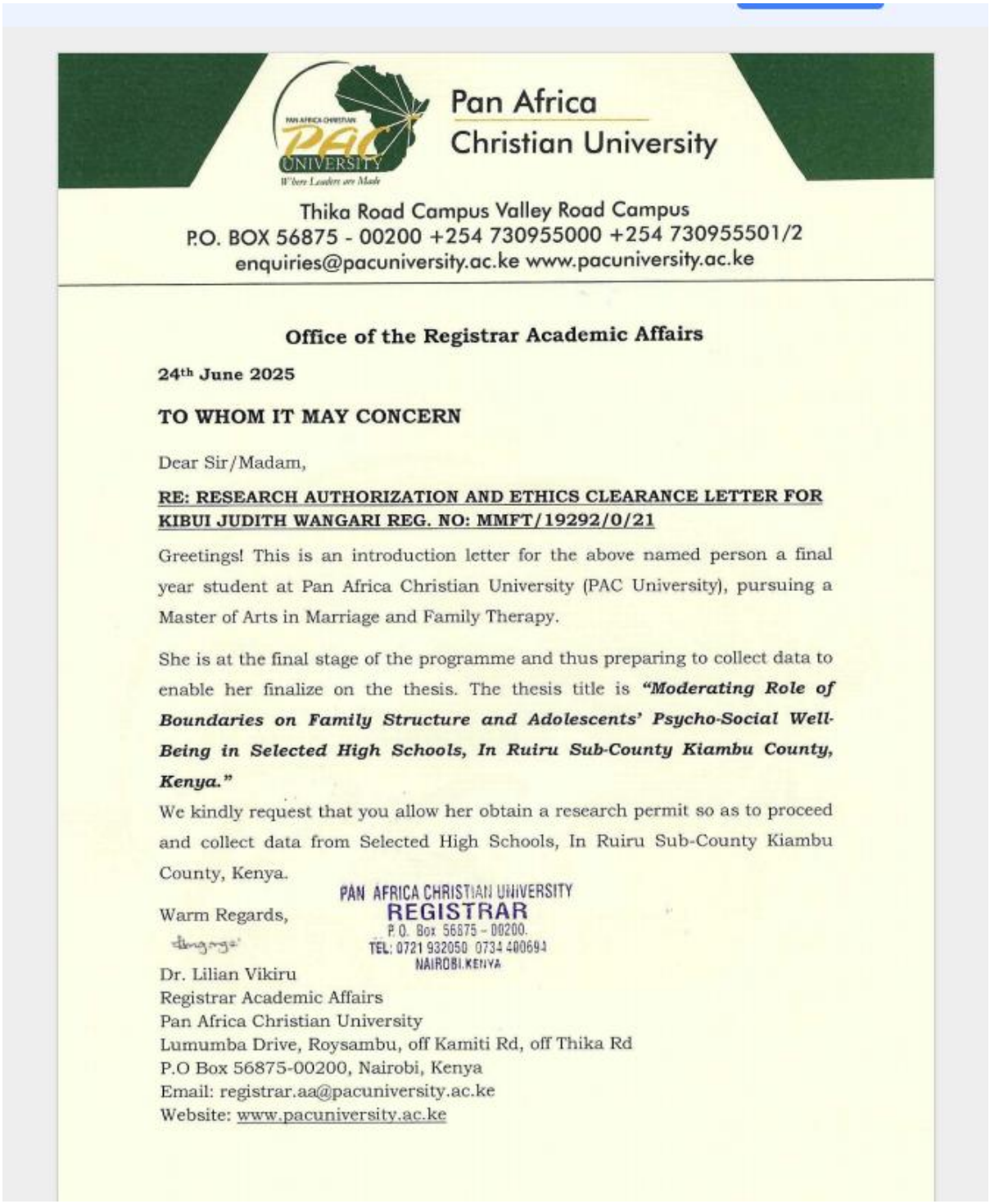
Scale:

1 – Never; 2 – Rarely; 3 – Sometimes; 4 – Often; 5 - Always

	1	2	3	4	5
Emotional well-being					
I feel happy and content most of the time					
I feel good about myself					
I feel that I can handle stress well					
I feel hopeful about the future					
I have a positive outlook on life					
Psychological distress					
I feel anxious or worried frequently					
I feel sad or depressed often					
I have trouble sleeping because of worrying thoughts					
I feel overwhelmed by daily responsibilities					
I feel irritable or easily frustrated					
Social functioning					
I get along well with my friends					
I feel supported by my family					
I feel like I belong at school					
I have friends who I can talk to about my problems					

The end

APPENDIX III: PAC UNIVERSITY RESEARCH AUTHORIZATION LETTER



Pan Africa Christian University

Thika Road Campus Valley Road Campus
P.O. BOX 56875 - 00200 +254 730955000 +254 730955501/2
enquiries@pacuniversity.ac.ke www.pacuniversity.ac.ke

Office of the Registrar Academic Affairs

24th June 2025

TO WHOM IT MAY CONCERN

Dear Sir/Madam,

RE: RESEARCH AUTHORIZATION AND ETHICS CLEARANCE LETTER FOR KIBUI JUDITH WANGARI REG. NO: MMFT/19292/0/21

Greetings! This is an introduction letter for the above named person a final year student at Pan Africa Christian University (PAC University), pursuing a Master of Arts in Marriage and Family Therapy.

She is at the final stage of the programme and thus preparing to collect data to enable her finalize on the thesis. The thesis title is ***"Moderating Role of Boundaries on Family Structure and Adolescents' Psycho-Social Well-Being in Selected High Schools, In Ruiru Sub-County Kiambu County, Kenya."***

We kindly request that you allow her obtain a research permit so as to proceed and collect data from Selected High Schools, In Ruiru Sub-County Kiambu County, Kenya.

PAN AFRICA CHRISTIAN UNIVERSITY
REGISTRAR
P.O. Box 56875 - 00200.
TEL: 0721 932050 0734 400694
NAIROBI.KENYA

Warm Regards,

Dr. Lilian Vikiru
Registrar Academic Affairs
Pan Africa Christian University
Lumumba Drive, Roysambu, off Kamiti Rd, off Thika Rd
P.O Box 56875-00200, Nairobi, Kenya
Email: registrar.aa@pacuniversity.ac.ke
Website: www.pacuniversity.ac.ke

APPENDIX IV: NACOSTI PERMIT

REPUBLIC OF KENYA

NATIONAL COMMISSION FOR SCIENCE,TECHNOLOGY & INNOVATION

Ref No: 187841

Date of Issue: 25/June/2025

RESEARCH LICENSE



This is to Certify that Ms.. Judith Wangari Kibui of Pan Africa Christian University, has been licensed to conduct research as per the provision of the Science, Technology and Innovation Act, 2013 (Rev.2014) in Kiambu on the topic: MODERATING ROLE OF BOUNDARIES ON FAMILY STRUCTURE AND ADOLESCENTS' PSYCHO-SOCIAL WELL-BEING IN SELECTED HIGH SCHOOLS, IN RUIRU SUB-COUNTY KIAMBU COUNTY, KENYA for the period ending : 25/June/2026.

License No: NACOSTI/P/25/4175270

187841

Applicant Identification Number

Deputy Director
NATIONAL COMMISSION FOR SCIENCE,TECHNOLOGY & INNOVATION

Verification QR Code

NOTE: This is a computer generated License. To verify the authenticity of this document, Scan the QR Code using QR scanner application.

See overleaf for conditions

APPENDIX V: COUNTY DIRECTOR OF EDUCATION RESEARCH AUTHORIZATION

MINISTRY OF EDUCATION
State Department For Basic Education

Telephone: Kiambu (office) 0768 970412

Email:directoreducationkiambu@yahoo.com
When replying please quote

COUNTY DIRECTOR OF EDUCATION
KIAMBU COUNTY
P. O. Box 2300
KIAMBU

KBU/CDE/DEPT/ 8/VOL.II

1st July 2025

Judith Wangari Kibui
Pan African Christian University
NAIROBI, KENYA

RE: RESEARCH AUTHORIZATION

Reference is made to NACOSTI letter NACOSTI/P/25/4175 dated 25th June, 2025.

You have been authorized to research on **"Moderating Role of Boundaries on Family Structure and Adolescents' Psycho-Social Well-Being in Selected Schools, in Ruiru Sub-County Kiambu County, Kenya"** for a period ending 25th June, 2026.

Please accord him the necessary assistance. You are requested to share with us a copy of your research findings when you conclude your research.

FREDRICK N. KIMARU
For: COUNTY DIRECTOR OF EDUCATION
KIAMBU COUNTY

APPENDIX VI: DATA COLLECTION REQUEST LETTER IN SCHOOLS

The Principal/Deputy Principal,

Kwihota Mixed Secondary School

Dear Sir/Madam,

Re: Request for permission to collect data in your school

My name is Judith Kibui a student at Pan Africa University in Kenya. I am pursuing a Masters degree in Marriage and Family Therapy and conducting a study on how different family boundaries influence the relationship between family structure and the psychosocial well-being of adolescents.

This study will be helpful to students, counsellors, teachers, parents, and policy makers in the education sector. The findings of the study will not be used to victimize or tarnish the name of your school in any way. Confidentiality will be maintained and I plan to share the study findings with you. If you are okay with allowing your students take part in the study, kindly read and sign the attached consent form. Your support is greatly appreciated.

Thanks and Regards,

Signed .....

Judith Kibui

APPENDIX VII: MAP OF STUDY LOCATION

